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XLVI REGIONAL COMMITTEE MEETING

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PROPOSAL TO CONVENE A PAN AMERICAN CONFERENCE ON HEALTH AND THE ENVIRONMENT IN SUSTAINABLE DEVELOPMENT

In 1992, the XXXVI Meeting of the Directing Council of the Pan American Health Organization adopted Resolution CD36.R13, requesting the Director, *inter alia*, to study the desirability and feasibility of convening a Pan American Conference on Health, Environment, and Development. Participating in this Conference would be representatives, at the highest level, from the Region's health, public works, and environmental sectors, for the analysis of the common problems, framework, and forms of action. The resolution likewise requested the Director to present a recommendation in this regard to the 111th Meeting of the Executive Committee in June 1993. After examining the Director's proposal that the Conference be held in 1994, the Executive Committee felt that the countries needed more time to prepare and recommended that the Conference be postponed until 1995. This would also make it possible to take into account the discussions of the United Nations Commission on Sustainable Development scheduled for May 1994.

Document CE113/12, presented at the 113th Meeting of the Executive Committee (annex), updates the 1993 proposal. It notes the conclusions of the 111th Meeting of the Executive Committee regarding current actions and processes with respect to health and the environment in the aftermath of the Conference of Rio de Janeiro, as well as those being carried out by PAHO/WHO. Moreover, the document proposes a plan for holding the Pan American Conference on Health and the Environment in Sustainable Development and includes a preliminary agenda for it.

The Executive Committee deliberated on several aspects of the plan proposed in the document. There was consensus on the desirability of holding the Conference, which would represent an important contribution to the integration of the various social and economic sectors connected with health and the environment and help to ensure that their needs are duly incorporated into the national plans for sustainable development.

Taking into account the overall process of monitoring the commitments of the United Nations Conference on Environment and Development and the need for each country to carry out its respective process and arrange for the financing, it was determined that the Conference should be held in August 1995. The Committee stressed the need for the Subcommittee on Planning and Programming (December 1994 or April 1995) and the Executive Committee (June 1995) to be involved in the various stages of preparation of the Conference and the need to orient the Conference's agenda toward action. The importance of obtaining the external financing that would enable the Conference to be held was also emphasized.

The Executive Committee adopted the following resolution (CE113.R6) for the consideration of the XXIV Pan American Sanitary Conference:

THE 113th MEETING OF THE EXECUTIVE COMMITTEE,

Having seen the proposal for convening a Pan American Conference on Health and the Environment in Sustainable Development, to be held in 1995 (Document CE113/12), which examines the desirability and feasibility of holding such a conference and presents a corresponding agenda and development plan,

RESOLVES:

To recommend to the XXIV Pan American Sanitary Conference the adoption of a resolution along the following lines:

THE XXIV PAN AMERICAN SANITARY CONFERENCE,

Having seen the proposal for convening a Pan American Conference on Health and the Environment in Sustainable Development, to be held in 1995 (Document CSP24/15);

Noting the follow-up actions recommended in Agenda 21 of the United Nations Conference on Environment and Development (UNCED), held in 1992, which considers health as it relates to the environment and development, as well as the recommendation that the countries prepare national plans for sustainable development and that such plans incorporate the components of health in general and environmental health in particular;

Bearing in mind Resolution XIII of the XXXVI Meeting of the Directing Council (1992), which requested the Director to study the feasibility of convening such a conference; and

Considering that it is urgent that the health sector have a consistent policy at the regional level which recognizes the close relationship that exists between health, the environment, and development and which facilitates the sector's active participation from the outset in the preparation of national plans for sustainable development and in the discussion, follow-up, and execution of UNCED's Agenda 21 at the national and international level,

RESOLVES:

1. To urge the Member States:
 - (a) To incorporate the components of health and environment in their national plans for sustainable development;
 - (b) To continue to strengthen institutional capacity for the management of environmental health at all levels, including the strengthening or establishment of a high-level commission for coordinating activities for the effective implementation of actions in the areas of health and the environment;
 - (c) To participate actively in the various preparatory stages of the Pan American Conference on Health and the Environment in Sustainable Development, to be held in 1995, especially in the national phase.
2. To request the Director:
 - (a) To ensure that the Pan American Conference on Health and the Environment in Sustainable Development will be held on 21-23 August 1995, pursuant to securing the necessary funding and acceptance by the Subcommittee on Planning and Programming of the development plan that has been proposed;
 - (b) To carry forward his negotiations with the World Bank and the Inter-American Development Bank to ensure their full cooperation in holding the conference, and also to encourage other regional, bilateral, and nongovernmental organizations concerned with the subject to participate in the conference and incorporate health and environmental considerations in their development programs;
 - (c) To continue his efforts on behalf of the countries, as requested in Resolution XIII of the XXXVI Meeting of the Directing Council, to see that their needs are met in the area of health and the environment, especially in terms of the mobilization of resources.

*executive committee of
the directing council*



**PAN AMERICAN
HEALTH
ORGANIZATION**

*working party of
the regional committee*

**WORLD
HEALTH
ORGANIZATION**



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CSP24/15 (Eng.)
ANNEX

Item 4.4 of the provisional agenda

CE113/12 (Eng.)
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**PROPOSAL FOR CONVENING A PAN AMERICAN CONFERENCE ON HEALTH AND
THE ENVIRONMENT IN SUSTAINABLE DEVELOPMENT TO BE HELD IN 1995**

In 1992, the XXXVI Meeting of the Directing Council of the Pan American Health Organization examined the Report on the United Nations Conference on Environment and Development and Its Significance for the Work of the Pan American Health Organization, presented by the Secretariat. The Meeting adopted Resolution XIII, which urges the Member Governments to strengthen the technical, administrative, and managerial capabilities of national and local institutions responsible for the management of environmental health. This strengthening is to be accomplished principally through: preparation of sectoral analyses; formulation of comprehensive sectoral policies; and formulation of plans and coordination of their implementation. The Resolution also asks that each country promote the establishment and/or strengthening of a high-level commission to coordinate activities aimed at ensuring the effectiveness of actions related to health and environment.

In addition, the Resolution requests the Director to provide support to the countries in the process of formulating policies, regulations, and plans related to health, environment, and development, with a view to supporting actions in health protection and promotion. Among other requests, it is suggested that a study be made of the desirability and feasibility of convening a Pan American Conference on Health, Environment, and Development. This event would bring together representatives from the highest levels of the health, public works, and environmental sectors in the Region and provide them with a forum to analyze common problems, framework, and actions. The Director was requested to present a recommendation to the 111th Meeting of the Executive Committee in June 1993.

In response to this request, the Organization initiated collaborative activities with the governments, and the Secretariat presented to the 111th Meeting of the Executive Committee a proposal for a Pan American Conference on Health, Environment, and Development to be carried out in 1994 (Document CE111/10, May 1993). After analyzing the proposal, the Executive Committee decided that the Conference could provide a vehicle for achieving the integration of all the sectors that, in one way or another, must play a role in any discussion of health and the environment in development. But it also judged that a longer period of preparation would be needed and recommended that the Conference be postponed until 1995. This postponement would also permit careful study of the discussions of the Commission on Sustainable Development of the United Nations Economic and Social Council, to be carried out in May 1994.

The present document outlines actions and processes related to health and the environment that are under way as part of the follow-up to the Rio Conference, and describes the Organization's cooperation with the Member States in this area. A plan is proposed for the development of a Pan American Conference on Health and the Environment in Sustainable Development, including a preliminary conference agenda.

CONTENTS

	<u>Page</u>
1. Introduction	3
2. Health in the Follow-up of the United Nations Conference on Environment and Development	4
2.1 At the Global Level	4
2.2 At the Regional Level	9
2.3 At the Country Level	12
3. The Pan American Conference on Health and the Environment in Sustainable Development	17
3.1 Scope of the Conference	17
3.2 Objective	18
3.3 Expected Outcomes	18
3.4 Alliances	19
3.5 Development Plan for the Conference	19
3.6 Preliminary Budget	29
Annex 1: Report on the United Nations Conference on Environment and Development and Its Significance for the Work of the Pan American Health Organization (Document CD36/22)	
Annex 2: WHO Global Strategy for Health and Environment (Resolution WHA46.20)	

1. Introduction

Environmental problems and their relation to development have been discussed in innumerable forums at different levels over the last two decades. Attention has focused as well on the importance of the relationship between human beings and the environment. In 1972 the United Nations Conference on the Human Environment affirmed that people have the fundamental right to freedom, equality, and decent living conditions in an environment that allows life to be lived with dignity and well-being. The 1972 Conference thus already highlighted the importance of rational management of the relationship between humans and the environment, describing it as essential if humankind is to survive and improve its well-being. Despite these recommendations made in 1972, however, in 1992 the United Nations Conference on Environment and Development (UNCED) warned that although progress had been made, mainly in terms of understanding more clearly the implications of environmental problems, many problems had grown worse in the intervening 20 years. Moreover, UNCED considered it highly likely that existing and potential problems will become even more serious if the necessary measures are not taken to address them.

A special feature of UNCED was its emphasis on the critical role of health and the environment in the attainment of well-being. The Conference stated unequivocally that the prospects for survival of the species depend on measures by humans to develop the social and economic environment in an appropriate and sustainable manner. It was made clear, moreover, that human health cannot be considered apart from the myriad of environmental factors that affect it, among them chemical substances, water and air pollution, contamination of food, poverty, urbanization, the proliferation of disease vectors, underdevelopment, technology, trade, and others.

"Agenda 21" of UNCED details the actions that will be needed in order to achieve sustainable development. This plan of action has important implications for the health agencies, both national and international; it requires the health sector and other sectors to broaden their vision of health, the environment, and development, to reorder their priorities, and to base their programs and activities on a holistic approach that addresses the total problem. The Report on the United Nations Conference on Environment and Development and Its Significance for the Work of the Pan American Health Organization, Document CD36/22, 17 August 1992 (Annex 1) analyzes the implications of Agenda 21, and concludes that agencies both within and outside the health sector will need to develop new attitudes and new ways of thinking and acting that are sensitive to existing and potential problems. In order to attain the objectives of Agenda 21, health professionals should work jointly with other social and economic sectors to determine the best path to follow, seeking innovative ways of meeting the present and future needs of humankind; in this way the proposed solutions can be understood,

accepted, integrated into the national processes, and implemented by all sectors that are directly and indirectly responsible for health, the environment, and development.

From the point of view of the health sector the proposals being set forth are not necessarily new. Many of them have been discussed and included in resolutions of the Governing Bodies of the World Health Organization (WHO) and the Pan American Health Organization (PAHO). However, their application and results have been limited, particularly in terms of cooperation with other sectors; this is due not only to the health sector's lack of capacity to promote them but also to the lack of intersectoral forums where the measures could be discussed and incorporated by the other sectors. The Agenda 21 proposals offer an opportunity to begin mobilizing the necessary cooperation. Within the framework of this program, the challenge for the health sector is to ensure that considerations of health and environmental health are incorporated adequately into the national plans and programs for sustainable development that the countries will prepare in accordance with paragraph 38.8 of Agenda 21.

2. Health in the Follow-up of the United Nations Conference on Environment and Development

UNCED's Agenda 21 asks organizations of the United Nations system to incorporate the Agenda 21 recommendations into their activities. In response, United Nations organizations as well as bilateral and nongovernmental agencies are carrying out actions toward this end. With regard to health and the environment the recommendations have been implemented in some cases. In many other instances, however, they are absent, owing largely to the lack of the integrated approaches required.

2.1 *At the Global Level*

2.1.1 *The Commission on Sustainable Development*

UNCED, held in Rio de Janeiro, Brazil, from 3 to 14 June 1992, marked the beginning of a major new phase of international cooperation and development in managing the environment, based on recognition of the need to take a comprehensive approach to problems concerning the environment and development. Among other recommendations, the Conference in paragraph 38.11 of Agenda 21 called for a high-level Commission on Sustainable Development to be established in accordance with article 68 of the United Nations Charter. This Commission would report to the Economic and Social Council and, through it, to the United Nations General Assembly. In its resolution 47/191, Institutional Arrangements to Follow-up the United Nations Conference on Environment and Development, the General Assembly endorsed this recommendation. The Economic and Social Council therefore established the Commission, giving it responsibility for, inter alia, monitoring the progress made in

implementing Agenda 21 as well as the activities related to integrating the goals on environment and development into the United Nations system. The Commission was established with 53 Member States, including Antigua and Barbuda, Barbados, Bolivia, Brazil, Canada, Chile, Colombia, Cuba, Mexico, the United States of America, Uruguay, and Venezuela.

The Commission's work includes the analysis over several years of progress made in implementing the following sectoral groups:

- 1994: health (Chapter 6), human settlements (Chapter 7), and fresh water (Chapter 18); toxic chemicals (Chapter 19), solid wastes (Chapter 21), and hazardous wastes (Chapters 20 and 22);
- 1995: land, desertification, forests, and biodiversity;
- 1996: atmosphere, oceans, and all kinds of seas.

In keeping with the request by the Chair of the Commission on Sustainable Development, WHO has primary responsibility for preparing the report on progress in implementing the health-related components of the first sectoral group of Agenda 21, to be presented to the Commission on Sustainable Development in May 1994. WHO/Geneva is currently in the process of preparing this report in collaboration with various international organizations, United Nations programs, and the WHO regional offices.

2.1.2 WHO Global Strategy for Health and Environment

In May 1992, the World Health Assembly (Resolution WHA45.31) requested the Director-General of WHO to formulate a new global WHO strategy for environmental health based on the findings and recommendations of the WHO Commission on Health and Environment and on the outcome of the United Nations Conference on Environment and Development. In May 1993 the 46th World Health Assembly adopted the WHO Global Strategy for Health and Environment, Document WHO/EHE/93.2, with Resolution WHA46.20 (Annex 2).

The Resolution endorses the proposed strategy and calls upon the Member States: 1) to give high priority to matters relating to health and the environment in the development of plans on sustainable development at the country level, in line with paragraph 38.8 of Agenda 21, and to utilize the WHO global strategy as the framework for the environmental health aspects of these plans; 2) to collaborate with WHO in order to strengthen their own capacities in matters related to health and the environment for the attainment of environmentally sound and sustainable development; 3) to allocate adequate

resources to implement the WHO global strategy at the country level; 4) to establish appropriate coordinating mechanisms to ensure collaboration among the authorities in all sectors having responsibilities for health and the environment, including nongovernmental organizations.

The Resolution also appeals to multilateral and bilateral funding organizations to support the WHO global strategy and to give high priority to programs and projects on health and the environment in financing sustainable development.

The Resolution requests the WHO regional committees to use the global strategy in developing corresponding regional strategies and action plans.

In addition, it asks the Director-General of WHO, among other actions, to support the Member States in ensuring that measures for health and the environment are fully incorporated into plans and activities for sustainable development.

In accordance with the new WHO Global Strategy for Health and Environment, the Ninth General Program of Work of the World Health Organization (1996-2001) maintains "health for all by the year 2000" as a frame of reference for the Organization's actions, and it sets goals that are congruent with those already established in other forums and by other agencies, such as the United Nations World Summit for Children and UNCED. Their goals are reflected in the Ninth General Program of Work as part of the basis for joint action policies on global health.

As the minimum to be achieved by the end of the century, the following four interrelated policy directions are identified:

- integrating health and human development in public policies;
- ensuring equitable access to the health services;
- promoting and protecting health;
- preventing and controlling specific health problems.

In light of these policy orientations, the objectives of the Organization include, inter alia, to permit universal access to safe and healthy environments and living conditions, with the following targets:

- the percentage of the population with safe water in the home or with reasonable access will be at least 85%;

- the percentage of the population with access to safe waste disposal will be at least 75 %;
- mortality due to instability and situations of violence will be reduced by 15 %.

2.1.3 *Capacity 21*

In Agenda 21, the United Nations Conference on Environment and Development urges the Member States to develop and implement their own plans for sustainable development. However, each country's ability to proceed along the path of sustainable development is determined by the capacities of its people and institutions. One of the principal limitations identified in the developing countries is the lack of appropriate endogenous capacities. At UNCED several countries requested that programs be prepared to help them build those institutions and infrastructures, train their human resources, and facilitate the participation of all individuals involved in decision-making. In response to this concern, the United Nations Development Program (UNDP) launched Capacity 21, an interagency project designed to support the developing countries in formulating goals, plans, and programs geared toward development that is economically, socially, and environmentally sustainable, and to increase the capacity of these countries to continue formulating and implementing their own policies for sustainable development. The program's central aim is to build capacity to improve the environment and preserve natural resources in the context of economic and social development, processes which implicitly include health concerns.

An important factor in a country's progress toward sustainable development is its ability to care for health and the environment. This depends in part on having the necessary infrastructure to improve environmental conditions that influence the health of the population: for example, water supply and sanitation, control of infectious diseases, protection of vulnerable groups, as well as the protection of human health from the adverse effects of development.

Under Capacity 21, WHO in a joint effort with UNDP has launched specific initiatives in eight countries designed to develop the chapter on health and the environment in each country's national plan for sustainable development. These initiatives, carried out by national authorities in close collaboration with PAHO and the UNDP country offices, are mobilizing the health sector and raising the awareness of agencies related to environment and development (such as housing, public works, local authorities, agriculture, and industry). Although the types of problems, responsibilities and interests vary considerably from country to country, all have basic needs related to health and the environment that must be served. In response to these needs, a common strategy has been established with the following objectives and expected results:

- To increase the participation of the health and environmental sectors in national planning for sustainable development.
- To provide input from the health and environmental sectors into national plans for sustainable development, including the identification of needs for capacity-building in the area of health and the environment.
- To evaluate the extent to which concerns related to health and the environment have been incorporated into national plans for sustainable development and how this situation can be improved.

The initiative will also evaluate the results and describe the approaches and experiences of each country, and will compile relevant documents for use by other countries.

In the first phase, the participating countries of the Region were Guatemala and Barbados. Cooperation began in the latter half of 1993, and the first phase is expected to last between six and twelve months. But it is hoped that support for the planning and implementation of health-related activities in sustainable development will involve continuing collaboration between the countries, WHO/PAHO, UNDP, and other United Nations agencies under Capacity 21. It is clear that the countries which are preparing national plans for sustainable development are in urgent need of guidance to help them incorporate concerns related to health and the environment.

Recently Mexico has joined the group of countries that will receive support in this process.

2.1.4 *United Nations Global Conference on the Sustainable Development in Small Island Developing States, SIDS*

The proposal for this conference was made during UNCED. Held in Barbados from 25 April to 6 May 1994, it was the first international conference to provide follow-up to the Rio de Janeiro meeting. Its significance was two-fold: it signaled that the small islands constitute a vulnerable group in need of international attention, and it was the first time that the United Nations organized an international conference for countries with these particular characteristics. The objective of the Conference was to prepare strategies and measures for promoting sustainable development in the small island developing states, using Agenda 21 as a base. However, the Program of Action for the Sustainable Development of Small Island Developing States, prepared in the Conference, gives little consideration to human health or environmental health. This reflects a general lack of recognition of the tripartite relationship between health, the environment, and development, which constitutes the basis of sustainable development.

2.2 *At the Regional Level*

Just as at the global level, the Member States of the various WHO Regions have expressed the need to consider health in relation to the environment and sustainable development, to develop policies, and to establish for each state basic principles, strategic elements, and priorities for joint and individual action. Currently each Region is in the process of developing its own regional strategies, using the WHO global strategy as a foundation.

2.2.1 *The Region of Europe*

Actions carried out by the WHO Regional Office for Europe are of special interest to the Americas. In 1989 the Regional Office held the First European Conference on Environment and Health, bringing together ministers and other high-level representatives of the environmental and health sectors of 29 European countries and the European Commission. In its final session the Conference adopted the European Charter on Environment and Health, which is considered an extension of the policy of health for all and of the goals for Europe that were adopted by the 32 Member States of the WHO Region of Europe in 1984. The Charter also incorporates the basic philosophy of the World Commission on Environment and Development, created by the United Nations.

Currently the WHO Regional Office for Europe is collaborating with the European Commission to prepare the Second European Conference on Environment and Health, to be held in Helsinki from 20-22 June 1994. The Conference is expected to endorse an Environmental Health Action Plan for Europe.

2.2.2 *The Region of the Americas*

Our Own Agenda

The nature of the environmental problems facing the Latin American and Caribbean countries and their relation to development was described in a 1989 report entitled "Our Own Agenda," which was prepared by the Latin American and Caribbean Commission on Development and Environment. The report, which was sponsored by UNDP and the Inter-American Development Bank (IDB) and drafted in preparation for UNCED, raises common regional concerns regarding these two vital subjects and suggests more focused approaches and ways of incorporating environmental factors into regional development programs. The report also emphasizes the need to define our own agenda and strategy for attaining sustainable development in Latin America and the Caribbean. Those involved in preparing the document included, in addition to specialists in the field, several organizations of the United Nations system, the Inter-American Development Bank, the regional offices of UNDP, the Office for Latin America and the

Caribbean of UNEP, the Economic Commission for Latin America and the Caribbean (ECLAC), the Office of Services and Projects of UNDP, and PAHO.

For the countries of the Region of the Americas "Our Own Agenda" provides an important complement to UNCED's Agenda 21. Its contents should be taken into account in preparing the health and environmental components of the sustainable development plans for the hemisphere's countries.

Health in the Regional Follow-up of UNCED

At the Regional level PAHO and the Organization of American States (OAS) have identified several areas of common interest, including environmental pollution, human resources development, poverty, and the environmental impact of tourism, among others. Through its Division of Health and Environment, PAHO participates in the ad hoc Group on the Regional Follow-Up of Agenda 21, coordinated by the OAS. This group seeks to forge an understanding among regional agencies in order to carry out the common objective of monitoring the results of UNCED. In this process PAHO focuses on the incorporation of aspects relating to health and environmental health.

In the Region of the Americas, several countries have determined that poverty is a priority environmental problem that must be solved in order to begin the process of sustainable development. A healthy environment is essential because the poor, in addition to being forced to live in unhealthful areas, are driven by need to adopt practices which contribute to environmental deterioration and to the destruction of natural resources in the areas where they live. This in turn affects food production and the prospects for survival. In response to this problem, the OAS, in its 20th Special Session of the General Assembly (Mexico City, Mexico, 17-19 February 1994) discussed the subject: Commitment on a Partnership for Development and Struggle to Overcome Extreme Poverty. PAHO participated in the Assembly and stressed the importance of health considerations in finding a solution to the problem. The priorities of Collective Cooperation for Development, of the OAS system, and of the recently created Inter-American Council for Comprehensive Development all give first mention to improving levels of nutrition and health and attending to population issues, including family planning.

In 1993 the Inter-American Development Bank and UNDP jointly sponsored a Forum on Social Reform and Poverty, at which PAHO again emphasized the need to view health concerns as an essential part of the problem. This forum was intended to call attention to the social dimension which, it was affirmed, is emerging as central to the development agenda of our countries in the coming years.

The relationship between economic development and health is also of concern to both the Economic Commission for Latin America and the Caribbean (ECLAC) and PAHO, leading the two agencies to cooperate in preparing a proposal on "Health, Social Equity, and Changing Production Patterns." This proposal revisits the subject of health in Latin America and the Caribbean, emphasizing the complementary relationship that exists between health and economic development.

When the Caribbean Community (CARICOM) held its Summit on Tourism in Kingston, Jamaica, in February 1992, the focus was especially on the critical importance of the environment and environmental quality with regard to the perception and reality of tourism. The leaders of the Caribbean Community committed themselves to work with regional and global organizations on a range of environmental issues. There was agreement on the need to devise practical approaches aimed at developing tourism in a sustainable manner and easing concerns that human and environmental health are being endangered.

Following these events, PAHO, the OAS, and the Caribbean Environmental Health Institute (CEHI) proposed an initiative to support the Region of the Caribbean in its efforts to sustain tourist development while protecting the natural environment. In November 1993 the First Regional Conference on Environmental Health and the Sustainable Tourism Development in the Caribbean was held in Nassau, the Bahamas. One of its recommendations was to establish an advisory group made up of four or five Caribbean governments which would collaborate with representatives of PAHO, OAS, ECLAC, the Caribbean Tourism Organization, Caribbean Hotel Association, CEHI, and CARICOM in the planning, implementation, and evaluation of a program of activities. It was agreed that every effort should be made to ensure that the recommendations, especially the proposal for action on Environmental Health and Tourism, are integrated into the Action Program for the Development of the Small Island States. It was also recommended that steps be taken to develop a regional plan of action that is environmentally, socially, and economically sustainable in order to reverse the trends toward environmental degradation, and that the plan be submitted to the Global Conference as a model initiative for a group of islands in which the environment constitutes the basic resource for tourist development.

In the area of health and environmental health the Organization will continue making every effort to support the countries and to take advantage of and further the positive international situation with regional and global agencies, strengthening international cooperation and reinforcing the role of health and the environment in sustainable comprehensive development. In this regard, PAHO has also proposed the development of a Regional Plan for Investment in the Environment and Health (PIAS), that as an integral part of the agenda for sustainable development in the hemisphere, identifies the investments that will be necessary in the Region over the next 12 years to

overcome deficiencies in health services infrastructure, drinking water supply, and basic sanitation. The viability of this Plan will depend on a strategic alliance between all the international organizations involved in cooperation for development, and on the political commitment of governments to overcome these deficiencies and meet the future needs of a growing population. It will require, as well, close coordination at the national level between the health sector and other sectors involved in socioeconomic development.

In light of the foregoing it is clear that the implementation of Agenda 21 at the country level, including the preparation of plans for sustainable development, is first and foremost the responsibility of governments, and international cooperation should support those efforts. The support requested from the Director of PAHO in Resolution XIII of the XXXVI Meeting of the Directing Council--for the formulation of common policies and national regulations and plans relating to health and the environment in sustainable development, aimed at protecting and promoting human health--can be greatly strengthened through the process of preparing the Pan American Conference on Health and the Environment in Sustainable Development, and take concrete form in the Pan American Charter on Health and the Environment in Development.

2.3 *At the Country Level*

Agenda 21 requests the countries to prepare national plans for sustainable development. Many countries have responded to this appeal and are in the process of preparing their plans, using their own resources or support provided by international or bilateral agencies, NGOs, and others. Although the health sector was not sufficiently involved in the preparatory stages of UNCED, as can be seen from the country documents presented to UNCED in 1992, the current process of preparing national plans offers a new opportunity for the health sector to make known its concerns and needs and to participate actively in planning, with the goal of ensuring that the plans for sustainable development and environmental programs give adequate consideration to health needs.

In the Region of the Americas, PAHO, working mainly through the Division of Health and Environment (HPE) and the PAHO/WHO Representative Offices in the countries, has concentrated on providing support to the health authorities so that the sector can participate actively in preparing the national plans for sustainable development. This has included the production of documents aimed at strengthening the national processes initiated by various countries of the Region. It is expected that national gatherings will be convened during 1994 to facilitate the incorporation of health components into the national plans for sustainable development, contributing to fulfillment of the commitments made at UNCED.

The national processes that have been undertaken toward this end include the creation of mechanisms to promote intersectoral coordination and action. This

coordination will need to begin at high levels so as to ensure that the responsible entities have sufficient authority to obtain the necessary cooperation. However, it should be noted that at the country level Agenda 21 is only beginning to have an impact on the health sector. This is not surprising, since the proposed activities are long-range, touch many sectors, and involve several disciplines. Moreover, if the health sector is to carry out all the necessary actions to incorporate health and environmental health in the implementation of Agenda 21, the sector itself must be restructured, so that it can better perform its own functions and also provide the inputs needed by other sectors within the framework of comprehensive sustainable development. It will be necessary, also, to expand and enhance the mechanisms of coordination so that the health sector can participate appropriately and effectively, jointly with other sectors, in environmental health activities and can exercise the necessary leadership. Finally, it is essential that the other sectors take an interest in the health and environmental health component and give the health sector an opportunity to participate in the process.

At UNCED it was recognized that steps must be taken to create or strengthen the internal capacities of the developing countries if they are to comply with the recommendations of Agenda 21. This implies the preparation of a national action program, including an examination of needs related to capacity-building and the potential for preparing national sustainable development strategies, to be carried out preferably before 1994. The determination of a country's capacities and needs will require extensive consultation with multiple actors: internally, with both governmental and nongovernmental agencies, and externally, with international and bilateral agencies and others that can contribute to the effort. The Agenda 21 recommendation which calls for strengthening the national capacity of the health sector is consonant with Resolution XIII of the XXXVI Meeting of the Directing Council of PAHO.

The countries of the Region, responding to PAHO's appeal to begin preparing chapters on health and the environment for inclusion in the national plans for sustainable development, are creating or strengthening the initial mechanisms of coordination in order to analyze their health needs. For example, the seven countries of the Central American isthmus have prepared National Action Plans on Ecology and Health, which were approved and backed by the Second Central American Conference on Ecology and Health (ECOSAL II) in September 1993. Processes aimed at incorporating health concerns into the national action plans are under way in Barbados and Guatemala, and are beginning in Mexico. In Argentina, Brazil, Colombia, the Dominican Republic, Honduras, Nicaragua, and Paraguay, the process is in the initial stages. However, it should be noted that one of the principal obstacles that has emerged in these cases has been difficulty in initiating and maintaining an adequate dialogue with the other sectors. This confirms the need to take steps to encourage that dialogue and the preparation of common principles, policies, and strategies that facilitate the process.

Several countries of the Region have shown interest in the follow-up of UNCED and have undertaken activities aimed at coordinating their health and environmental policies. For example, the Central American countries have drafted a Declaration on Ecology and Health in the Central American Isthmus, signaling their interest in reaching consensus among the various national sectors in regard to health, the environment, and development. This attitude is apparent in other subregions as well, including the Caribbean and the Southern Cone.

Intersectoral participation must be based from the start on reliable and up-to-date information on past, present, and planned activities in each country, so that national and international institutions can identify areas of common or complementary interest, while avoiding duplication and waste. The national processes will go a long way toward facilitating such an exchange of information and the subsequent coordination and action. It will be the task of the health sector to propose processes for the evaluation and management of environmental health.

Environmental health programs have been an important part of the activities of PAHO/WHO at least since the 1950s. They have evolved in accordance with the changing situation of the countries and in accordance with mandates from the Governing Bodies that have provided direction and resources for their execution. In 1990 the Governing Bodies approved nine strategic orientations for the Organization; these include Health in Development as a central strategy into which the other eight orientations flow. Priority is given to efforts to attain greater equity in the living and health conditions of the hemisphere's population and improve the access to basic health services, both essential aspects of sustainable development. Resolution XIII of the XXIII Pan American Sanitary Conference grants broad mandates to the Organization to implement the new priority, around which PAHO's strategic orientations for the quadrennium 1991-1994 are built. Resolution XI of the same Conference complements the previous resolution in regard to health and the environment.

In response to the deterioration of infrastructure and of health and social conditions in the countries of the Region--a situation dramatically evidenced by the violent outbreak of cholera epidemics in several countries, the increase in poisonings by pesticides and other toxic chemicals, the rise in industrial accidents with environmental repercussions, and other such problems--PAHO has prepared, among other initiatives, the Regional Plan for Investment in the Environment and Health. The Plan has been approved by the Governing Bodies in an effort to come to grips with the deplorable health and social situation in the countries.

The environmental health risks that result from inharmonious development are many and complex. While there is ample economic justification for the slowness to take corrective action, the lack of progress stems also from a lack of knowledge, information,

and sensitivity regarding the impact of development on health; the lack of effective legislation in favor of health; the separation between sectors; the limited sectoral capacity; and the lack of resources, trained personnel, and political power in the health and environmental sectors. Many improvements could be obtained by making use of existing national resources, backed up by well-managed cooperation on the part of external agencies. A first step in this direction would be to initiate dialogue in an appropriate forum between sectors and institutions in the countries, beginning with an exchange of information.

The operational mechanisms at the country level that prepared the contributions for UNCED were the intersectoral working groups. These groups can facilitate the process of consultation. Also important are the high-level commissions that Resolution XIII of the XXXVI Directing Council suggests be established in the countries. These commissions are intended to improve the effectiveness of actions on health and the environment, incorporating health-related elements into the mechanisms that direct policies on environment and development, as well as the modalities for implementing the options chosen. This implies an understanding of the possibilities and limitations of the environment and the needs of the population in question.

In sum, the health sector in the Region has long been aware of health problems related to the environment and development; however, its concerns and needs have not been adequately incorporated into national development plans nor into the planning of other sectors, as would be needed in order to attain the necessary integration and achieve optimum results in environmental protection, development, and human health. The reasons for this reflect, on the one hand, the limited capacity of the health institutions, but they also have to do with the lack of opportunities for constructive dialogue at the highest levels of intersectoral planning. Such opportunities should be developed and supported. The process of preparing the national conferences on health and the environment in development, in which representatives of the sectors most directly related to health and the environment will participate, will offer opportunities to craft an effective understanding and implementation of the UNCED recommendations. The results of these efforts will make a significant contribution to laying the groundwork for a better regional understanding of sustainable development that includes the role of health and environmental health.

2.3.1 Reorganization of the Health Sector

The reorganization of the health sector implies that in addition to specific programs in environmental health, efforts will be made to achieve the generalized incorporation of environmental health aspects into public health programs. Secondly, the reorganization is aimed at strengthening the public health apparatus so that it can act as expert and leader as well as advisor and participant in decision-making about the relations

between the human environment, health, and development. In other words, the health sector will need to perform leadership functions as well as the functions of advisor and participant. In both cases intersectoral cooperation will be required to ensure that these efforts are productive. The functions needed in order to carry out these tasks include, at a minimum, the following:

2.3.2 *Leadership Functions*

Advocate and defend preventive measures to protect public health, by raising health considerations in the formulation of policies; helping to sensitize related sectors, business, and the public regarding environmental health problems; and promoting environmental and behavior changes that can have a positive impact on health.

Improve the ability of communities to manage environmental health, including preventive and corrective measures, by building the capacity of local authorities to carry out decentralized functions; stimulating initiatives in the private sector; and supporting the development of community self-help and family life programs.

Carry out assessments of health risks and impacts, based on adequate monitoring, in order to identify health hazards linked to existing environmental practices and conditions and to proposed changes in land use, settlements, housing, employment, industrial development, energy generation, and water resources. Evaluations should include assessments based on environmental data produced by the monitoring activities of other agencies and sectors.

Carry out epidemiological surveillance of diseases and public services related to the environment, informing officials at decision-making levels and the public with regard to the health trends and risks of communities and populations.

2.3.3 *Advisory Services and Participation*

- Train personnel to identify, monitor, prevent, and control environmental health risks.
- Establish and operate programs and services of environmental control.
- Develop and utilize institutional capacities for emergency response.
- Develop standards, guidelines, and legislation in collaboration with other institutions.
- Incorporate evaluations of health consequences as integral elements of sustainable development.

- Design and carry out research on environmental health, including environmental problems, conditions, and interventions related to health.

In light of the foregoing, it is evident that the realization of a Pan American Conference on Health and the Environment in Sustainable Development is not only necessary and timely but also urgent, so that the health sector of the countries and the Region can be provided with clear criteria and guidelines on how to contribute more effectively to the process of preparing the national plans for sustainable development and to their later implementation.

3. The Pan American Conference on Health and the Environment in Sustainable Development

It is proposed that, through a joint effort by the countries of the Region together with global, regional, bilateral, nongovernmental, and other organizations, steps be taken to define and adopt a set of common policies in the Member States aimed at ensuring fulfillment of the commitments made at UNCED in regard to meeting the health needs of the Region's countries. The Strategic Orientations and Program Priorities of PAHO, the Ninth General Program of Work of WHO, and the Regional Plan for Investment in the Environment and Health, as well as related regional and subregional plans, proposals, and processes, all contain important elements that will be considered and incorporated in preparing the national and intercountry plans of action on health and the environment in sustainable development.

3.1 *Scope of the Conference*

The Agenda 21 program of action integrates goals related to sustainable development and primary health care, taking into account the needs of the environment. The linkage of improvements in health, environmental, and socioeconomic conditions is intended to equip the population to build sustainable development. These intersectoral activities include efforts in education, housing, natural resources, industrial development, agriculture, and public works, and will involve community groups, businesses, schools and universities, religious, civic, and cultural organizations, and others. The countries should prepare national plans of action in order to map out cooperation between the various levels of government, nongovernmental organizations, and local communities. At the global level, UNCED indicates that these activities related to health should be coordinated by an appropriate international organization, such as WHO.

In addition, an aspect of utmost importance for the sustainable development of the Americas, that requires attention, and on which it will be necessary to achieve consensus at the highest level internationally, are the environmental and health problems that are shared between countries and groups of countries and that relate to economic

development, and that become even more significant in the context of sustainable development.

3.2 *Objective*

The immediate objective is the holding of a regional conference with participation by the highest levels of the health sector and other sectors, mainly those related to the environment and to economic and social development in the countries. The conference will lay the foundation so that the health sector and other sectors can fulfill adequately the commitments of UNCED, principally those in Chapter 6 on Protecting and Promoting Human Health, and make a significant contribution to sustainable development in the countries. To achieve this end the other sectors must have a clear vision of the needs in health, and there should be complete accord on the principles and policies that will guide intersectoral cooperation at the level of the countries and of the Region.

3.3 *Expected Outcomes*

One of the most important results expected of the Conference is its contribution to the task of integrating the various social and economic sectors concerned with environmental health, so that their needs can be incorporated into the national plans of action on the environment in line with the recommendations of Agenda 21. A fundamental step toward this integration would be the adoption of a Pan American Charter on Health and the Environment in Sustainable Development of the Americas, which will be presented for consideration by the Conference participants.

It is expected that the process of preparing the Pan American Charter and the Conference will itself achieve an important result, namely the activation of national mechanisms at a high political level that can define the necessary policies and strategic elements and promote the preparation of operational instruments that reflect the concerns of all social sectors and the efforts of various groups to attain health objectives. In this context good use can be made of the Regional Plan for Investment in the Environment and Health, which is expected to play an essential role in supporting the efforts of the countries to reorient their policies of investments in the social sectors, thus increasing the flow of capital needed to overcome current deficiencies in sanitation and health.

For the Organization, the Pan American Charter on Health and the Environment in Sustainable Development of the Americas will provide direction for its programs, jointly with the Resolutions of the Governing Bodies on related matters. It is hoped that the Governments will give consideration to the Pan American Charter as they formulate their national policies on health and the environment in development.

3.4 *Alliances*

Given the importance of the Conference, the complexity of its content, its multisectoral nature, and the high level of its participants, it is clear that collaboration and support will be needed from various international agencies in addition to PAHO, both in the process of developing the Conference and in the Conference itself. In particular, it is hoped that the World Bank and the Inter-American Development Bank, which have political and operational ties to development sectors in the countries, will contribute to this effort. Preliminary contacts are under way with a view to obtaining the participation and financial support of these agencies.

3.5 *Development Plan for the Conference*

The Pan American Conference described here has purposes and objectives related to both process and product. Those related to process include all the results derived from the preparatory activities at the country level, as well as those of the Conference itself. The product will include the support and reference documents and publications prepared for the Conference, as well as the conclusions, proceedings, and other materials generated by the event. The principal aspects can be summarized as follows:

3.5.1 *General Purposes of the Pan American Conference*

- To provide an opportunity for intersectoral dialogue, with the participation of all the countries of the Hemisphere, on the health-related commitments adopted at UNCED (Rio de Janeiro, 1992) and at the presidential Summit of the Americas 1994 (Miami, December 1994).
- To set forth clearly the concerns related to health and the environment that should be taken into consideration in the process of making decisions about sustainable development.
- To define and adopt a set of policies common to all the countries of the Region with a view to fulfilling the commitments of UNCED and of the Summit of the Americas 1994, in order to better serve the health needs of the Region's countries.

3.5.2 *Specific Objectives of the Pan American Conference*

- To set forth clearly, in the context of UNCED's Agenda 21, concerns related to health and the environment that should be taken into account in the process of making decisions about development programs and projects, and the role the health sector can play in this process.

- To suggest mechanisms for achieving the integration of policies in health and sustainable development, in order to contribute to the amelioration of poverty and the overall social crisis, taking into account the new regional reality in which countries and markets are increasingly integrated.
- To present, discuss, and adopt, in the form of a Pan American Charter, a set of policies and strategies that enable the health sector to participate in decision-making and action programs aimed at promoting environmental conditions favorable to human health.
- To strengthen and promote the participation of a larger number of institutions, sectors, and governments in the Regional Plan for Investment in the Environment and Health.

3.5.3 *Realization of the Conference*

Realization of the Conference can be divided into four interrelated and complementary stages: (1) a preparatory stage, in which the plans and basic documents will be prepared; (2) a national stage, in which national conferences will be promoted and held in the countries; (3) a regional stage, consisting of the holding of the Pan American Conference; and (4) a stage of publications and associated follow-up activities, in which the proceedings and documents from the Conference will be published and disseminated.

Preparatory Stage

In this stage steps will be taken to formalize the alliance with institutions which are cosponsoring the event. Basic documents will be prepared on the following subjects: Health in Agenda 21; Health and the Environment in Sustainable Development in the Region of the Americas; Health, Environment, and Development; and the first version of the Pan American Charter.

National Stage

The national stage will provide the foundation for the entire process. In each country steps will be taken to clarify the commitments that the country adopted at UNCED, diagnose the obstacles to carrying out these commitments, and identify intersectoral and international actions that can help to overcome some of these obstacles. In addition, efforts will be made to increase public awareness of the interrelationships between health and the environment in the process of sustainable development.

The national stage will require development of a broad mechanism for intersectoral consultation at the governmental and nongovernmental levels, following the process adopted for the preparation of UNCED with the necessary adaptations. Intersectoral working groups will be established for this purpose. With respect to the creation of the high-level commissions (Resolution XIII of the XXVI Meeting of the Directing Council of PAHO), support will be sought from the working group which the country organized in preparation for UNCED, including or strengthening the role of the health sector, of parliamentary groups, and of nongovernmental organizations. It is expected that these activities will culminate in a national conference of consensus in each country.

Several countries of the Region have already begun the process or have demonstrated interest in holding a national conference.

Regional Stage

This stage consists basically of the holding of the Pan American Conference on Health and the Environment in Sustainable Development (three days) and a pre-Conference event (two days). The final structure and program will depend to a large extent on the national conferences and the conclusions they reach, and will reflect discussions with authorities of the countries and with the agencies cosponsoring the event. Presented below are some provisional basic assumptions for the development of the pre-Conference and the Conference, and a preliminary program.

General Assumptions

- The headquarters of the Pan American Conference on Health and the Environment in Sustainable Development will be at the PAHO Headquarters in Washington, D.C.
- The pre-Conference will be held on 17 and 18 August 1995. The Pan American Conference will be held on 21, 22, and 23 August 1995.
- Each country will be represented at the Conference by its Ministers of Health, Environment, and Development (Public Works, Economy, Planning) and representatives of the Ministry of Foreign Affairs. The pre-Conference will be attended by national advisors in the respective areas.
- Invitations to attend the Pan American Conference will also be extended to bilateral and international agencies, parliamentary organizations, nongovernmental organizations, and others.

Organizational Considerations

- The high-level representation of the countries, with an average of three ministers each, requires special political advisory services in order to insure that the political aspects are adequately taken care of in the preparatory process and in the development of the event.
- Each country that has held a national conference will be offered time in the program to report on the event and its conclusions.
- On account of its scope and magnitude, the Conference will require the collaboration of cosponsors who, among other functions, will facilitate the participation of ministers from sectors other than health. The cosponsors will participate in preparing the program and other aspects of the Conference.

3.5.4 Pre-Conference Program

The program of the pre-Conference will be structured as follows:

Day one, morning session:

- Presentation of credentials
- Opening and introduction
- Questions related to organization and program of the pre-Conference
- Presentation of the Conference documents

Day one, afternoon session:

- Presentation of selected case studies (a panel of four countries representing diverse realities, chosen from among those countries which held a national conference, will report on the conferences and their conclusions, and will outline their plans for pursuing a comprehensive vision of health and environment in sustainable development)

Day two, morning session:

- Forum for organizations (open session for multilateral and bilateral agencies and for nongovernmental organizations)

Day two, afternoon session:

- Final discussions and approval of recommendations for the Conference

- Closure

3.5.5 *Conference Program*

The program of the Pan American Conference will be divided into three segments: orientation, analysis and discussion, and resolutions. These segments would occupy a half-day, a day, and a half-day respectively. The program of the Pan American Conference will be structured as follows:

Day one, morning session:

- Opening ceremony
- Keynote address
- Presentation of conference documents

Day one, afternoon session:

- Panel of invited specialists present remarks on the issues with a futuristic perspective, comparing the consequences of **taking action** with those of **not taking action**; that is, a hypothesis as to what may happen in the future if current policies are left unaltered, compared to what can happen if comprehensive policies are adopted
- Discussion

Day two, morning session:

- Presentation of country reports

Day two, afternoon session:

- Presentation of country reports

Day three, morning session:

- Presentation, discussion, and adoption of the Pan American Charter
- Closing ceremonies

Day three, afternoon session:

- Ceremony at the White House at which the Pan American Charter is presented to the President of the United States (proposed)

3.5.6 *Technical, Administrative, and Operational Considerations*

The importance of the Conference and the complex process of preparation and realization will necessitate an infrastructure that includes, at a minimum, an Organizing Commission and an Executive Secretariat.

The Organizing Commission will be responsible for analyzing and deciding various questions related to the political, technical, operational, administrative, and financial aspects of the Conference. It should include a representative of every unit of PAHO involved directly in the event; a representative of each cosponsoring agency; and special consultants. In principle the Organizing Commission will meet once a month starting in July 1994, and will come together for extraordinary sessions when necessary.

The Executive Secretariat will be housed in the PAHO Division of Health and Environment. Its staff will include, in principle, an executive secretary, a specialist in conference organization, and a secretary.

A tentative schedule for the organization and holding of the Conference, including preparatory and follow-up activities and monitoring of progress, is as follows:

March 1994

- Completion of the information document for the Executive Committee of PAHO
- Completion of various documents to support the national processes in preparation for the Conference
- Beginning of pre-negotiation with prospective cosponsors
- Beginning of the national processes; formation of high-level commissions
- Completion of first draft of the Pan American Charter

April 1994

- Support for the countries in the planning of the national conferences and preceding activities
- Distribution of support documents to the countries
- Contacts with other interested international agencies

May 1994

- Preparation of proposals for the operation of the Organizing Commission and Executive Secretariat
- Preparation of a detailed budget
- Establishment of contacts in the countries in support of the national processes

June 1994

- Presentation to the Executive Committee of PAHO of the document *Proposal for a Pan American Conference on Health and the Environment in Sustainable Development*
- Incorporation of suggested changes and revision of timetable/schedule
- First meeting of the Organizing Commission
- Official installation of the Executive Secretariat
- Holding of national conferences

July 1994

- Formal public announcement of the Pan American Conference
- Second meeting of the Organizing Commission
- Holding of national conferences

August 1994

- Third meeting of the Organizing Commission
- Holding of national conferences

September 1994

- Fourth meeting of the Organizing Commission
- Holding of national conferences

- Confirmation of cosponsors
- Holding of national conferences
- October 1994*
- Fifth meeting of the Organizing Commission
- Identification of participants in the Pan American Conference; preparation of list and classification
- Holding of national conferences
- November 1994*
- Sixth meeting of the Organizing Commission
- Holding of national conferences
- Invitations to specialists and speakers
- December 1994*
- Seventh meeting of the Organizing Commission
- Holding of national conferences
- Summit of the Americas
- Presentation and discussion of first progress report to the Subcommittee on Planning and Programming (SPP)
- January 1995*
- Eighth meeting of the Organizing Commission
- Holding of national conferences
- Changes in programming in accordance with suggestions of the SPP
- Issuing of invitations to the participants to reserve dates

February 1995

- Ninth meeting of the Organizing Commission
- Conclusion of the national phase of the Conference
- Reception of country reports

March 1995

- Tenth meeting of the Organizing Commission
- Detailed analysis of the political aspects

April 1995

- Presentation and discussion of second progress report to the SPP
- Changes in programming in accordance with suggestions of the SPP
- Eleventh meeting of the Organizing Commission
- Consolidation/summary of the national reports
- General review of the proposed Pan American Charter
- Beginning of preparation of the basic document

May 1995

- Twelfth meeting of the Organizing Commission
- Completion of the basic Conference document
- Completion of preparation of the proposed Pan American Charter

June 1995

- Thirteenth meeting of the Organizing Commission
- Completion of its administrative tasks

- Preparation of final program, confirmation of details with speakers, orientation meetings

July 1995

- Fourteenth meeting of the Organizing Commission
- Advance shipment of documents to participants, credentialing

August 1995

- Fifteenth meeting of the Organizing Commission
- Holding of the Conference and associated activities

September 1995

- Sixteenth meeting of the Organizing Commission
- Alternative month for holding the Conference

October to December 1995

- Completion and distribution of the final documents
- Final report of the Conference

On the basis of the organizational considerations and the activities and processes outlined above, a preliminary estimate of the budget for the Conference is as follows:

3.6 Preliminary Budget

1.	Preparatory activities	US\$ 160,000
	Executive Secretariat	
	13 months x 10,000/months	US\$ 130,000
	Preparation of documents	30,000
2.	Support for holding of the national conferences and meetings	40,000
3.	Holding of the Pan American Conference	320,000
	Support for the national delegations: airfare and per diem estimated at US\$2,000 per person; 32 countries expected to participate with three persons per country, for approximate total of 100 people)	200,000
	Publicity and press relations: (Shelves, equipment, materials, reproduction of documents)	60,000
	Conference Infrastructure: (Simultaneous translation, security, cleaning, secretarial services, coffee, materials, equipment)	60,000
4.	Follow-up activities	40,000
	Executive Secretariat (two months x US\$ 10,000/month)	20,000
	Printing and distribution of the final document, promotion and establishment of action strategies	20,000
5.	Unforeseen contingencies	40,000
	TOTAL	US\$ 600,000

The detailed budget to be prepared later should evaluate the total costs, both direct and indirect. It is expected that PAHO will contribute US\$ 200,000 toward this budget, and \$400,000 will be contributed by the cosponsoring agencies.

Annexes

CE113/12 (Eng.)
ANNEX 1

**Report on the United Nations Conference on Environment and Development and
Its Significance for the Work of the Pan American Health Organization
(Document CD36/22)**

directing council



**PAN AMERICAN
HEALTH
ORGANIZATION**

XXXVI Meeting

regional committee



**WORLD
HEALTH
ORGANIZATION**

XLIV Meeting

Washington, D.C.
September 1992

Provisional Agenda Item 5.12

CD36/22 (Eng.)
31 August 1992
ORIGINAL: SPANISH

REPORT ON THE UNITED NATIONS CONFERENCE ON ENVIRONMENT AND DEVELOPMENT AND ITS SIGNIFICANCE FOR THE WORK OF THE PAN AMERICAN HEALTH ORGANIZATION

The United Nations Conference on Environment and Development (UNCED) was held in the city of Rio de Janeiro, Brazil, from 3 to 14 June 1992, with the participation of delegations from 170 countries. Of these delegations, 110 were led by heads of state.

The Conference adopted four documents of signal importance: the Rio Declaration on Environment and Development, the United Nations Framework Convention on Climate Change, the Convention on Biological Diversity, and the Agreements on Environment and Development known as "Agenda 21."

Most of the documents approved by the Conference have a direct bearing on the health programs of the Region, both at the country level and within the Organization, in particular in terms of the Strategic Orientations and Program Priorities of PAHO/WHO, which give a prominent place to Health in Development and the priority programs under this orientation.

The present report reviews the documents adopted by the Conference from the standpoint of their significance for health and suggests several actions that might be taken by the health sector in the countries and by PAHO/WHO. Part 1 is an introduction about the Conference. Part 2 presents the salient points of the collective commitments adopted by the Conference in terms of their relationship to health, with particular attention to the programs proposed under the plan of action (Agenda 21). Part 3 deals with the implications for the programs of PAHO/WHO, including the relationship between the programs proposed by UNCED and the programs of PAHO/WHO. Finally, the document makes several suggestions in regard to the future work of the Organization, with special reference to the link between the Regional Plan for Investment in Health and the Environment of PAHO/WHO (Provisional Agenda Item 5.13 of the XXXVI Meeting of the Directing Council), and Agenda 21 of UNCED.

CONTENTS

	<u>Page</u>
1. INTRODUCTION	1
2. COLLECTIVE COMMITMENTS RESULTING FROM THE CONFERENCE	2
Rio Declaration on Environment and Development	2
United Nations Framework Convention on Climate Change	2
Convention on Biological Diversity	2
Agreements on Environment and Development (Agenda 21)	3
SECTION I. SOCIAL AND ECONOMIC DIMENSIONS	3
Combating Poverty	3
Demographic Dynamics and Sustainability	4
Protecting and Promoting Human Health	4
Promoting Sustainable Human Settlement Development	6
SECTION II. CONSERVATION AND MANAGEMENT OF RESOURCES FOR DEVELOPMENT	7
Protection of the Atmosphere	7
Environmentally Sound Management of Biotechnology	8
Protection of the Quality and Supply of Freshwater Resources	8
Environmentally Sound Management of Toxic Chemicals	9
Environmentally Sound Management of Hazardous Waste	10
Environmentally Sound Management of Solid Wastes	10
Safe and Environmentally Sound Management of Radioactive Wastes	11
SECTION III. STRENGTHENING THE ROLE OF MAJOR GROUPS	11
Global Action for Women towards Sustainable and Equitable Development	11
Children and Youth in Sustainable Development	12
Recognizing and Strengthening of the Role of Indigenous People and their Communities	12
Strengthening the Role of Nongovernmental Organizations	12
Local Authorities' Initiatives in Support of Agenda 21	13
Strengthening the Role of Workers and their Trade Unions	13
SECTION IV. MEANS OF IMPLEMENTATION	13
Financial Resources and Mechanisms	13
3. SIGNIFICANCE FOR THE PROGRAMS OF PAHO/WHO	14
Agenda 21 of UNCED and the Programs of PAHO/WHO	14
Considerations for the Future Work of the Organization	18
BIBLIOGRAPHY	20

**REPORT ON THE UNITED NATIONS CONFERENCE ON ENVIRONMENT
AND DEVELOPMENT AND ITS SIGNIFICANCE FOR THE WORK OF
THE PAN AMERICAN HEALTH ORGANIZATION**

1. INTRODUCTION

Up to the mid-20th century, little was known about the impact of development processes on ecological systems, or the cost of the destruction caused by development and the tangible and intangible damage that it might do to the future of humankind. The exploitation of natural resources was seen as the principal means for attaining development, and there was a false perception that what was most important were the economic benefits to be derived, which were expected to be the answer to all problems. During the 1960s, increasing importance began to be attached to the concept of human ecology, according to which the maintenance and evolution of the species depend not just on the physical environment but are influenced by a series of factors that include poverty, solitude, violence, overcrowding, and promiscuity, as well as other psychological and social factors that interfere with the attainment of a healthy society.

It was in this context that the United Nations Conference on the Human Environment was held in Stockholm, Sweden, in 1972. One of the principles established at that meeting affirms that man has the fundamental right to freedom, equality, and decent living conditions in a quality environment that allows life to be lived with dignity and well-being. The Stockholm Conference adopted a series of recommendations directed toward WHO and the health sector in the countries. Despite these efforts, however, environmental problems have grown worse. For this reason it is hoped that in the 1990s and subsequent years the countries will make a political commitment to implementing a comprehensive plan of action aimed at resolving the problems related to environment and development, which are among the most pressing problems that face humankind.

On the basis of the experiences accumulated over preceding decades, and recognizing the need to establish a consensus of actions and principles in order to ensure the inhabitants of the earth sustainable and equitable development, the United Nations General Assembly, through Resolution 44/228, convened the United Nations Conference on Environment and Development, held 3-14 June 1992 in Rio de Janeiro, Brazil. After extensive diplomatic consultation and work by the Preparatory Committee, which included representatives from 160 countries, as well as representatives of international and nongovernmental organizations, the following documents were drafted and approved: the Rio Declaration on Environment and Development; the United Nations Framework Convention on Climate Change; the Convention on Biological Diversity, and the agreements on environment and development known as Agenda 21. All these documents are of tremendous importance for the work of PAHO/WHO and the health sector in the countries, inasmuch as they bear directly on the priorities established by the Governing Bodies of the Organization, in particular the strategy relating to health in development.

2. COLLECTIVE COMMITMENTS RESULTING FROM THE CONFERENCE

Rio Declaration on Environment and Development

The Rio Declaration reaffirms the Declaration of the United Nations Conference on the Human Environment, adopted in Stockholm on 16 June 1972, and, building on that Declaration, proclaims 27 principles that establish a framework for sustainable development and set standards for action by the countries, international organizations, and others, as well as for the community in general. Of special importance is the first principle:

"Human beings are the center of concerns for sustainable development. They are entitled to a healthy and productive life in harmony with the nature." *This principle is fully in line with the principles that guide the Organization, specifically the social goal of Health for All.*

United Nations Framework Convention on Climate Change

This convention is aimed at preventing changes in the earth's climate, produced directly or indirectly by human activity, and forestalling their adverse effects, including their impact on human health and well-being. One of the principal commitments accepted by the countries is to periodically update, publish, and facilitate national inventories, in addition to implementing actions and programs aimed at reducing anthropogenic emissions of greenhouse gases. The Convention also establishes the commitment to return, by the end of the current decade, to 1990 levels of anthropogenic emission of carbon dioxide and other greenhouse gases not covered under the Montreal Protocol. ***This agreement is expected to lead to the improvement of air quality, and the implementation of Chapter 9, Protection of the Atmosphere, in particular, will result in benefits for health.***

Convention on Biological Diversity

This agreement recognizes the intrinsic value of biological diversity and the ecological, genetic, social, economic, scientific, educational, cultural, recreational, and aesthetic value of such diversity. It affirms that the conservation of biological diversity is of common concern for all humankind and that the States have sovereign rights over their own biological resources. The objectives of this agreement are "the conservation of biological diversity, the sustainable use of its components and the fair and equitable sharing of the benefits arising out of the utilization of genetic resources, including by appropriate access to genetic resources and by appropriate transfer of relevant technologies, taking into account all rights over those resources and to those technologies, and by appropriate funding." ***This Convention is important for the health sector, particularly in relation to the pharmaceutical industry and traditional or autochthonous***

medicine, since many of the products utilized in these areas are derived from species that are to be protected under the agreement. It favors both the protection and management of the species.

Agreements on Environment and Development (Agenda 21)

Agenda 21 is in fact a plan of action, though not a legally binding one, which covers a broad range of areas that have to do with the relationship between environment and development. The preamble begins by affirming that "humanity is at a defining moment in history. We are confronted with a perpetuation of disparities between and within nations, a worsening of poverty, hunger, ill health and illiteracy, and the continuing deterioration of the ecosystems on which we depend for our well-being." Agenda 21 reflects a political commitment at the highest level on the development of cooperation in regard to the environment. Its successful implementation is first and foremost the responsibility of Governments, and international cooperation should support these efforts. In addition, the broadest public participation and the active involvement of nongovernmental organizations and other groups should be encouraged.

The program of action is divided into four sections: Section I. Social and Economic Dimensions; Section II. Conservation and Management of Resources for Development; Section III. Strengthening the Role of Major Groups; and Section IV. Means of Implementation. The four sections encompass 40 chapters, which in turn comprise more than 100 program areas. Under each area the basis for action is described, as are the objectives, activities, and means of implementation, which include, inter alia, inter-regional and regional cooperation, human resource development, and financing. It is understood that, since Agenda 21 has been approved by a consensus of every single country, each will develop its own strategies for sustainable development and will determine its own needs for internal and external resources.

Health-related program components are scattered throughout the various chapters. Many of them are interrelated or complementary. Although ultimately all the Program Areas are concerned with health, the following analysis will cover only those in each section of Agenda 21 in which health-related issues figure most prominently.

SECTION I. SOCIAL AND ECONOMIC DIMENSIONS

The most relevant chapters are: 3. Combating Poverty; 5. Demographic Dynamics and Sustainability; 6. Protecting and Promoting Human Health; and 7. Promoting Sustainable Human Settlement Development.

Combating Poverty (Enabling the poor to achieve sustainable livelihoods)

The aim of this program to eliminate poverty. The chapter emphasizes that the problem must be tackled through specific measures encompassing various sectors, in particular in the areas of basic education, primary and maternal health care, and the advancement of women. Among other things, it calls on the governments to adopt measures that will directly or indirectly lead to the establishment of a system of primary health care and maternal health services that will be accessible to all. In addition, it urges the governments to take active steps to implement programs to establish and strengthen preventive and curative health facilities, which include safe and effective reproductive health care and affordable, accessible services for responsible planning of family size. Programs should focus on providing comprehensive health care, including prenatal care, education, and information on health and responsible parenthood and should provide the opportunity for all women to breast-feed fully, at least during the four first months post-partum. The chapter also mentions the need for food security and access by the poor to fresh water and sanitation. Chapter 6, under program area (b), also deals specifically with the protection of vulnerable groups.

National programs to combat poverty offer the health sector an important opportunity to integrate its programs with national programs for social development and thus help to improve the health of broad sectors of the population who currently lack access, or have only limited access, to primary health care and water supply and sanitation services.

Demographic Dynamics and Sustainability

This chapter deals with the synergistic relationship between demographic trends and factors and sustainable development. It points out that the growth of world population combined with unsustainable consumption patterns is placing increasingly severe stress on the life-supporting capacities of our planet, which in turn affects the use of land, water, air, energy, and other resources. The chapter includes three program areas: (a) developing and disseminating knowledge concerning the links between demographic trends and factors and sustainable development; (b) formulating integrated national policies for environment and development, taking into account demographic trends and factors; and (c) implementing integrated environment and development programs at the local level, taking into account demographic trends and factors. Of special interest are the section relating to the determination of priority areas of action and the development of strategies and programs to mitigate the adverse effects of environmental change on human populations, and vice versa, and the section on the need to increase public awareness of the fundamental linkages between improving the status of women and demographic dynamics, particularly through women's access to education, and primary and reproductive health programs, which reinforce the ideas affirmed in Chapter 3, (Combating Poverty) and Chapter 6 (Protecting and Promoting Human Health). *Of particular relevance is the discussion of incorporating the concept of local health systems into proposed programs of development.*

Protecting and Promoting Human Health

This chapter is based on the work of the WHO Commission on Health and Environment, and it constitutes the main contribution of the Organization to Agenda 21. It discusses the interconnectedness of health and development and the fact that items under Agenda 21 should address the need for primary health care, which is integral to sustainable development. In addition, it points out that these activities should be coordinated by an international organization, such as WHO.

Specifically, this chapter, within the general strategy for the achievement of health for all by the year 2000 (HFA-2000), includes five program areas:

- a) *Meeting primary health care needs, particularly in rural areas.* The objective is to meet the basic health needs, including environmental health, of urban, periurban, and rural populations and to coordinate the involvement of citizens, the health sector, the health-related sectors, and relevant non-health sectors in solutions to health problems, giving priority to the groups in greatest need, particularly those living in rural areas. The achievement of this objective will require the creation of basic health infrastructures in the countries, the establishment of monitoring and planning systems, and the provision of support for research and methodology development, as well as the application of means of implementation, including financing, scientific and technological means, human resource development, and capacity-building.
- b) *Control of communicable diseases.* This program area recognizes that the major communicable diseases, including cholera, diarrheal diseases, leishmaniasis, malaria, schistosomiasis, and others, require environmental control measures. Among the objectives are a number of goals and programs for the elimination, eradication, control, or reduction of several of these diseases, including acute respiratory infections in children, parasitic diseases, and tuberculosis. In addition, it is proposed that research on improved vaccines be accelerated and that the use of vaccines for disease prevention be implemented to the fullest extent possible. Also proposed is the mobilization and unification of national and international efforts against AIDS to prevent human immunodeficiency virus infection and reduce the personal and social impact of such infection. In order to achieve these objectives, it is proposed that the governments, in accordance with their national plans for public health, priorities, and objectives, develop a national health action plan, with international assistance and support. The national plans should incorporate actions aimed at implementing the World Declaration on the Survival, Protection, and Development of Children in the 1990s.

- c) *Protecting vulnerable groups.* Under this program area it is pointed out that, in addition to meeting basic health needs, specific emphasis must be given to protecting and educating vulnerable groups, particularly infants, youth, women, indigenous people, and the very poor, as a prerequisite for sustainable development. Special attention should also be given to the health needs of the elderly and disabled. The general objectives of protecting vulnerable groups are: to ensure that all such individuals are allowed to develop their full potential (including healthy physical, mental, and spiritual development); to ensure that young people can develop, establish, and maintain healthy lives; to allow women to perform their key role in society; and to support indigenous people through educational, economic, and technical opportunities.
- d) *Meeting the urban health challenge.* This program area focuses on the need to improve the health and well-being of all urban dwellers in order to have a healthy population that is capable of contributing to economic and social development. The objective is to achieve an improvement in health indicators, as well as environmental, housing, and health service indicators. In order to accomplish this, local authorities, with the support of national governments and international organizations, should be encouraged to develop and implement municipal health plans; strengthen environmental health services; and assess existing health, social, and environmental conditions.
- e) *Reducing health risks from environmental pollution and hazards.* Levels of pollution of the environment (water, air, and land), workplaces, and even individual dwellings are increasing as a result, inter alia, of developments in production and consumption patterns and lifestyles, energy production and use, industry, transportation, etc., and the fact that there has been little or no regard for environmental protection. Moreover, there are considerable environmental health hazards in newly industrialized countries. The overall objective of this program area is therefore to minimize hazards and maintain the environment so that human health and safety are not endangered and yet development is encouraged to proceed.

Promoting Sustainable Human Settlement Development

This chapter deals with the growing problems associated with human settlements, which in the developing countries can be traced to low levels of investment in the sector. It suggests an "enabling approach," by means of which external assistance will help to generate the internal resources needed in order to improve the living and working environments of all people by the year 2000 and beyond. The overall human settlement objective is "to improve the social, economic, and environmental quality of human settlements and the living and working conditions all people, in particular the urban and rural poor," through cooperation among the public, private, and community sectors and special interest groups such as women, indigenous people,

the elderly, and the disabled. The chapter includes eight program areas in which the countries should establish priorities in accordance with their national plans and objectives. Of these, the most relevant in terms of health are:

- a) Providing adequate shelter for rapidly growing populations and for the poor.
- b) Improving and ensuring sustainable human settlement management in order to enhance the capacity to improve the living conditions of residents.
- c) Promoting the integrated provision of environmental infrastructure: water, sanitation, drainage, and solid-waste management, in order to ensure the supply of adequate environmental infrastructure facilities in all settlements by the year 2025.
- d) Promoting sustainable energy and transport systems in human settlements.

SECTION II. CONSERVATION AND MANAGEMENT OF RESOURCES FOR DEVELOPMENT

The most relevant chapters in this section are: 9. Protection of the Atmosphere; 16. Environmentally Sound Management of Biotechnology; 18. Protection of the Quality and Supply of Freshwater Resources: Application of Integrated Approaches to the Development, Management, and Use of Water Resources; 19. Environmentally Sound Management of Toxic Chemicals, included Prevention of Illegal International Traffic in Toxic and Dangerous Products; 20. Environmentally Sound Management of Hazardous Wastes, including Prevention of Illegal International Traffic in Hazardous Wastes; 21. Environmentally Sound Management of Solid Wastes and Sewage-related Issues; and 22. Safe and Environmentally Sound Management of Radioactive Wastes.

Protection of the Atmosphere

This chapter reviews the various related international agreements, mainly the 1992 United Nations Framework Convention on Climate Change, and other international instruments, including regional ones. However, "it is understood that the recommendations contained in this chapter do not oblige any Government to take measures which exceed the provisions of these legal instruments."

In regard to health, the principal points covered in this chapter are: (1) the need for better understanding and prediction of the various properties of the atmosphere and of the affected ecosystems, as well as health impacts and their interactions with socioeconomic factors; (2) the need to utilize all energy sources in ways that respect the atmosphere, human health, and the environment as a whole; (3) the need to develop, improve, and apply health and environmental impact assessments to foster sustainable industrial development; and (4) based on

environmental impact assessments to foster sustainable industrial development; and (4) based on the results of research on the effects of the additional ultraviolet radiation reaching the earth's surface, the need to consider taking appropriate remedial measures in the field of human health, among others.

The document also points out that there is insufficient information on the environmental and health effects of transboundary air pollution in other regions. In this context, greater emphasis should be placed on addressing the extent, causes, and health and socioeconomic impact of ultraviolet radiation.

Environmentally Sound Management of Biotechnology

Biotechnology promises to make a significant contribution by facilitating, for example, better health care, enhanced food security through sustainable agriculture practices, improved supplies of potable water, more efficient industrial development processes for transforming raw materials, support for sustainable methods of afforestation and reforestation, and detoxification of hazardous wastes. Four program areas are established under this chapter which are aimed at reaffirming internationally agreed principles to be applied with a view to ensuring the environmentally sound management of biotechnology, engendering public trust and confidence, promoting the development of sustainable applications of biotechnology, and establishing appropriate enabling mechanisms to facilitate sound management, especially in developing countries.

The aim of the program area concerned with enhancing protection of the environment is to prevent, halt, and reverse environmental degradation through the appropriate use of biotechnology in conjunction with other technologies while at the same time supporting safety procedures as an integral component of the program. This includes the adoption of production processes that minimize waste generation and the promotion of bio-remediation of land and water, waste treatment, and other measures. Other program areas set out in this chapter call for the enhancement of safety and the development of international mechanisms of cooperation as well as the establishment of enabling mechanisms for the development and the environmentally sound application of biotechnology.

Protection of the Quality and Supply of Freshwater Resources: Application of Integrated Approaches to the Development, Management, and Use of Water Resources

This chapter notes that a great number of environmental issues are directly or indirectly linked to freshwater resources. It underscores the need for rational management and allocation of water resources as a means of preventing conflicts and enhancing national development thereby improving health conditions and environmental quality. In addition, it points out that

water-related diseases are still a major health problem, especially in the developing countries, and that diseases caused by microbiological pollution or transmitted by water-associated vectors, as well as those related to inadequate sanitation and the absence of clean water, are widespread.

The general objective of this chapter is to achieve and maintain secure access to adequate supplies of water of good quality for the entire population of the planet while preserving the hydrologic, biological, and chemical functions of the ecosystems, adapting human activities to the capacity limits of nature, and combating the vectors of water-related diseases. Among the seven specific objectives, all of which are relevant for health, the most important are those relating to: (1) drinking water supply and sanitation; (2) water and sustainable urban development; and (3) water for sustainable food production and rural development.

In regard to drinking water supply and sanitation, the chapter reaffirms the 1990 New Delhi Statement, which proclaimed the need to provide, on a sustainable basis, access to safe water in sufficient quantities, as well as proper sanitation for all. With respect to water and sustainable urban development, among the targets proposed are: by the year 2000, all urban residents will have access to safe water and 75% will have on-site or community facilities for sanitation; by the year 2000, quantitative and qualitative discharge standards will have been established and applied for municipal and industrial effluents; and by the same year, 75% of the solid wastes generated in urban areas will be collected, recycled, or disposed of in an environmentally safe way.

Under the program area entitled, "Water for Sustainable Food Production and Rural Development," the chapter proposes that the management of water resources should be developed within a comprehensive set of policies for: (i) human health; (ii) food production, preservation, and distribution; (iii) disaster mitigation plans; and (iv) environmental protection and conservation of the natural resource base. This means ensuring water supply and sanitation for poor people in rural areas who lack these services.

Environmentally Sound Management of Toxic Chemicals, including Prevention of Illegal International Traffic in Toxic and Dangerous Products

This chapter points out that chemical contamination causes grave damage to human health, genetic structures, reproductive outcomes, and the environment. Two of the major problems, particularly in developing countries, are: (a) lack of scientific information for the assessment of risks entailed by the use of a great number of chemicals, and (b) lack of resources for the assessment of those chemicals for which data are available. The chapter affirms that "collaboration on chemical safety between the United Nations Environment Program (UNEP), the International Labor Organization (ILO), and the World Health Organization (WHO) in the International Program on Chemical Safety (IPCS) should be the nucleus for international cooperation on environmentally sound management of toxic chemicals. All efforts should be made to strengthen this Program. Cooperation with other programs, such as those of the

Organization for Economic Cooperation and Development (OECD) and the European Communities (EC) and other regional and governmental chemical programs, should also be promoted."

Six program areas are proposed in this chapter: (a) expanding and accelerating international assessment of chemical risks; (b) harmonization of classification and labelling of chemicals; (c) information exchange on toxic chemicals and chemical risks; (d) establishment of risk reduction programs; (e) strengthening of national capabilities and capacities for management of chemicals; and (f) prevention of illegal international traffic in toxic and dangerous products. The six program areas are interrelated, and the first five entail activities that fall within the scope of the health sector.

Environmentally Sound Management of Hazardous Waste, including Prevention of Illegal International Traffic in Hazardous Wastes

It is stressed that in order to ensure health and environmental protection it is of paramount importance to ensure effective control of the production, storage, treatment, recycling and reuse, transport, recovery, and disposal of hazardous wastes. Of the four program areas proposed, three are of particular importance for health:

- a) *Promoting the prevention and minimization of hazardous waste*, which means minimizing the production of hazardous wastes; optimizing the use of raw materials; utilizing, where practicable and environmentally sound, the residues from production processes; and enhancing knowledge and information on the economics of prevention and the management of hazardous wastes.
- b) *Promoting and strengthening institutional capacities in hazardous waste management*. The aim of this program area is to encourage the governments to adopt appropriate coordinating, legislative, and regulatory measures for the environmentally sound management of hazardous wastes, including the implementation of international and regional conventions.
- c) *Promoting and strengthening international cooperation in the management of transboundary movements of hazardous wastes*. This program area is aimed at harmonizing the criteria for identifying wastes that are dangerous to the environment, building monitoring capacities, and formulating international legal instruments. Governments should consider prohibiting the export of hazardous wastes to countries that do not have the capacity to deal with such wastes in an environmentally sound way and should promote the control of transboundary movement of hazardous wastes in accordance with the Basel Convention.

Environmentally Sound Management of Solid Wastes and Sewage-related Issues

This chapter points to the urgent need for measures to ensure the environmentally sound management of solid wastes, as one of the issues of major concern in maintaining the quality of the earth's environment and especially in achieving sustainable development. It focuses mainly on urban sanitation services (urban solid wastes) but also deals with certain liquid wastes that are handled by the solid waste management system in some countries (cleaning of storm drains, sludge, sludge from septic tanks, etc.). This chapter is related to the following chapters: 18. Protection of the Quality and Supply of Freshwater Resources; 7. Promoting Sustainable Human Settlement Development; 6. Protecting and Promoting Human Health; and 4. Changing Consumption Patterns.

The chapter includes four interrelated program areas: (a) minimizing wastes; (b) maximizing environmentally sound waste reuse and recycling; (c) promoting environmentally sound waste disposal and treatment; and (d) extending waste service coverage.

Safe and Environmentally Sound Management of Radioactive Wastes

The objective of this program area is to ensure that radioactive wastes are safely managed, transported, stored, and disposed of, with a view to protecting human health and the environment within a wider framework of an interactive and integrated approach to radioactive waste management and safety. It is proposed that the States, in cooperation with relevant international organizations, take the measures and actions needed in order to achieve this goal.

SECTION III. STRENGTHENING THE ROLE OF MAJOR GROUPS

The program areas under Section III are intended to promote social partnership in support of common efforts for sustainable and equitable development. Of the chapters in this Section, those that are most relevant for the health sector are the following: 24. Global Action for Woman towards Sustainable and Equitable Development; 25. Children and Youth in Sustainable Development; 26. Recognizing and Strengthening the Role of Indigenous People and their Communities; 27. Strengthening the Role of Nongovernmental Organizations: Partners for Sustainable Development; 28. Local Authorities' Initiatives in Support of Agenda 21; and 29. Strengthening the Role of Workers and their Trade Unions.

Global Action for Women towards Sustainable and Equitable Development

This chapter notes that the international community has endorsed several plans of action and conventions for the full integration of women in all development activities, in particular the Nairobi Forward-looking Strategies for the Advancement of Women. Among the other agreements that are also relevant is the 1990 World Declaration on the Survival, Protection, and Development of Children and its Plan of Action.

Among the important components proposed for adoption by the governments are programs to establish and strengthen preventive and curative health facilities, which are also discussed in Chapter 3. Combating Poverty (in addressing the needs of vulnerable groups), and Chapter 6. Protecting and Promoting Human Health.

Children and Youth in Sustainable Development

It is considered that the involvement of today's youth, who comprise 30% of the world's population, in decision-making and in the implementation of programs relative to environment and development is critical to the long-term success of Agenda 21.

The chapter includes two program areas:

- a) Advancing the role of youth and actively involving them in the protection of the environment and the promotion of economic and social development. It is pointed out that numerous actions and recommendations have been proposed within the international community to ensure that youth are provided a secure and healthy future, including an environment of quality, improved standards of living, and access to education and employment. Chapter 6, on the protection of vulnerable groups, addresses the need to provide basic health care for young adults, among other groups.
- b) Children in sustainable development. It is noted that children comprise almost half the population of the world, and governments should take measures to ensure the survival, protection, and development of children in accordance with the goals endorsed by the 1990 World Summit for Children. Chapter 6, Protecting and Promoting Human Health, in addressing the needs of vulnerable groups also makes reference to the World Declaration on the Survival, Protection, and Development of Children, particularly the parts relating to health.

Recognizing and Strengthening the Role of Indigenous People

This chapter proposes that, in view of the interrelationship between the natural environment and its sustainable development and the cultural, social, economic, and physical well-being of indigenous people, national and international efforts to implement environmentally sound and sustainable development should recognize, accommodate, promote, and strengthen the role of indigenous people and their communities. Chapter 6, "Protecting and Promoting Human Health" includes, among the health needs of vulnerable groups, care for indigenous people and the poor as indispensable measures for achieving sustainable development.

Strengthening the Role of Nongovernmental Organizations: Partners for Sustainable Development

It is recognized that the community of nongovernmental organizations offers a global network that should be tapped, enabled, and strengthened in support of efforts to achieve common goals. To this end, the fullest possible communication and cooperation between international organizations, national and local governments, and nongovernmental organizations should be promoted in the framework of the institutions mandated to carry out Agenda 21. Nongovernmental organizations should also foster communication and cooperation among themselves. Among the objectives set forth in this chapter are the following: society, governments, and international organizations should develop mechanisms to allow nongovernmental organizations to play their partnership role responsibly and effectively in the process of environmentally sound and sustainable development; and governments and international bodies should promote and allow the participation of nongovernmental organizations in the conception, establishment, and evaluation of official mechanisms and procedures designed to review the implementation of Agenda 21 at all levels.

Local Authorities' Initiatives in Support of Agenda 21

It is recognized that Agenda 21 is related to a large extent to local activities and that the participation of local authorities will be a decisive factor for the achievement of its objectives. Local authorities, as the level of governance closest to the people, play a vital role in educating and mobilizing the public to promote sustainable development. It is proposed that each local authority enter into a dialogue with its citizens, local organizations, and private enterprises and adopt "a local Agenda 21." *From the standpoint of health, local authorities have an important role to play in the establishment and provision of adequate support for local health systems (SILOS).*

Strengthening the Role of Workers and their Trade Unions

This chapter points out that trade unions, as the representatives of workers, will be vital actors in facilitating the achievement of sustainable development in view of their experience in addressing industrial change, the extremely high priority they give to protection of the working environment and the related natural environment, and their promotion of socially responsible and economic development. Among the objectives proposed are the establishment of bipartite and tripartite mechanisms on safety, health, and sustainable development and the reduction of occupational accidents, injuries, and diseases.

SECTION IV. MEANS OF IMPLEMENTATION

Of particular relevance for the health sector are the following chapters: 33. Financial Resources and Mechanisms; 36. Promoting Education, Public Awareness, and Training; and 38. International Institutional Arrangements.

Financial Resources and Mechanisms

This chapter deals with ways and means of financing the implementation of Agenda 21. It is pointed out that it will be necessary to identify ways of providing new and additional financial resources. In general, financing is expected to come from the public and private sectors in each country. For the developing countries, one of the sources of financing might be funds allocated to Official Development Assistance (ODA). The developed countries have reaffirmed their commitment to attain the accepted United Nations target of 0.7% of GNP for ODA and have agreed to augment their aid programs in order to reach that target as soon as possible and to ensure prompt and effective implementation of Agenda 21. The specialized agencies, including WHO/PAHO, will also require additional funds and might benefit from the consensus reached with regard to ODA in order to carry out their responsibilities in the implementation of Agenda 21. However, there are no clear commitments in this respect.

The average total annual cost (for the period 1993-2000) of carrying out the health programs under Chapter 6, in which the Organization has a direct responsibility, is estimated at \$40 billion, of which some \$5 billion is to be contributed by the developed countries. Additional resources will be required in order to finance the health-related components in the other programs.

Actual costs and financial terms, including any that are non-concessional, will depend on the strategies and the programs that the countries decide upon for implementation. This information will be delivered to the high-level Commission on Sustainable Development that it was agreed will be established in 1993, in order to, inter alia, monitor and review of the implementation of Agenda 21.

Another source of financing, especially for implementation of the conventions on climate change and biological diversity, among other projects, is the Global Environment Facility, with special contributions by the countries.

It has also been requested that the International Development Association (IDA), a subsidiary of the World Bank, give special consideration to the needs of the poorest countries in order to meet their objectives under Agenda 21. To this end, the President of the World Bank has proposed an additional input of resources for IDA/10 in 1993-1995.

In addition, Japan and Portugal have offered special contributions for the implementation of Agenda 21.

3. SIGNIFICANCE FOR THE PROGRAMS OF PAHO/WHO

Agenda 21 of UNCED and the programs of PAHO/WHO

Many of the components of UNCED's Agenda 21 are related to programs of the Organization. Thanks in part to the active participation of WHO/PAHO in the preparatory process leading up to the Conference, health is seen as an essential component in the concept and process of sustainable development. WHO's efforts span a broad spectrum of areas relating to environment, development, and health, taking into consideration the consequences of poverty, population growth, and urbanization.

At the Regional level, concern for the relationship between health and the processes of development dates back several decades. In 1974, at a PAHO-sponsored Regional symposium on the environment, it was collectively recognized that environment, health, and development are closely related, and it was recommended that the countries take this relationship into account in drafting their national development plans. In September 1990, the Pan American Sanitary Conference, through its Resolution XIII, approved the Strategic Orientations and Program Priorities (SOPPs) for the Pan American Health Organization during the Quadrennium 1991-1994 as the basic frame of reference for the Organization's strategic planning, consolidating around the strategy of "Health in Development" the strategic orientations and program priorities aimed at enhancing health in the Region. In addition, it requested the Member Governments to take into account the SOPPs in the development of their national health policies.

The strategic orientations adopted include Health in Development as a central overall strategy, into which the other strategic orientations and program priorities flow and complement one another, with a view to promoting greater equity in health, the improvement of living conditions, and the reduction of hazards and damages through effective and efficient interventions, both sectoral and intersectoral. These mandates from the Governing Bodies, together with other resolutions on specific subjects, organize and integrate the current and future actions of the Organization in favor of health in development.

UNCED's Agenda 21 groups together and focuses on priority problems and proposed solutions in four sections:

Section I, which is concerned with the economic and social dimensions of sustainable development, includes programs linked to the fight against poverty, demographic dynamics, human settlements, and health protection, among others. All these areas are health-related or have health components. For the most part, the program areas proposed under Agenda 21

coincide with the programs of PAHO/WHO. The development strategies, targets, and plans set forth in the SOPPs are fully in line with those envisaged by UNCED and will contribute to international efforts toward sustainable development. These include: reorganizing the health sector; focusing action on high-risk groups; health promotion; using social communication; integrating women into health and development; management of knowledge; mobilizing resources; and cooperation among countries, and in particular the program priorities: sector and resource allocation analysis; sectoral financing; management of local health systems and local programming; technological development; and development of human resources, in addition to the Organization's program areas relating to health and the environment, food and nutrition, lifestyles and risk factors, control and/or elimination of preventable diseases, maternal and child health, workers' health, drug-dependency, and AIDS.

Resolution XI relating to environmental protection, adopted in September 1990 by the XXIII Pan American Sanitary Conference, notes that changes in environmental conditions are causing adverse health effects, particularly in the vulnerable segments of the population and especially among the poor, and it urges the Governments to: strengthen the capacity of institutions for environmental health protection, covering all segments of the population; formulate environmental health strategies to facilitate working with communities on environmental health interventions; and give increased priority to health protection associated with environmental aspects of water and sanitation, housing, transportation, industrial development, energy generation, urbanization, and resource exploitation.

Also relevant to the programs under Section I are: the resolutions adopted by the Governing Bodies of the Organization in regard to population (CD30.R8), maternal mortality (CSP23.R17), maternal and child health and family planning (CD31.R18 and CD33.R13, as well as Resolution XVI of the XXXV Directing Council, which met in September 1991, on the same subject). The health of adolescents and young people is included among the mandates in the foregoing resolutions and is addressed more explicitly in Resolution IX, "Comprehensive Health of Adolescents," adopted by the 109th Meeting of the Executive Committee in June 1992. In addition, several resolutions on women, health, and development bear mentioning, in particular Resolution VI of the XXXV Directing Council, held September 1991, which is concerned with improving the status of women, including their living conditions and health. It should also be pointed out that the Governing Bodies and the Secretariat have begun work in the area of health of indigenous peoples. In this connection, a regional workshop is scheduled to be held in early 1993 in order to orient PAHO and the Governments in regard to the health of this group. Resolution XVII on cholera in the Americas, adopted by the XXXV Meeting of the Directing Council in September 1991, is also pertinent.

Section II of UNCED's Agenda 21 is aimed at preserving and protecting the physical and biological environment and contains recommendations on protection of the atmosphere; environmentally sound management of biotechnology; protection of freshwater resources;

environmentally sound management of toxic chemicals, dangerous wastes, and solid wastes and sewage-related issues; and safe and environmentally sound management of radioactive wastes.

The programs of the Organization related to this section are guided by a number of resolutions of the Governing Bodies, including Resolution XIII of the XXII Pan American Sanitary Conference, which approved the implementation of the International Program on Chemical Safety in the Region of the Americas; Resolution XI on environmental protection, adopted by the XXIII Pan American Sanitary Conference; Resolution XV on the International Drinking Water Supply and Sanitation Decade, adopted by the XXXV Directing Council in September 1991, which grants high priority to the provision of these services; and other related resolutions which supplement the SOPPs, especially in regard to health and the environment. These mandates form the basis for the work of the PAHO Program on Environmental Health, which seeks to cooperate with the Governments in order to develop, evaluate, design, and implement mechanisms for the prevention and control of environmental hazards. In addition, the PAHO Research Program includes a component on biotechnology which is aimed at strengthening infrastructure in this area.

Section III of UNCED's Agenda 21 points up the need to strengthen certain social groups in order to achieve sustainable and equitable development. These groups include women, children, young people, indigenous communities, workers and their unions, and others. Meeting the health needs of all these groups is the responsibility of the health sector and is also a focus of various programs of the Organization. The strategy of Integrating Women into Health in Development, included in the SOPPs, together with the extension of health services under the strategies of Reorganizing the Health Sector and Strengthening Local Health Systems, and the programs on food and nutrition and maternal and child health, in addition to the programs that are concerned with the health of young people and the elderly, help to strengthen these social groups and contribute to sustainable development. The principal resolutions that relate to these areas are indicated in Section III. In addition, it should be noted that workers' health is a priority area under the SOPPs and is also the subject of Resolution XIV of the XXIII Pan American Sanitary Conference (September 1990) and Resolution XII of the 109th Meeting of the Executive Committee (June 1992).

Section IV deals with, inter alia, one of the most important aspects of the implementation of Agenda 21: the necessary financial resources and mechanisms. Chapter 33 addresses this issue.

Implementation of the programs proposed by UNCED will require a considerable increase in the financial resources of both the countries and organizations. Although there is no specific proposal regarding the allocation of financial resources through the various mechanisms, it is possible that the resources corresponding to Official Development Assistance might be increased and the Organization might utilize them in the countries. These resources will make

up just a small part of the total amount required, however, and the majority will have to come from the countries.

The Pan American Health Organization, aware of the environmental health situation prevailing in the countries and recognizing that if the countries of the Region do not promptly address the structural factors that lead to disease the situation will continue to deteriorate, has formulated a Regional Plan for Investment in Health and the Environment, taking into account the principles set forth in the Declaration of Alma Ata and those that inspired the International Drinking Water and Sanitation Decade, approved by all the countries of the world in 1978 and 1980, respectively. Investment is considered to be an instrument for spurring, facilitating, strengthening, and contributing to the reform of systems. The Regional Plan contemplates three main sources of funding for investments: (a) internal financing, including the private sector and possible self-financing schemes; (b) external, multilateral, bilateral, public, and private financing; and (c) debt conversion. The Plan is structured into six major components: environment, direct health care, preinvestments, institutional development, science and technology, and special areas. The Regional Plan for Investment is expected to play an important role in the implementation of actions aimed at achieving the objectives of health in development.

Considerations for the Future Work of the Organization

In general, the current programs of the Organization are consonant with the activities suggested under Agenda 21 of UNCED in regard to health issues. This consonance is even more marked when the objectives and targets of the Regional Plan for Investment in Health and Environment (Provisional Agenda Item 5.13 of the XXXVI Meeting of the Directing Council), formulated by PAHO, are compared with various of the objectives proposed by UNCED in Agenda 21. Their achievement will contribute substantially to attainment of the targets proposed in 15 of the chapters contained in Agenda 21, in particular the following: 6. Protecting and Promoting Human Health; 7. Promoting Sustainable Human Settlement Development; 18. Protection of the Quality and Supply of Freshwater Resources; and 20 and 21, which deal with the management of wastes. The implementation of the Regional Plan is all the more important in that it is part of a global movement that seeks to maintain environmental conditions that will be conducive to health and well-being.

However, the proposed Regional Plan will not be sufficient to achieve all the health objectives and targets envisaged under Agenda 21. It will be necessary to step up the activities currently underway as well as to initiate new ones. The implementation of these activities, within the concept of sustainable development, will require a series of actions aimed at strengthening the health sector in the countries to enable it to play the role of expert and leader, as well as adviser and participant, in decisions relating to the human environment, health, and

well-being. The foregoing takes on particular significance in light of the complexity created by the fact that this Region must deal with health problems that are the consequence of not enough development while at the same time addressing health hazards that are the result of too much unsustainable development.

Crucial to the implementation of actions in support of sustainable development is the recognition that the protection and promotion of health is the responsibility of all--governments, institutions, organizations, communities, and individuals--notwithstanding the fact that the ministries of health and environment in the countries have a preponderant responsibility.

In the implementation of the Organization's priority programs, ongoing attention must be given to the health-related problems that affect sustainable development and to the incorporation of new programs as needed. In addition, it will be necessary to reorient research and study activities toward the environmental determinants of health and development. Also it will be necessary to apply new methods for enhancing internal and external cooperation and coordination. More specifically it will be essential to give greater priority to the program areas that are common to UNCED and the Organization, among them nutrition and food safety, health programs for women, mothers, adolescents, children, and the elderly; attention to the needs of the poor, population activities, and attention to the problems of human settlements, particularly in marginal areas. In addition, attention must be given to basic sanitation, the assessment and control of environmental hazards to human health, the development of new technologies, the rational utilization of natural resources, and a number of other factors and problems.

In order for the health sector in the Member Countries of the Pan American Health Organization to participate effectively in attainment of the objectives proposed by UNCED, an intensive effort will have to be made to develop capacities which at present are lacking in many of the countries. Document SPP17/5, which was examined by the Subcommittee on Planning and Programming in December 1991, analyzes some of main requirements for developing these capacities and proposes a new approach for environmental health programs within PAHO and in the countries. In the face of the challenges raised by UNCED and taking into account the proposals made in Document SPP17/5, it is suggested that the ministries of health in every country of the Region promote the establishment or strengthening of a high-level "Commission" to coordinate the actions needed in order to strengthen health and environmental activities, as well as the organizations concerned with these areas, so that they can contribute effectively to the establishment of a process of sustainable development in which health will occupy its rightful place. PAHO/WHO, in coordination with other organizations, will support the work of these "commissions", in particular with regard to: (a) preparation of comprehensive sectoral analyses; (b) formulation of comprehensive sectoral policies; (c) formulation of the corresponding plans and coordination of their implementation; (d) support for effective participation by the health

sector in decision-making relating to development processes; (e) adjustment of national plans of action for the protection of health taking into account the priorities and objectives for national development; and (f) promotion of the development of human resources for the sector, as well as promotion of social mobilization.

In addition, it is suggested that PAHO coordinate a Region-wide effort to develop a set of common policies in the countries, which might take the form of a Pan American Charter on Health and the Environment. This Charter, which would define the principles accepted by the countries of the Region, would be submitted for consideration by the ministers of health, ministers of public works, and ministers of the environment of the Americas at a special conference that would be organized by PAHO in 1994.

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CE113/12 (Eng.)
ANNEX 2

**WHO Global Strategy for Health and Environment
(Resolution WHA46.20)**



世界衛生大會決議

مؤتمرات الجمعية العالمية للصحة العالمية

RESOLUTION OF THE WORLD HEALTH ASSEMBLY
RÉSOLUTION DE L'ASSEMBLÉE MONDIALE DE LA SANTÉ
РЕЗОЛЮЦИЯ ВСЕМИРНОЙ АССАМБЛЕИ ЗДРАВООХРАНЕНИЯ
RESOLUCION DE LA ASAMBLEA MUNDIAL DE LA SALUD

FORTY-SIXTH WORLD HEALTH ASSEMBLY

WHA46.20

Agenda item 19

12 May 1993

WHO GLOBAL STRATEGY FOR HEALTH AND ENVIRONMENT

The Forty-sixth World Health Assembly,

Having considered the reports of the Director-General on the draft WHO global strategy for health and environment,¹ prepared in response to resolution WHA45.31 on Health and Environment, and on the United Nations Conference on Environment and Development;²

Recalling resolutions WHA42.26 on WHO's contribution to the international efforts towards sustainable development, WHA45.32 on the International Programme on Chemical Safety, and EB91.R6 on the WHO global strategy for health and environment;

Mindful of resolution CD35.R17 of the Directing Council of the Pan American Health Organization and the Pan American Health Organization regional plan for investment in the environment and health;

Considering the United Nations Conference on Environment and Development and its results, in particular the Rio Declaration on Environment and Development and Agenda 21;

Noting the European Charter on Environment and Health;

Responding to resolution 47/191 of the United Nations General Assembly on institutional arrangements to follow up the United Nations Conference on Environment and Development, in particular the section on coordination within the United Nations system which requests all United Nations specialized agencies and related organizations of the United Nations system to strengthen and adjust their activities, programmes and medium-term plans, as appropriate, in accordance with Agenda 21, and invites the governing bodies of all the competent organizations to ensure that the tasks assigned to them are carried out effectively;

1. THANKS the Director-General for the very timely and thorough response to the directives of the United Nations Conference on Environment and Development;
2. ENDORSES the WHO global strategy for health and environment;
3. CALLS UPON Member States, in response to the United Nations Conference on Environment and Development:

(1) to give high priority, in line with paragraph 38.8 of Agenda 21, to matters relating to health and the environment in the development of plans on sustainable development at the country level and to utilize the WHO global strategy as the framework for the environmental health aspects of these plans;

¹ Document A46/11.

² Document A46/INF.DOC./3.

- (2) to collaborate closely with WHO in order to strengthen their own capacities in matters related to health and the environment for the attainment of environmentally sound and sustainable development;
 - (3) to allocate adequate resources to implement the WHO global strategy at the country level;
 - (4) to establish appropriate coordinating mechanisms, if they have not yet done so, to ensure collaboration among the authorities in all sectors having responsibilities for health and the environment, including nongovernmental organizations;
4. **APPEALS** to multilateral and bilateral funding organizations to support the WHO global strategy and to give high priority to programmes and projects on health and the environment in financing sustainable development;
5. **REQUESTS** regional committees to use the global strategy in developing corresponding regional strategies and action plans;
6. **REQUESTS** the Director-General:
- (1) to support Member States in ensuring that measures for health and the environment are fully incorporated into plans and activities for sustainable development;
 - (2) to promote actively the global strategy as the basis for measures for health and the environment in Member States;
 - (3) to promote and carry out as part of the strategy, prospective studies on potential environmental hazards to human health;
 - (4) to exploit fully available resources by establishing new approaches and mechanisms required to implement the global strategy, in particular approaches involving several programmes and the strengthening of the role of WHO representatives' offices in countries;
 - (5) to determine the resources required to implement plans of action based on the global strategy throughout WHO, to mobilize the required extrabudgetary resources for implementation at country level and to ensure that priority is given to related requirements in future programme budgets;
 - (6) to expand collaborative activities with other organizations responsible for matters relating to health and the environment and to establish alliances with financial and other organizations to ensure that health goals are incorporated into their programmes on environment and development;
 - (7) to support the convening, in line with paragraph 19.76 of Agenda 21, and in collaboration with the International Labour Organisation and the United Nations Environment Programme, an intergovernmental meeting to consider further the recommendations of the meeting of government-designated experts held in London in December 1991, on increased coordination among United Nations bodies, and on proposals for an intergovernmental mechanism on chemical risk assessment and management;
 - (8) to participate actively in the United Nations Development Programme's Capacity 21, a country-level capacity-building programme in support of Agenda 21;
 - (9) to contribute actively to the work of the Commission on Sustainable Development, established by the United Nations Economic and Social Council, and the Interagency Committee on Sustainable Development, and to forward to the Commission reports on WHO's contribution to the implementation of Agenda 21;
 - (10) to keep the Health Assembly informed through the Executive Board of progress in implementing this resolution.