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**Open-ended Working Group of the International Conference  
on Chemicals Management****First meeting**

Belgrade, 15–18 November 2011

Item 6 of the provisional agenda\*

**Health sector strategy****Proposed strategy for strengthening the engagement of the  
health sector in the implementation of the Strategic Approach****Note by the secretariat**

1. By its resolution II/8, on health aspects of the sound management of chemicals, the International Conference on Chemicals Management invited the secretariat of the Strategic Approach to International Chemicals Management to develop, in consultation with the World Health Organization (WHO), a strategy for strengthening the engagement of the health sector in the implementation of the Strategic Approach for consideration at the third session of the Conference. Such consideration would mark the first time that the Conference has focused on sector-specific engagement issues.
2. Accordingly, a draft strategy was developed taking into account the outcomes of the second session of the Conference relating to health, notably resolution II/8, and a round-table discussion on public health, the environment and chemicals management held during the high-level segment.<sup>1</sup> It was further informed by a consultation held in Ljubljana on 4 and 5 February 2010, co-chaired by Mr. Ivan Erzen (Slovenia) and Mr. Jules DeKom (Suriname), with the financial support of the Governments of Canada, Germany and Slovenia.<sup>2</sup> The draft strategy is set out in the annex to the present note.
3. The development of the strategy was discussed at the Strategic Approach regional meetings held in the period since the second session of the Conference, with a first draft made available on the Strategic Approach website in November 2010.<sup>3</sup> All the comments submitted on the draft have welcomed the development of a strategy and generally supported its content and direction. At the third Latin American and Caribbean regional meeting, held in Panama City from 30 May to 3 June 2011, a resolution specifically supporting the health strategy was adopted.<sup>4</sup>

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\* SAICM/OEWG.1/1/Rev.1.

1 A summary of the round-table discussion on public health, the environment and chemicals management held during the second session of the Conference can be found in the report of the session (SAICM/ICCM.2/15).

2 The consultation was attended by representatives of Bahrain, Belarus, Kenya, Panama, Slovenia, Suriname, Switzerland, Thailand and the United Republic of Tanzania, together with representatives of the European Commission, Health Care Without Harm, the International Council of Chemical Associations, the International Council of Nurses, the International Society of Doctors for the Environment, the World Federation of Public Health Associations, the World Medical Association and WHO.

3 Comments on the draft strategy were received from the Governments of Albania, Hungary (on behalf of the European Union), the Republic of Moldova, Slovenia and Switzerland, and from the European Commission, the European Directorate for the Quality of Medicines and Healthcare and the United Nations Environment Programme.

4 SAICM/RM/LAC.3/3.

4. WHO has drawn the attention of relevant health-sector networks to the strategy. A formal report on progress in the implementation of the Strategic Approach was considered by the Executive Board of WHO at its 126th session (18–23 January 2010) and the sixty-third World Health Assembly (17–21 May 2011). The impacts of the burden of disease attributable to chemicals,<sup>5</sup> the specific roles and responsibilities of the health sector in relation to sound chemicals management and opportunities for improving public health through the implementation of the Strategic Approach have been emphasized by WHO in discussions.

5. The strategy was conceived as a sector-specific supplement to the Overarching Policy Strategy of the Strategic Approach, particularly section VII on implementation and taking stock of progress. It has six specific objectives and focuses on areas of action for strengthening the engagement of the health sector in the implementation of the Strategic Approach, including creating interest and raising awareness of sound chemicals management in health-care settings and increasing the number of joint actions taken, such as those related to both the health and environment sectors, which are a priority for a number of regions.

6. The implementation of the strategy will depend on the financial arrangements for the Strategic Approach, meaning that access to financial resources for implementation will need to be included in Strategic Approach financial considerations. To a large extent the suggested strategic actions are consistent with and reinforce Strategic Approach institutional arrangements and mechanisms such as national and regional coordination and implementation.

7. Recurring throughout the development of the strategy has been the view that data were lacking (or were not communicated effectively) to demonstrate fully the current engagement of the health sector. With a view to better identifying the diversity and success of the actions taken, thereby demonstrating the value of strong engagement, the Open-ended Working Group may wish to consider inviting the presentation of case studies on the engagement of health sector in the implementation of the Strategic Approach at the third session of the Conference. These case studies would be developed on a voluntary basis by relevant organizations or multi-stakeholder initiatives in consultation with the secretariat to ensure coordination and taking into account the structure and format of the third session of the Conference. The case studies would describe new or existing initiatives that are consistent with the proposed strategy and provide a clear basis for assessing their impact.

8. In preparation for the following intersessional period, the Open-ended Working Group may also wish to consider requesting the development of specific targets and indicators of progress for the engagement of the health sector in the implementation of the Strategic Approach and an action plan for the upcoming intersessional period. These targets and indicators would focus on the proposed strategy's objectives and provide information for key intergovernmental processes.

9. The Open-ended Working Group may wish:

(a) To consider the proposed strategy on strengthening the engagement of the health sector in the implementation of the Strategic Approach with a view to recommending its adoption as a supplement to the Overarching Policy Strategy of the Strategic Approach at the third session of the Conference;

(b) To request the secretariat to facilitate work on the development of two or three relevant case studies for presentation at the third session of the Conference to provide a clearer assessment of the impacts of the engagement of the health sector in the implementation of the Strategic Approach for the information of participants;

(c) To request the secretariat to work in consultation with WHO to develop specific targets and indicators for the implementation of the proposed strategy and an action plan for the following intersessional period for consideration at the third session of the Conference.

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5 Annette Prüss-Ustün and others, "Knowns and unknowns on burden of disease due to chemicals: a systematic review", *Environmental Health*, vol. 10, No. 9 (2011). Available from [www.ehjournal.net/content/10/1/9](http://www.ehjournal.net/content/10/1/9). *Ten chemicals of major public health concern*. Available from [www.who.int/ipcs/assessment/public\\_health/chemicals\\_phc/en/index.html](http://www.who.int/ipcs/assessment/public_health/chemicals_phc/en/index.html).

## Annex

# Proposed strategy for strengthening the engagement of the health sector in the implementation of the Strategic Approach to International Chemicals Management

## Introduction

1. The Strategic Approach to International Chemicals Management is a global policy framework to guide efforts to attain the goal set out in the Plan of Implementation of the World Summit on Sustainable Development that, by 2020, chemicals will be produced and used in ways that minimize significant adverse effects on human health and the environment. The involvement of all relevant sectors and stakeholders is central to achieving the objectives of the Overarching Policy Strategy of the Strategic Approach.
2. Chemical safety and human health are key issues in achieving sustainable development, including the eradication of poverty and disease and the elevation and maintenance of the standard of living in countries at all levels of development. The health sector is concerned with the impacts of all chemicals on human health irrespective of the economic sector involved (such as industry, agriculture or mining) and the point in the life cycle at which exposure takes place (production, use or disposal). The health sector can also contribute through a lack of sound chemicals management in its own activities to environmental, occupational and public health problems.
3. By its resolution II/8, the International Conference on Chemicals Management requested the Strategic Approach secretariat to develop, in consultation with the World Health Organization (WHO) and within available resources, a strategy for strengthening the engagement of the health sector in the implementation of the Strategic Approach. The present strategy represents the first time that the Conference has considered sector-specific approaches to attaining its objectives.

## I. Setting the scene

4. Chemicals and the chemical industry contribute significantly to the global economy, living standards and health. The global chemical industry is currently projected to continue to grow steadily until 2030 with a continuation of the trend for increased use and production of chemicals in developing countries and associated potential for greater impacts of those chemicals on human health. Strengthened engagement by the health sector is critical to the prevention of such impacts.

### A. Impacts of chemicals on human health

5. The progress made in improving the sound management of chemicals over recent years notwithstanding, the health impacts of unsound chemicals management remain of concern in most countries. WHO estimates that more than 25 per cent of the global burden of human disease can be attributed to preventable environmental factors, including exposure to chemicals.<sup>6</sup> A recent systematic review of the burden of disease attributable to chemicals estimated that 8.3 per cent of the total or 4.9 million deaths and 86 million disability-adjusted life years (5.7 per cent of the total) were attributable to environmental exposure to and unsound management of selected chemicals in 2004.<sup>7</sup> Unintentional poisonings kill an estimated 355,000 people every year and, in developing countries where two thirds of those deaths occur, such poisonings are strongly associated with excessive exposure to, and inappropriate use of, toxic chemicals, including pesticides.

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6 Annette Prüss-Ustün and Carlos Corvalán, *Preventing disease through healthy environments: towards an estimate of the environmental burden of disease*, World Health Organization, 2006. Available from <http://apps.who.int/bookorders/anglais/detart1.jsp?sesslan=1&codlan=1&codcol=15&codcch=680>.

7 Annette Prüss-Ustün and others, "Knowns and unknowns on burden of disease due to chemicals: a systematic review", *Environmental Health*, vol. 10, No. 9 (20110). Available from [www.ehjournal.net/content/10/1/9](http://www.ehjournal.net/content/10/1/9). Estimates of the burden of disease attributable to chemicals included estimates from the following sources: chemicals involved in unintentional acute poisonings; chemicals involved in unintentional occupational poisonings; pesticides involved in self-inflicted injuries; asbestos; occupational lung carcinogens; occupational leukaemogens; occupational particulates; outdoor air pollutants; indoor air pollutants from solid fuel combustion; second-hand smoke; lead; and arsenic in drinking water.

6. The existing body of knowledge about chemicals of major public health concern notwithstanding,<sup>8</sup> the health risks posed by such chemicals (including mercury and lead) have not yet been eliminated. It is estimated, for example, that approximately 800,000 children are affected by lead exposure every year, leading to lower intelligence quotients. Chemical-related incidents with potential international public health impacts continue to be reported regularly, including, in recent years, the dumping of toxic waste in Côte d'Ivoire, mass sodium bromide poisoning in Angola and significant lead poisoning of local populations from battery recycling operations in Senegal and from artisanal gold mining in Nigeria. In developing countries with fragile health-care systems such incidents can be overwhelming and exacerbate the impact on the health sector.

## **B. Composition of the health sector**

7. The health sector is the part of the economy dealing with health-related issues in society. It includes both preventive and curative medicine, regulation of health service provision, standard-setting, including for public, occupational, and environmental health, and the production and control of distribution of drugs. The sector comprises organizations with public, private, voluntary, traditional and informal components.

8. The health-sector workforce can be defined as all those engaged in activities whose primary intent is to enhance health.<sup>9</sup> Occupations related to health include medical doctors, nursing and midwifery professionals, traditional and complementary medicine professionals, paramedical practitioners, dentists, pharmacists, environmental and occupational health and hygiene professionals, audiologists and speech therapists, social and community agents (or workers) and medical and pathology laboratory technicians. The health-sector workforce can also be found outside the traditional health-care industry in the form of, for example, physicians working for private companies or as university lecturers and researchers.

9. Professional associations are an important part of the non-governmental sector, representing the interests of health-sector employees such as nurses, midwives, general practitioners and medical specialists. Academic and teaching professionals are also significant, as they carry out research related to toxicology and occupational and public health in addition to training the future health-care workforce.

10. Ministries of health have a directing role and are key to policy formulation and setting standards for service delivery and the protection of public health. Specialized institutions and agencies for public and occupational health exist in many countries for functions such as research, laboratory monitoring, food, drug and chemical safety advisory functions, including risk assessment, and for public and occupational health surveillance.

11. WHO is the lead agency for health in the United Nations system. Several other international organizations have health-related portfolios and interests, including the International Labour Organization, for labour-related issues; the Food and Agriculture Organization of the United Nations, for food security; the Organization for Economic Cooperation and Development, for health system performance; the United Nations Development Programme, for health and development; the United Nations Environment Programme, for health and environment linkages; the United Nations Children's Fund, for development and humanitarian issues relating to children; and the World Bank, for health-related development assistance. The World Health Assembly, which governs the operations of WHO, has considered chemicals-related issues and the Strategic Approach at a number of its annual sessions, adopting resolutions relating to environmentally sound waste management and to obsolete pesticides and chemicals in 2011.

## **C. Roles and responsibilities of the health sector in chemical safety**

12. The key roles and responsibilities for the health sector in chemical safety can be summarized as:

- (a) Preventing and managing chemical emergencies, including by providing medical treatment for those affected;
- (b) Gathering clinical and research evidence about chemical risks and informing decision makers and the public;

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8 WHO, *Preventing disease through healthy environments: action is needed on chemicals of major public health concern*, 2010. Available from [www.who.int/ipcs/features/10chemicals\\_en.pdf](http://www.who.int/ipcs/features/10chemicals_en.pdf).

9 WHO, *World Health Statistics 2010*. Available from [www.who.int/whosis/whostat/2010/en/index.html](http://www.who.int/whosis/whostat/2010/en/index.html).

- (c) Working with other sectors to advocate action on chemicals and safer alternatives;
- (d) Raising awareness of chemicals safety with special emphasis on protecting vulnerable populations;
- (e) Assessing the impact of chemicals management policies through monitoring and evaluation, including biomonitoring and health surveillance;
- (f) Sharing knowledge and participating in international mechanisms to solve chemicals-related problems.

13. In some of the above-mentioned roles, such as those relating to emergencies and poisonings, the preparedness and response of the health sector represents a highly visible component of national chemicals management arrangements. Less visible but equally important is the role of the health sector in preventing, diagnosing and treating diseases and using existing knowledge better to understand and deal with the impacts of exposure to chemicals. This is of particular importance as the consequences of exposure to chemicals may not immediately be apparent, e.g., in chronic exposures to some chemicals when a causal effect can often only be determined after epidemiological, clinical, toxicological or analytical investigations have been undertaken. Obsolete pesticides and other chemicals no longer in use pose a permanent and lingering threat of pollution that can affect the health and environment of future generations. Assessing the health impacts of such situations through monitoring and evaluation, including biomonitoring and health surveillance, plays an important part in protecting vulnerable populations and future generations. The health sector also participates in observational and experimental research. Knowledge alone does not suffice, however, and there is room for the sector to play a stronger role in advocating action on chemicals and safer alternatives, including through implementation and compliance with legal instruments, standards and policies.

14. In most developed European countries, the effect of chemicals on health is the greatest environmental concern for the public.<sup>10</sup> Given the position of trust held by doctors, nurses and other community health workers, the health-sector workforce has a critical responsibility to be knowledgeable about the health impacts of chemicals and to communicate its knowledge to the public credibly.

15. In addition to dealing with the adverse impacts of chemicals arising from the activities of other economic sectors, the health sector is a substantial user of chemicals in health care and health-care facility management. Such chemicals may include biocides and other disinfectants and sterilizers, pesticides for controlling pests on-site, cleaning agents, chemicals found in medical devices (e.g., thermometers and electronic devices), pharmaceuticals and pesticides used for controlling disease vectors such as malaria. Recent research has shown that health-sector employees may be more at risk than the general public from chemicals used in the workplace. For example, health-sector workers have been reported to have the highest rate of adult asthma among all major occupational groups and to be at a greater risk of developing chronic respiratory illnesses.<sup>11</sup> By tackling chemical exposure in health-care settings the sector is in a strong position actively to demonstrate safe chemicals management practices and take the opportunity to lead by example.

## II. Challenges and opportunities

16. Many factors that affect the level of engagement of the health sector in the implementation of the Strategic Approach appear to stem from a lack of a common language, appreciation of mutual gains and shared ownership of priority issues. While many positive examples of engagement do exist, a higher and more consistent level of engagement is possible. The Strategic Approach is predominantly felt by the health sector to be an environmental policy framework, as substantiated by the fact that the environment sector is most strongly represented in the institutional arrangements for the Strategic Approach. To provide the context for the present strategy, the main challenges and opportunities faced by the health sector in this regard are set out below.

### A. Current level of engagement in chemicals issues

17. While there is some engagement by a growing number of health-sector organizations in sound chemicals management, a much higher and more consistent level is both desirable and possible.

<sup>10</sup> TNS Opinion & Social, *Electromagnetic Fields*, European Commission, June 2010. Available from [http://ec.europa.eu/public\\_opinion/archives/ebs/ebs\\_347\\_en.pdf](http://ec.europa.eu/public_opinion/archives/ebs/ebs_347_en.pdf).

<sup>11</sup> Pia Markkanen and others. *Cleaning in healthcare facilities: reducing human health effects and environmental impacts*. April 2009. Health Care Research Collaborative. Available from [www.noharm.org/us\\_canada/reports/2009/apr/rep2009-04-20.php](http://www.noharm.org/us_canada/reports/2009/apr/rep2009-04-20.php).

Successful examples of engagement include: advocacy for the elimination of mercury from medical devices, the role of the health-care sector in improving health-care waste management and the involvement of paediatricians, general practitioners, nurses, midwives and health-related institutions in initiatives to tackle the potential adverse effects of environmental factors on children's health.

18. The health sector is primarily engaged in chemicals issues through traditional programmatic activities such as those related to food safety, drinking water quality and air pollution. These are not, however, strongly perceived as being part of the international chemicals agenda, often having their own specialized frameworks for action. Furthermore, most legislation controlling chemicals lies beyond the sector's purview. The numerous national, regional and international chemicals management frameworks and agreements have been implemented on a piecemeal basis, making it difficult for the sector to keep abreast of requirements and opportunities to contribute and creating the possibility of important issues being duplicated or overlooked.

19. Some influential parts of the sector have the potential to improve their engagement. For example, professional groups such as doctors and nurses have prominent professional associations, carry considerable authority and are held in high esteem by the public.

## **B. Benefits of engagement**

20. The International Conference on Chemicals Management is a credible international forum focusing on attaining the 2020 goal on chemicals set out in the Plan of Implementation of the World Summit on Sustainable Development, which remains a challenge for all countries. The breadth and complexity of chemicals issues, the potential for fragmentation of efforts at the national, regional and global levels and the identified need for capacity-building provide a strong argument for the full use of the Conference as a unique enabling environment for intersectoral cooperation by all stakeholders.

21. The potential benefits of such cooperation include enhanced awareness of the issues facing the sectors, improved dialogue, shared expertise and information, and the development of joint actions and capacity. Improving joint access to available financial resources is central to promoting and strengthening cooperation. There is concern generally that the benefits of intersectoral cooperation need to be better documented and/or communicated to ensure that there is wider recognition, engagement and support. This is likely to be particularly relevant to sectors that are largely under-represented, such as the governmental health sector. Engagement is often constrained by a lack of awareness and understanding of the Strategic Approach as a voluntary framework for action. Several existing Strategic Approach initiatives, such as those aimed at mainstreaming chemicals into national development agendas and contributing to the attainment of the Millennium Development Goals and the Strategic Approach's Quick Start Programme, are yet to be fully exploited, their significant potential benefits for the health sector notwithstanding.

## **C. Strategic Approach institutions**

22. The government-related environment sector is the most strongly represented sector in the institutional framework for the Strategic Approach. It is estimated that over 85 per cent of Strategic Approach national focal points are located in environment ministries and participants in Conference negotiations and regional meetings are also primarily from this sector. Effective national coordination arrangements, as envisaged in paragraph 23 of the Overarching Policy Strategy, are therefore of overriding importance in enabling the participation of all relevant sectors, including the health sector; in obtaining a greater understanding of the roles and responsibilities of the sectors; in making use of their comparative strengths and in facilitating the role of national focal points. In some countries difficulties in identifying relevant contacts in the health sector has hindered the establishment of cross-sectoral linkages. There remains a number of key health-sector organizations, principally non-governmental, that have not yet nominated a Strategic Approach focal point.

## **D. Health-related Strategic Approach priorities**

23. As part of the development of the Strategic Approach, the WHO secretariat coordinated the identification of relevant health-sector priorities, including actions to: improve abilities to gain access to, interpret and apply scientific knowledge; fill gaps in scientific knowledge; develop and use harmonized methods for chemical risk assessment; develop better methods for determining the impacts of chemicals on human health, setting priorities for action, detecting chemicals and for monitoring progress of the Strategic Approach; build capacities of countries to deal with poisonings and chemical incidents; develop strategies directed specifically at the health of children and workers; and promote alternatives to highly toxic and persistent chemicals. These priorities are among those included in the Global Plan of Action of the Strategic Approach in work areas on human health

protection, children and chemical safety and occupational health and safety.<sup>12</sup> It is not known to what extent these priorities and others of interest to the health sector are being considered in Strategic Approach implementation plans.

### **E. Reform and development of the health sector**

24. Health ministries are strongly committed to primary health care as a basis for sectoral reform and to the attainment of the Millennium Development Goals with their emphasis on the eradication of poverty and other health-related inequities. Health security and, in particular, a growing appreciation of the need for an effective response to international threats to public health, have underpinned efforts to implement the revised International Health Regulations. The Regulations are a legally binding international instrument of relevance to the Strategic Approach. They deal not only with existing and emerging disease outbreaks but also with chemical events that cross national borders. A number of capacity-building activities are being undertaken by health ministries in the context of implementing the revised Regulations, including improving emergency preparedness, alert and response; strengthening laboratory capacities; better coordinating inspections at designated airports, ports and ground crossings; and enhancing national capacities for epidemiological surveillance, risk assessment and communication. Such activities offer the potential to strengthen coordination between the health sector and others engaged in the sound management of chemicals.

### **F. Regional health and environment initiatives**

25. Many health and environment ministries are already committed to tackling jointly the environmental impacts on health. Actions to intensify collaboration between health and environment ministries including to identify joint priority areas, implement national environment and health action plans, and agree on mutually supportive and specific activities are a feature of a number of regional health and environment initiatives.

26. The Libreville Declaration on Health and Environment in Africa, adopted in 2008 at the first Inter-Ministerial Conference on Health and Environment in Africa, has provided an impetus for a renewed political commitment to the process for catalysing the policy, institutional and investment changes necessary to reduce environmental threats to health. In Europe and the Americas, regional health and environment initiatives have long been at the heart of the movement to tackle the negative effects of environmental factors on children's health. In South-East and East Asia, the relevant regional health and environment ministerial processes have focused on sharing information and data on chemical impacts and enhancing technical knowledge and skill among member countries to improve chemicals risk assessment and management. During the Fifth Ministerial Conference on Environment and Health, European ministers and representatives adopted the Parma Declaration on Environment and Health,<sup>13</sup> reiterating their commitment to tackling the key environment and health challenges and bringing new priorities to the fore. Linkages between the Strategic Approach and regional health and environment initiatives have yet to be fully exploited.

### **G. Capacity in the health sector**

27. WHO advocates the strengthening of health systems globally, particularly in response to health inequalities around the world. Chronic shortages of health-sector workers in many countries mean that capacity for work on chemicals management is not optimal. At the national level, ministries and other sectors outside the health sector can play an important part in calling for the strengthening of health-sector capacities in accordance with defined roles and responsibilities for chemicals safety. The capacity-building needs of the health sector in terms of taking on its designated roles and responsibilities could be further assessed. It is often assumed that the skills to take on such roles already exist, but evidence suggests otherwise. For example, although nurses make up the largest group of health professionals and the first and often only point of contact for many individuals with the health sector, most nurses have received no formal training in occupational or environmental health.<sup>14</sup> The trust accorded by the public to the medical profession in answering questions concerning their health may also contrast with the paucity of training in environmental health included in the curricula of many medical schools. The well-documented lack of basic poison information centres and analytical laboratories in many regions represents further indications that health-sector capacity in relation to chemicals management needs strengthening.

12 Global Plan of Action of the Strategic Approach, work areas on human health protection (activities 2–6), children and chemical safety (activities 7–10), and occupation health and safety (activities 11–21).

13 Available from [www.euro.who.int/\\_\\_data/assets/pdf\\_file/0011/78608/E93618.pdf](http://www.euro.who.int/__data/assets/pdf_file/0011/78608/E93618.pdf).

14 Leyla Erk McCurdy and others, "Incorporating environmental health into paediatric medical and nursing education", *Environmental Health Perspectives*, vol. 112, No. 17 (2004), pp. 1755–1760.

### **III. Aims and objectives of the strategy**

28. The principal aim of the strategy is to provide an agreed intergovernmental approach to strengthening the engagement of the health sector in the sound management of chemicals and thereby increase the likelihood that, by 2020, chemicals will be used and produced in ways that lead to the minimization of significant adverse effects on human health and the environment.

29. The strategy is conceived as a sector-specific supplement to the Overarching Policy Strategy, particularly section VII on implementation and taking stock of progress. It has six specific objectives:

(a) To foster a deeper interest in and awareness of sound chemicals management among stakeholders in the health sector and to build their capacity to undertake preventive actions, especially by increasing the amount, quality and relevance of information disseminated to the sector on the human health aspects of chemicals management;

(b) Actively to involve the health sector in improving the amount, quality and relevance of information available on the impacts of chemicals on human health, including through risk assessment;

(c) To strengthen the health sector's capacity to fulfil its roles and responsibilities in chemicals management;

(d) To improve consultation, communication and coordination with other sectors and increase the number of joint actions at the national, regional and international levels;

(e) To ensure the effective use of existing resources, including organizations and funds, and to leverage additional resources where needed;

(f) To strengthen coordination, leadership and coherent action by international agencies, including United Nations agencies, relevant convention secretariats, multilateral funding agencies and regional development banks, with regard to the health sector's implementation of the Strategic Approach.

### **IV. Guiding principles**

30. The guiding principles and considerations in the development of the draft strategy are set out in the box.

31. The term "engagement" is used to convey a sense of the level of participation, ownership and involvement. It may be seen as a continuum along which individuals or groups move from a basic awareness to personal, professional and institutional involvement and actions. The highest level of multisectoral engagement may be characterized as joint action and decision-making with other Strategic Approach stakeholders. In general terms, partnerships, alliances and joint plans of action often emanate from such a level of engagement.

### Guiding principles in the development of the health sector strategy

- **Prevention:** precautionary measures are crucial in avoiding human health impacts of existing or future chemicals use.
- **Evidence-based:** using and contributing to the scientific understanding of the links between health and the environment and the evidence of preventive actions is key.
- **Consistency:** there is a need to build on and leverage existing policies, commitments and processes.
- **Diversity:** it is important to recognize that stakeholder organizations may have different missions, experiences, perspectives and capacity.
- **Country-owned and country-driven:** the strategy must respect the experience, capacity and priorities of each implementing country and its population.
- **Coherence:** encouraging ever-closer coordination and cooperation between stakeholders in a shared framework of action is fundamental.
- **Measurability:** the availability of clear, credible and comparable data on aspects such as the costs and benefits of policy interventions is imperative.
- **Synergies:** synergies and untapped potential that may exist in the shared agendas of stakeholders and sectors must be explored and exploited.
- **Equity:** the participation and protection of vulnerable groups, such as women, children, older persons, indigenous populations and socially and economically disadvantaged groups, must be assured.

32. Given that the Strategic Approach includes provisions to protect human health, it is not the purpose of the present strategy to set out additional measures in that regard but rather to focus on those measures and activities that bring about the involvement and participation of the health sector. To that end, the strategy will build on an understanding of the key roles and responsibilities of the health sector, identifying unrepresented or underrepresented stakeholders, finding ways to enhance the natural strengths of the health sector and developing a common understanding of the benefits of the Strategic Approach.

## V. Activities

33. Possible activities to fulfil the objectives of the strategy are described below. They have been grouped around six themes: awareness-raising; building health-sector networks; empowering Strategic Approach focal points; creating healthy health-care settings; strengthening professional training and development; and increasing joint actions between sectors.

### A. Awareness-raising

#### 1. Typology of the health sector

34. Further work is needed to raise awareness of the Strategic Approach and of the potential benefits to the health sector from engagement with it. Given the diverse nature of potential participants, further characterization of the typology of stakeholders in the health sector would enable information products to be tailored to different audiences. Those with little awareness of the Strategic Approach could be targeted and those with a high potential for engagement prioritized. Priority groups for awareness-raising emanating from the development of the present strategy include ministries of health and underrepresented professional groups such as nurses, midwives, doctors and occupational health officers who could be important advocates of the Strategic Approach.

#### 2. Range of information products

35. The nature of the Strategic Approach as a framework for concerted multisectoral action is not readily understood beyond international governance settings. Information products could focus on examples and benefits of and opportunities for engagement in the Strategic Approach and on specific technical issues of interest such as lead in paint, mercury in measuring devices, chemicals of major

public health concern, occupational hazards, chemicals subject to international actions and children's environmental health, emphasizing the relevance of each issue to the target health sector audience.

### **3. Strategic Approach health information portal**

36. A Strategic Approach health information portal could facilitate access to useful information and activities as part of the secretariat's clearing-house activities. The portal would provide links to national awareness-raising campaigns and organizations working on chemicals and health issues. Branding the portal "SAICM health" and linking it to the WHO Global Health Observatory<sup>15</sup> might further encourage broad recognition and lead to an improved understanding of the Strategic Approach as a forum for tackling chemicals issues.

### **4. Journals**

37. To capitalize on the most frequently read journals catering specifically to the health sector, efforts could be aimed at increasing the number of peer-reviewed articles on the Strategic Approach health-sector issues in health-care, medical, toxicology and other related journals, including those of professional bodies.

## **B. Building networks in the health sector**

### **1. Directory**

38. Each Government and relevant organization should be invited to nominate one or more contact points in the health sector to enhance linkages across the sector between people and entities working on chemicals issues. To make full use of its existing network of country and regional offices that are well versed in the sector's priorities, WHO should be invited to make relevant contact information available to enable a network of contacts to be swiftly established and linked to the Strategic Approach health information portal. This action would be consistent with requests made at meetings of the Latin American and Caribbean region. The inclusion of existing institutions and centres for public and environmental health in the directory or network would help to bolster technical capacities at the country and regional levels.

### **2. Specific interest networks**

39. Interactive websites, discussion forums and networks should be established on issues of specific interest to encourage the engagement of the health sector, information flow and the exchange of learning and best practices between health professionals, academics and other stakeholders. Lessons learned and case studies on successful interventions and experiences with chemicals of major public health concern could be shared in this manner. The networks should continue to be developed and managed by stakeholders with increased visibility and accessibility at the international level. The selection of discussion groups would be guided by the identified key roles and responsibilities of the sector, such as risk assessment. Efforts would be made to build on existing discussion groups and networks to ensure their promotion and use wherever possible, e.g., for poisons and accident prevention and risk assessment guidelines. Once established the networks could be used to develop and organize evidence on sensitive and critical endpoints and provide a vehicle for the further development of existing evidence to support efforts on preventive actions.

## **C. Empowering Strategic Approach focal points**

### **1. Role of Strategic Approach focal points**

40. A clear mandate should be given to Strategic Approach focal points to engage with colleagues in the health sector, to provide health updates in relevant Strategic Approach forums, such as regional meetings, and to highlight issues of mutual importance for health and environment. When nominated Strategic Approach focal points are unable to participate in meetings, nominated contact points from other sectors, such as the health sector, could be encouraged to do so.

### **2. Monitoring Strategic Approach implementation plans**

41. A clearer and more formal understanding of the implementation of the key health-related activities expressed in the Global Plan of Action might be obtained by reviewing existing and future Strategic Approach implementation plans in conjunction with planning tools for health-sector development. Efforts to link such work with WHO initiatives at the country level, for example WHO cooperation strategies that set out the priorities jointly agreed upon by WHO and national Governments, could foster closer links between strategic agendas. Such approaches would enable

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15 <http://apps.who.int/ghodata/>.

aspects of chemicals management related to the health sector to be identified more readily and information on specific chemicals and health issues, including environmental disease burdens, to be taken into account. Information could be gathered on the implementation status of health-related elements of the Global Plan of Action to enable updating of the plan over time.

### **3. High-level health-related briefing sessions**

42. High-level briefing sessions on health for politicians and senior officials at the national, regional and international levels should be conducted. Such briefings could be incorporated into regional meetings on the Strategic Approach and would serve to provide decision makers with clear and up-to-date advice and evidence on the burden of disease and associated costs, to promote dialogue between sectors and to raise the policy profile of health aspects of sound chemicals management. Host countries of regional meetings could be encouraged to take the lead in organizing such sessions involving the health secretary or other senior health ministry representatives in their country.

## **D. Health-care settings**

### **1. Mobilizing the interest and awareness of the health-care workforce**

43. The health-care industry is a major consumer of chemicals, including those that are known to have serious impacts on health and the environment. Thus, a sector whose mission it is to protect human health may also be contributing to the burden of disease. Chemicals in products that are used in health care affect human health throughout the life cycle of those products. Vulnerable populations include patients, health-care workers who are exposed to chemicals on a daily basis, factory workers involved in the manufacture of health-care products, workers in waste disposal facilities and people who live near manufacturing plants or waste disposal sites. Mobilizing health-care workers' interest in and awareness of sound chemicals management could lead to greater awareness of and engagement in chemicals management and more generally a reduction in the burden of chemicals-related occupational diseases and other forms of work-related ill-health within health-care settings.

### **2. Chemicals policy for health-care settings**

44. A framework for a chemicals policy for health-care settings should be established on the basis of best practices. One approach might be to initiate the development of a report on the use, disposal and environmental health impacts of chemical constituents of products used in health-care settings. The report could include best practice case studies in hospitals and other health-care settings where safer alternatives to selected uses have been introduced to identify possible actions for the health sector to reduce the use of hazardous chemicals. The report could identify those who might be engaged in decision-making to introduce safer alternatives into such settings, including planners, builders, systems managers, suppliers, operators and stakeholders representing inpatients, outpatients and local communities.

## **E. Strengthening professional training and development**

### **1. Environmental health training**

45. Professional training and development in environmental health has yet to be optimally strengthened, particularly for specific vulnerable groups, including children, older persons, highly exposed populations and indigenous people. Existing training modules for paediatricians covering key aspects of children's environmental health should be fully used at the national level. Such materials could be extended or adapted for use in teaching curricula on chemicals and health as part of undergraduate and postgraduate nursing and medical training to foster the further development of a cadre of medical and nursing professionals qualified in environmental health. Consideration should be given by medical schools to residencies and fellowships or specializations in environmental health with an emphasis on toxicology, occupational and public health.

### **2. Pilot projects linking professional associations**

46. Pilot projects could be initiated to link professional medical and nursing associations with key academic environmental health or risk analysis groups and institutions to strengthen engagement on chemicals management issues.

**F. Increasing joint actions by sectors****1. Health protection as a cross-cutting issue****(a) Multilateral environmental agreements**

47. Given that all multilateral environmental agreements aim to protect human health, common cross-cutting actions involving the health sector could be jointly pursued and coordinated with the Strategic Approach and the present strategy. Capacity-building initiatives such as strengthening national capacities for laboratory analysis; emergency preparedness, alert and response; better coordinating inspections at ports and land crossings, and enhancing epidemiological surveillance, risk assessment and communication, have applications under several international chemicals instruments, including the revised International Health Regulations. The Strategic Approach could be used to foster and monitor improved cooperation in this regard. Such an approach could increase leverage and resources, particularly for capacity-building projects where significant investment is needed. Surveillance and biomonitoring activities, for example, would be of value to a number of national, regional and international instruments and engage the health sector specifically.

**(b) Toxicovigilance**

48. Toxicovigilance and toxicosurveillance are analogous terms for a systematic approach to the identification and prevention of the adverse effects of chemicals largely based on the collection of observational information from human experience. Pharmacovigilance is a similarly active approach to gathering post-marketing information on the adverse effects of drugs. Successful toxicovigilance approaches rely on effective coordination and relations between ministries, health-care establishments and poison information centres, among others, and provide an opportunity for engaging health-sector and other stakeholders while promoting the sound management of chemicals.

**2. Regional health and environment processes**

49. The strengthening of regional health and environment ministerial processes affords an opportunity to stimulate the engagement of the health sector with chemicals issues. Several existing initiatives have the potential to draw further attention to implementation of the Strategic Approach. In Africa, for example, chemicals management was recently identified as one of 10 joint environment and health priorities for implementation of the Libreville Declaration. Links between such processes and the implementation of the Strategic Approach should be formalized as part of the present strategy.

**VI. Means of implementation**

50. The present strategy was conceived as a sector-specific supplement to the Overarching Policy Strategy, in particular section VII on implementation and taking stock of progress, and is the first sector-specific supplement to be developed. As part of the Overarching Policy Strategy, its implementation will depend on the overall implementation arrangements for the Strategic Approach, notably institutional arrangements that include national coordination, and regional processes with a periodic review process facilitated by the secretariat at the international level. Specific financial provisions for implementing the health sector strategy will be critical to its success.

51. To achieve the objective of improving consultation, communication and coordination with other sectors and to increase the number of joint actions at the national, regional and international levels, a firm commitment to indicators and targets for measuring the level of multisectoral engagement in the Strategic Approach is necessary. An increase in the number of joint actions between sectors will be more likely if there is multisectoral representation in relevant institutional arrangements to enable joint development of plans and joint discussion of funding, review and evaluation mechanisms. Progress will be reviewed at regional meetings held during the next intersessional period. An action plan setting forth the responsibilities of key stakeholders will also be developed during that period.

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