



Evaluation & Recommendations
**Inter-Ministerial Review of the Children's
Health & Environment Action Plan for Europe**

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Common Abbreviations

CEHAPE:	Children’s Health and Environment Action Plan for Europe
IMR:	Inter-Ministerial Review
RPG(s):	Regional Priority Goal(s)
WHO:	World Health Organization



1. Introduction

1.1 WECF

Women in Europe for a Common Future (WECF) is a network of 80 organisations working to improve the protection of human health and the environment. WECF's international network consists of members and partners in 30 countries in Western and Eastern Europe, the Caucasus, and Central Asia. Activities range from partnership projects in practical health and environmental issues, to advocacy projects, bringing issues to the international arena. WECF has working groups on Chemicals, Water & Sanitation, Agriculture & Sustainable Development, Energy & Climate Change, and three cross cutting issue groups: gender, poverty & sustainable development, and participation & environmental justice.

1.2 Children's Environment and Health Action Plan for Europe (CEHAPE)

1.2.1 Overview

The Children's Health and Environment Action Plan for Europe, or CEHAPE, is a document for policy makers addressing environmental risk factors that most affect the health of European children. It was developed at the request of Member States and adopted by European Ministers at the Fourth Ministerial Conference on Environment and Health (2004) on "The future for our children". This action plan highlights the main commitments on children's health and environment and focuses on four regional priority goals (RPGs) for Europe.

1.2.2 Member State Commitments: the Regional Priority Goals (RPGs)

RPG 1: Safe water and sanitation

"We aim to prevent and significantly reduce the morbidity and mortality arising from gastrointestinal disorders and other health effects, by ensuring that adequate measures are taken to improve access to safe and affordable water and adequate sanitation for all children"

RPG 2: Protection from injuries and adequate physical activity

"We aim to prevent and substantially reduce health consequences from accidents and injuries and pursue a decrease in morbidity from lack of adequate physical activity, by promoting safe, secure and supportive human settlements for all children...we aim to bring about a reduction in the prevalence of overweight and obesity."

RPG 3: Clean outdoor and indoor air

"We aim to prevent and reduce respiratory disease due to outdoor and indoor air pollution thereby contributing to a reduction in the frequency of asthmatic attacks in order to ensure that children can live in an environment with clean air. "

RPG 4: Chemical-free environments

"We commit ourselves to reducing the risk of disease and disability arising from exposure to hazardous chemicals (such as heavy metals), physical agents (eg. excessive noise) and biological agents and to hazardous working environments during pregnancy, childhood and adolescence."

1.3 Health and Environment Inter-Ministerial Review

1.3.1 Overview

The Inter-ministerial Review of the Children's Environment and Health Action Plan for Europe (CEHAPE) was established for Member States to take stock of progress achieved since Budapest 2004 and to see how best to move forward to Rome 2009. Governments from 52 of the 53 countries of the European Region presented their progress to date on achieving CEHAPE goals and highlighted projects and experiences in the area of children's environmental health. The NGO community, led by ECO Forum/WECF and HEAL, also reported on their experiences and presented solutions and recommendations for the way forward.

There was a definitive call for implementation of better primary prevention policy in the health sector as reflected in the European Commission's mid-term review of the EU action plan on Environment and Health,



presented in Vienna. There were calls from many Member States to take their knowledge to other Ministries including transport, energy, finance and development to ensure a holistic approach to solving the increasing rates of environmental-related mortality and morbidity across Europe. Finally, Member States noted the importance of having youth and civil society involved in an open and transparent way.

While there were calls for the CEHAPE process to continue but it was made clear that political support was lacking and more effort to explain the importance of children's environmental health was necessary. There was much talk about focusing attention on fewer priorities and striving to reach the "low hanging fruit." While the EU countries have come some way in being able to measure progress with the use of indicators, there as a call for solidarity with other European countries to ensure all countries have the resources and tools necessary to make concrete progress.

Topics highlighted for discussion in Italy in 2009 included: climate change and health, chemicals, children's health, the links between biodiversity and health, and environmental justice and East-West disparities.

1.3.2 Outputs

A ranking of countries on the basis of CEHAPE indicators was presented and summarizes information on health and environment gathered by the European Environment and Health Information System - ENHIS. The information is aggregated over the 26 RPG indicators, selected on the basis of their policy relevance and scientific reliability. This "baseline assessment" provides a first evaluation of the status and trends of the priority environment and health issues specified in CEHAPE and illustrates the large disparities in health-related environmental conditions both between parts of the WHO European region and between populations within Member States. In addition, the midterm review of the EU Environment and Health Action plan was presented, stressing the need for "health in all policies."



2. NGO Input

2.1 Children's Health and Environment Best Practice Awards

With the support of the Austrian Environmental Ministry, the NGO community handed out awards for some of the best projects shown to improve children's health by enhancing their physical environment and reducing respiratory disease, reducing exposures to harmful chemicals, increasing access to better water and sanitation and preventing accidents and injuries. These awards were known as the Children's Environment and Health Action Plan for Europe, or CEHAPE Best Practice Awards and were categorized by the four Regional Priority Goals of the CEHAPE process. There was a pool of approximately 100 applicants of which three winners were chosen per category, with one special winner receiving a 1,000 Euro award.

2.1.1 Best Practice Special Winners

Category 1: Water and Sanitation

Femei pentru un Viitor Curat (Women for a Clean Future) with the project: *"Community acts to make drinking water safe."*

In Romania, seven million people lack access to safe drinking water. Women for a Clean Future have completed two water and sanitation projects in the village of Garla Mare, where human waste and pesticide concentrations in water are dangerously high. One of the results of nitrate pollution of drinking water is methaemoglobinaemia, or "blue baby" disease, which turns babies' and children's skin a bluish colour. "Ecosan" toilets and "waterless urinals" were installed to help reduce water pollution from human excrement. Water filters were fitted in schools and community cleaning of some wells was organised and villagers were encouraged to test the well water for safety and make known the results.

Category 2: Protection from injuries

Climate Alliance Austria with the project: *"Mobility managed for children's health"*.

Parents are worried about children walking or cycling to school so they take them in the car. This adds to the traffic on the roads thus causing a vicious cycle. Climate Alliance Austria, working within the Climate Change Initiative of the Austrian Environment Ministry, wants to break this downward spiral for the benefit of children and climate protection. The project is providing a basic package of information and teaching materials for 500 interested schools or teachers in Austria. Additionally, fifty schools are benefiting from a more intensive programme. Over the course of a year, a mobility manager helps the children, teachers and parents find local solutions to their problems. This may be achieved via road safety measures or innovative approaches such as roundtables with children, community members and transport company staff.

Category 3: Improving air quality

The Paediatric Environmental Health Speciality Unit (PEHSU) Murcia with the project: *"Doctors who stop smoking before it starts"*

Spain has one of the highest rates of tobacco prevalence in Europe. In Murcia and Valencia, well over a third of 14 to 18 year olds say they have smoked tobacco during the past month. The Paediatric Environmental Health Specialty Units (PEHSU) in Murcia and Valencia decided to try and reduce exposure to tobacco smoke by targeting the prevention of smoking initiation in schools. The project provides audiovisual materials on the tobacco epidemic, the harmful effects of smoking, and information on how to give up smoking. The project involves questionnaires and visits from parents to the San Jorge school in Murcia and the San José Jesuitas school in Valencia to ensure that the messages reach the students' homes.

Category 4: Protection from hazardous chemicals

Western-Transdanubian Regional Institute of National Public Health, Hungary with the project: *"Public health leaders promote sun-safe behaviour"*

The Western-Transdanubian Regional Institute of National Public Health and Medical Officers' Service in Hungary joined a skin cancer prevention programme coordinated in Rome to teach children "sun-safe behaviour". During 2004, more than 2,000 Hungarian children received information from the programme. First, questionnaires were distributed in 20 primary schools in three cities. The results were analysed with the help of the Italian institute. Each participant was sent his or her result in a letter just before the summer holidays. The key messages included that those with a sensitive skin complexion are most vulnerable, and that sunburn during childhood doubles the risk of developing malignant melanoma later in life.



Category 5: Youth participation

Municipality of Ålesund, Norway, with the project: "*Young Norwegians turn their city green*".

Environmentalists in Norway are convinced that involving children and young people is the key to healthier and more sustainable living. The Municipality of Ålesund is working with Ecoagents in a campaign to promote children's environmental rights that started in 2000. Known as "Children's green cities", the campaign demands children's right to clean air, water, safe bicycle paths, and green areas where children can play. Since 2000, six Norwegian cities have joined the campaign and each has been made a "Children's green city". This year, Ålesund is working hard to become the 7th "Children's green city" in Norway. Activities began in kindergartens and schools where children were asked for their wishes for the environment. A total of 350 posters sent to the kindergartens and schools created an opportunity for children to send in their ideas. From a combined "wish list", the solutions to three requests were debated in a children city council where the mayor presided as chair.

2.2 Report Back, "RPG News: Beyond Budapest"

During the Inter-ministerial program, NGOs gained great attention by presenting their input in the form of a lively 45-minute newscast, "RPG News: Beyond Budapest." Reporters for each RPG, "in the field," highlighted progress, challenges and recommendations for Member States to consider when aiming to reach CEHAPE goals in advance of Rome 2009.

2.2.1 RPG 1 Water and Sanitation

NGOs reported that children are still dying from diarrhoea and blue baby syndrome in Europe—a disease completely unnecessary as a cause of death. In addition, countries are not always taking sufficient actions to provide improved water and sanitation for the most needy: children in rural areas. As such, and with many other environmental problems, children of poor or minority groups or refugees suffer the most.

In 2003, the NGO Brussels Statement called on governments to finally ratify the Water & Health Protocol, which is now in force with an excellent workplan, concrete steps, and task division. However many countries still must ratify this protocol and there is a lack of funding for the workplan.

NGOs recommended that safe school sanitation must be a priority, especially for schools in rural areas that need safe toilets with hand-washing facilities. In addition, NGOs reiterated the need for access to safe drinking water (one cannot simply close a polluted well without providing an alternative). Schools with unsafe sanitation or no safe water supply should not be allowed to function. Immediate urgent action needs to be taken to ensure our children are safe while attaining their education. Ministries of Health and Environment need to put safe school sanitation at the top of the government agendas (involvement needed from local governments, and Ministries of Education and Public Works. Finally, it was noted that EU structural funds and developing funds should be targeted towards school sanitation in rural communities without safe water supply and sanitation.

2.2.2 RPG 2 Accidents, Injuries, and Physical Activity

NGOs reported that in Europe, more children die of injuries than all other childhood diseases and an estimated 10 billion Euros was spent treating injuries to children in 1999 alone. Apparently, if current knowledge about effective prevention strategies was immediately applied by Member States, researchers estimate that 90% of child injuries could be prevented.

While it was noted that there has been more political commitment to action, more multi-sectoral cooperation, and an increasing capacity to address child injury prevention, there is still the concern that commitment and resources are not commiserate with the size of the problem. More strategies need to be developed that go beyond educational campaigns alone. No country in the European region has implemented all of the recommended good practice strategies to reduce child injury.

NGOs called on Member States to honour their commitment to promote safe, secure and supportive human settlements for all children in Europe by, through investments in child injury prevention, development of national child safety action plans, adoption, implementation and enforcement of what works, and continued efforts to enhance the capacity to develop, implement and evaluate effective injury prevention strategies



2.2.3 RPG 3 Air Quality

NGOs reported that 350,000 people die each year from air pollution in the EU alone, with a financial burden of asthma at nearly €17.7billion. Children living close to busy roads have approximately a 50% increased risk of experiencing respiratory illness, including asthma and reduced lung function over the course of their lifetime, and asthma is the number 1 reason for children missing school in the EU. Our children have a basic right to clean air.

NGOs recommended that urgent measures be taken by Member States to tackle air pollution and climate change simultaneously, including switching to clean energy sources and providing access to these sources for the most vulnerable population groups. Appropriate legislative action was recommended for indoor air quality norms and the need for their enforcement in schools was highlighted. An additional recommendation included a ban on toxic substances from building products, furniture and consumer products.

NGOs also recommended real enforcement of the banning of smoking in the public transport system, and to ratify and enforce the WHO Framework Convention on Tobacco Control. NGOs also advocated that a level of protection greater or equivalent to that of the WHO International Ambient Air Quality Guidelines be ensured in the whole region, with an emphasis on the Eastern countries. Finally, multi-stakeholder cooperation was promoted, taking our children's health based on better respiratory health as a priority to the Transport, Development and Energy Ministers.

2.2.4 RPG 4 Chemicals, Noise, other Physical Agents and Occupational Safety

NGOs focused on chemicals as the greatest priority in this RPG. They noted that the new EU REACH chemicals legislation is a first step and a great example for non-EU Member States, but there must be strong implementation, and Member States should seek ways to improve upon REACH. For example, the special vulnerabilities of children, especially their developing brains, must be taken into consideration with, e.g. risk assessment tests. In addition, NGOs hope Member States will compel companies to use safer chemicals when substitutes are available, and additionally, to not use chemicals outside of the EU to meet demand; there can be no tolerance for double standards.

In the Eastern part of the WHO Region, it was noted that cleaning up obsolete stockpiles of pesticides and other Persistent Organic Pollutants is very important. Parents and children must be educated about the health dangers associated with these sites children should not be allowed to come close.

In the Western part of the WHO Region, NGOs are concerned that the new pesticides legislation will not take on board what scientist recently published in the Faroe Island statement, related to developmental toxin effects of certain chemicals. Since Budapest new evidence of the health effects of pesticides on children and particularly on the development of their brains has come forward. 1 in every 6 children has developmental brain damage (e.g. autism, ad(h)d, learning disabilities).

To address these concerns, NGOs encourage more organic production and the use of safer chemical alternatives. NGOs welcome the so-called "green chemistry" movement, and hope Member States encourage the chemical industry to invest here as an innovative and competitive avenue for product development. In the Nordic region, leading companies are promoting safer alternatives for, amongst others, children's products, like child rain gear which often contain phthalates, linked to endocrine disruption. Concerning the newly developing Nano technology industry NGOs note that long term effects are not yet known, and for some products the need for these nano particles is not completely understood (e.g. in children's sunscreen).



3. WECF Evaluation of the Inter-Ministerial-Review

3.1 Overarching themes

Based Member State and NGO interventions on progress and challenges in children's environmental health made during the Inter Ministerial Review, and considering WECF experiences through the work of her partners, the following points for attention are made in advance of Rome 2009, which span all four Regional Priority Goals. Two specific recommendations are made in the context of Regional Priority Goal 4.

WECF calls for the right to a healthy environment. Although a positive right to a healthy environment itself does not yet exist on the European or even the EECCA level, international law provides for different norms and principles that protect different aspects of a right to a healthy environment, such as the right to life. These rights have to be claimed in the context of environmental protection in order to establish a right to a healthy environment. WECF strongly believes that a rights based approach is necessary to pursue the goals of the CEHAPE process.

Environmental justice starts today. Many interventions made in Vienna showed that it is often the poor and marginalized that are more adversely affected and suffer a disproportionate exposure to environmental harms. What's worse, children and women suffer the most of these groups. They are more likely to lack access to safe and clean water, more likely to have indoor air-polluted environments at home and at school, and more likely to suffer the various effects of chemical pollution, or suffer from an accident. Although poverty reduction and inequalities are contained within CEHAPE as an overarching goal, little notable progress has been made in addressing these issues.

Much more must be done by governments and civil society before Italy 2009 to address the clear inequalities in the environmental disease burden. Attention must also be given to disparities within, not just between countries. In addition, legislation on environmental protection should encompass other internationally recognised legal principles such as anti-discrimination, or in particular gender mainstreaming.

Schools must be involved. The importance and benefits of involving children in their health and environment were clearly displayed during the IMR and more could be done. WECF believes school programs that deal with education focused on one (or more) of the RPGs, whereby students can engage in any number of activities like testing their water, taking soil samples, assessing their home-to-school travel patterns, or making an inventory of consumer products they commonly use is a great way to activate the next generation in health and environment protection, starting with their own.

WECF will work to develop a multi- country program with her partners to achieve these ends.

Inter-sectoral cooperation is key. It was clear from the reporting back of governments and NGOs that environmental health involves more than just the environment and health sectors. Better inter-ministerial and inter-sectoral cooperation would further advance CEHAPE goals into Rome. Ministries of transport, finance and education must be involved if the CEHAPE aims are to be achieved.

3.2 Key Points specific to RPG 4: Chemicals

Protecting children from exposure to hazardous chemicals starts in the womb. Growing evidence on the effects of toxicants on the developing foetus have come to the foreground and the recent appeal by 200 internationally renowned scientists calling on governments to halt such contamination (see Faroe Island Statement) should be sending a clear signal. However, governments have not fully put the precautionary approach into practice to address these concerns. Based on the ranking of countries per CEHAPE indicators (released in Vienna) it is clear that many countries are not doing enough to reach the goals set in Budapest. In fact, the marked absence of implementation activities is appalling. Particularly many non-EU countries within the region must boost efforts to implement RPG 4.

For the EU countries of the CEHAPE region, it will be important that the new chemicals legislation REACH is properly implemented so that substitution of high concern substances that accumulate in the body, cannot break down and are toxic will indeed take place. In addition, other high concern chemicals such as endocrine disruptors need to be incorporated into the regulation in the future.

Indicators must fit the picture. WECF believes the indicators used to measure progress for RPG 4, while seen as great steps, do not completely reflect the reality of new sources of pollution, (mostly in consumer goods that can be found in every household), and emerging science.¹

¹ see amongst others, Grandjean, P., Landrigan PJ. (2006), "Developmental neuro-toxicity of industrial chemicals" *The Lancet* (368)

