

23rd Meeting of the European Environment and Health Committee (EEHC) 27 – 28 February 2007, Brussels, Belgium

with a focus on

BUDAPEST CONFERENCE DECLARATION Paragraph 21b: *'We agree to meet again at a fifth European ministerial conference on environment and health to be held in 2009. We invite WHO to convene an intergovernmental meeting to carry out a midterm review of the process by the end of 2007'.*

Report

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| • | The IMR (Intergovernmental Midterm Review) should ensure that o discussions took place on lessons learnt, clearly emphasizing the advised value of the European environment and health process on implementation of environment and health policies o presentations should be structured o a multistakeholder round table was organized to allow discussion acr |
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| • | sectors a session should address the particularities of different levels governance and explore subregional peculiarities indicators are used for reporting back to IMR in a coordinated manner Youth involvement should continue after the IMR with more involvement youth in policy making. Environment for Europe Process should allow reporting back by Chairperson EEHC to the Belgrade Conference in accordance with the commitment taken |
| • | the Budapest Declaration. The background work on converting CEHAPE to a legally binding docum needed to continue but should not be presented to the IMR as it was completed. |

1. Opening session

Professor William Dab, Chair of the EEHC, welcomed participants and thanked the Belgium authorities for hosting the meeting. Professor Dab stressed the importance of this meeting as it was the last one before the IMR and that the main aim of the meeting was to discuss its preparation. It was the last meeting with the current members and chairs of the EEHC.

Mr Frédéric Chemay, Head of the Unit of the Health, Food Chain Safety and Environment Unit of the Belgian General Directorate for Environment, welcomed all participants and stressed the importance of the IMR as a milestone in the Environment and Health process. He underlined the forthcoming federal elections in Belgium and the hope that environment and health would continue to be high on the national political agenda. The work of WHO had paved the way for the development of EH activities in Belgium. The situation was particular in Belgium due to the federal set up. However, political agreement to develop common projects by ministries of environment and ministry of health had been taken and was ensured. Mr. Chemay spoke of a number of projects that Belgium was involved in. These included amongst others: air pollution, urban development, REACH, youth and pesticides. Belgium was also highly involved in THE PEP. He made reference to important work also be done by OECD through Environment Performance Reviews and bio-monitoring. He concluded that the decisions to be taken by the IMR were important decisions for promoting health in other policies (for example transport). More importantly, the IMR would help to achieve a higher political commitment required to address remaining issues. Mr. Chemay concluded that they would always be happy to host meetings aimed at the implementation of Budapest and he hoped that the week long activities held around the EEHC meeting, including the CEHAPE Task Force, and the NGO meeting held in parallel as well as the Consultative Forum of the EC would result in a very successful international week on environment and health

2. Intergovernmental mid-term review meeting

a) IMR Programme

Dr. Licari, WHO EURO briefed those present on the Scope and Purpose of the IMR as well as the programme. She stated that high level participation was expected including EC Commissioners and DG of WHO. The programme had been set out to present key evidence first, followed by a long reporting back session. All stakeholders had been included in the programme. Local authorities through the mayors of Paris and Rome have been invited. The IMR would conclude with a very short committal document to act as a road map between the IMR and the next ministerial conference. WHO EURO clarified the scope of the programme further by explaining that there were three main pillars -What had been done; what had been learned; setting the agenda for the future. The programme built upon the work of the EEHC and on the discussions and reflections held on the results obtained and the problems encountered. The IMR aimed to allow member states to share their experiences and to strengthen the political climate around the EH process in Europe.

Members of EEHC made a number of comments. There was a clear need for a template to be used as guidance for reporting back during the parallel sessions of the IMR. Dr. Bertollini (WHO EURO) stressed that without being conclusive, this reporting will represent a first evaluation of the actions initiated and the results obtained in implementing the Budapest declaration and CEHAPE. He also clarified that Session 3 would start with a report on the environment and health situation in Europe based on the ENHIS indicators but will include also a description of other tools and methodologies for orienting actions (Table of Action) as well as monitoring and analysing the national achievement process (Case studies catalogue).

One of the members of the committee commented about the complex policy integration required to implement the Budapest commitments. It was important to understand that it was difficult to separate the results achieved by different initiatives and attribute them to a specific action, as the whole process was synergistic. The strength of the process had actually arisen from the integration of the different sectors

Some members confirmed that without the E&H process changes and commitments and actions would not have been taken in their countries: International action was instrumental to improve the national practices on environmental health.

It was also stated that the CEHAPE process was the best example of the results and achievements of Budapest; as countries had been participating to this process exchanging experiences, successes and failures in a very active way. There were some difficulties in the process though, and these included, for instance, integrating water and health concerns and the implementation of the Water and Health Protocol in the EECCA countries. Members stressed the importance of reporting about successes as well as a failures in order to better reflect the reality in countries when taking practical action. In addition to MSs other stakeholder such as IGOs, NGOs, trade unions and youth, should be given the opportunity to present their work and contribution to the process. Enough time at the IMR should be devoted to both reporting and discussion on lessons learnt and future directions. A summary of the lessons learned should be made during the meeting and included in the final report.

b) Communication plan for the IMR

WHO Euro explained why communication was seen to be a priority for the IMR. It will help raising awareness in the WHO European Region. It will also help ensuring the intersectoral dimension of the process is reflected by the media. The Budapest conference had demonstrated the importance of planning ahead, and that one key message was necessary. Two major events will be used from February till the IMR in June and these were World health day – global change as well as Road safety week. A story will be developed to facilitate communication. as the possibility of submitting editorials to key European newspapers and scientific journals will be explored. Two press conferences are planned, one on the first and one on last day of the IMR to make best use of the possible attendance of the EC commissioners. Different types of media would be used, from fact sheets, web pages, to audiovisual material.

Members present made a number of comments. It was important to ensure that the story line is attractive and well understood by the media and the general public and possibly around the 4 regional priority goals. Maximum use is to be made of other big events such as World Environment Day when UNEP would be focussing on climate change. Other ongoing events in Vienna could prove useful to attract the media such as the Scientific Conference on children's health and environment and the youth and NGO side events. It would also be useful that the final press conference should present the conclusions of the IMR and there should be careful coordination and agreement to ensure that the key messages going out to the media are the same by all players in order to avoid different messages or different priorities

c) NGO Event and best practice award

A presentation on the NGO preparatory meeting hosted by Belgium government as well as the IMR NGO side event was made. The Austrian hosts were thanked for supporting the NGO event to take place between the 11th June in the afternoon and the 12th in the morning. The event will follow the same structure of the IMR and center around reporting. A CEHAPE best practice award will be given by NGOs: there will be 5 Awards: one by CEHAPE Regional Priority Goal (RPG) and then one more on the declaration. Competition for he award is open to national and local authorities, NGOs youth groups, and public/private initiatives.

d) IMR Documentation

A report on the environment and health situation in the Region using the indicators developed by WHO EURO within the context of the EHIS system will be produced and distributed at the IMR. A set of 26 indicators had been selected and used for this, classified by RPGs. The WHO report will include the process of the ENHIS development as well as its applicability demonstrated through some country studies.

During the discussion the EEHC chairperson stated that indicators would be an important tool for communication at Vienna and would be useful to show to countries how to develop their own national indicator systems in time for the Fifth Ministerial Conference of 2009.

3. Update on Youth Involvement

The youth delegates explained how they were preparing for the IMR. They felt it was important to prepare a statement for the IMR and underlined the need to use a more youth friendly version of the official documents such as the Budapest declaration. They believe that there was a need

for more workshops for youth in order to develop the European movement and that so far three more were planned in the run up to the IMR. These were to be held in:

- 1) Luxembourg in March this meeting was to introduce the work of the EEHC as well as the main official documents including the CEHAPE and the EC EH Action Plan
- 2) Serbia in April this meeting co-organized by WHO and UNICEF was to develop one minute films with key messages from youth that would be shown at the IMR
- 3) Austria, IMR side event this meeting was to endorse a youth friendly action plan on EH and would discuss a way of working to implement this action plan as well as to prepare for the next Ministerial Conference.
- The youth delegates went on to discuss the criteria for the youth participation at these meetings. They stressed that some changes in the way of working may be necessary for further involvement of youth in international as well as national processes and encouraged delegations present to take note of this as it was well worth the effort. Advocacy and awareness raising has been the outcomes of youth involvement till now but it was necessary to go a step further and in the next phase of the process to involve youth in the policy making process

Interventions made by members explained the objectives of upcoming youth meetings and encouraged those present to nominate and send youth to both the preparatory meetings and the events surrounding the IMR.

4. Update on the 'Environment for Europe' Process

UNECE member briefed the participants on the latest developments in the preparations for the Belgrade conference. The members of EEHC felt that there was a need to link the two conferences more closely and various suggestions were made as to how this could be done.

5. Discussion on Legal Instrument

REC presented a survey of legal and policy instruments addressing children's health and environment issues. The aim of the project was to assess the legal and policy instruments in some pilot countries and the methodology used was through national reports based on the responses to a questionnaire structured around the RPGs. Two pilot countries had been completed, Albania and Serbia. In Albania, the legislative and policy framework is gradually being replaced by EU directives but the main problem in Albania was lack of data. In Serbia, a great part of the legislation was obsolete. The conclusions of this pilot survey is that there is a need to improve, adopt and implement a suitable legal framework, including EU regulations in the country and also establish an information system for monitoring of implementation

During the discussion, delegations expressed differing opinions about the need of a legal instrument for facilitating the implementation of the CEHAPE, and also made arguments for as well as against it. However, all EEHC members agreed that the REC report needed to be finalized before a discussion could take place on whether the CEHAPE could indeed become a legally binding commitment. It was therefore agreed that such a discussion should not take place at the IMR, but needed to be revisited at the next EEHC meetings.

An interesting idea by one of the members was to suggest to legally strengthen the CEHAPE by linking it to Article 24 of the Convention on the Rights of the child

6. Tools for policy making

a) CEHAPE table of child-specific actions

A presentation by WHO illustrated the Table of Action, aiming to support MSs in implementing actions to protect children's health. Each action in the table was reviewed by experts to assess the evidence of their effectiveness as well as to grade it with respect to its impact. The EEHC Chairperson stressed the importance of this tool addressing risk management and providing policy makers with the information they need when taking decisions It was important to promote this approach in Vienna and afterwards.

b) Climate change

The EEHC members were briefed on latest scientific development and on the actions undertaken by different countries to enhance adaptation to the health effects of climate change. In this respect, the Euro HEAT project helped improving understanding of effects and response to heatwaves. Members were invited to consider drafting a plan of action addressing global climate change and health.

DG Sanco / DG Environment both supported the importance of this issue and the idea of having it stressed in Vienna. They also think it would need a special focus in the future. Climate change is one of the priorities of the DG Environment and was being prioritized. Higher priority should be given to this matter also within the European environment and health process. All members encouraged discussion around this topic at the IMR. WHO informed participants that a presentation by the chairperson of IPCC might be possible. Moreover, climate change and its inter-sectoral component could be discussed in the framework of the policy instruments and health in all policies sessions and roundtable of the IMR and in addition this topic could be brought ahead for the next ministerial conference. It was suggested to forward that an invitation to UNFCCC to attend the IMR. to ensure complete representation in this area.

c) Risk perception / risk communication

WHO explained how this tool for policymakers was being developed in accordance to the Budapest declaration. Risk management takes into account both risk assessment and risk perception. Development of risk communication guidelines will take stock of already existing guidelines and adapt them at the environment and health issues, both with respect to acute and long term exposures. WHO is exploring the possibility of having a side event back to back with the IMR to progress this issue further. A number of EEHC members encouraged this initiative and expressed interest in participating.

d) Addressing economic aspects

Following an update on the work being done by WHO in this area, there was encouragement by the members present to ensure further collaboration with OECD and with particular reference to the economic aspects of prevention.

7. The Future of the Process

WHO secretariat explained the procedures that were underway for re-election of EEHC members from the health sector. Official Letters inviting Ministries of Health to nominate candidates for EEHC have been sent out by the office of the Regional Director. Countries who were currently members on the EEHC, were welcome to resubmit their candidature. The IMR would therefore bring the current committee to an end and there would be a newly reconstituted committee that would hold a first meeting in Autumn 07.Subject to the decision of the EEHC, it is expected that a CEHAPE Task Force would likewise be reconstituted in the Autumn and in the future would hold back to back meetings with EEHC.

UNECE explained the process from the Environment side, and told those present that the UNECE Committee for Environmental Policy will be held on the 29th May and in that occasion will choose the countries representing the environment sector on the EEHC.

8. Reporting back on activities by EEHC members

Austria reported that their CEHAPE had just been finalized after extensive collaboration between health and environment sectors, and with the support of an inter ministerial committee, It would be presented at the IMR. They had decided to address RPG II as a priority in their plan. They had been successful in enforcing tax legislation measures which included incentives for persons buying diesel cars with particle filters.

Bulgaria also finalized their CEHAPE and it was out for public debate The plan was a revised NEHAP with an additional chapter on the particular needs of children. A 75.000 Euro budget had been allocated to NEHAP implementation and CEHAP development in 2007 and the plan was to be ready in time for the IMR. Moreover, indicators had been developed for assessment of implementation of different parts of NEHAP, including quantitative indicators used for reporting back to the government.

Finland had also revised its NEHAP, with emphasis on climate change. An inter ministerial working group was meeting regularly in preparation of IMR

Italy was adapting their NEHAP to include child specific actions. They were in the process of establishing an inter-ministerial panel of representatives from both ministries.

Norway was working on an impact assessment which had environmental, economic and social factors incorporated. They were paying special attention to social inequality in health. A conference involving all six sectors that had taken part in the drafting of their CEHAPE was to take place.

Russian Federation reported that they had harmonized their standards for drinking water with European regulations and were developing technical requirements according to European standards. They were actively participating in REACH because they had problems in the availability of adequate laboratories and they looked forward to the IMR as a possibility for improving international cooperation in this field

Serbia had started drafting CEHAPE through a national committee. However, new elections for committee members were necessary after Montenegro had split away and this had delayed the process. They regret that the CEHAPE will not be ready for IMR but hope that it will be finalized by the end of 2007

UK reported that the CEHAPE programme had to be approved and would be circulated for consultation during the IMR. The latest review on climate change and health was soon to be ready.

ITUC is focusing on climate change, smoking at the workplace and is working on a new resolution on occupational health. The gender issue had been passed on to the new institutional set up through one of the surviving committee of the old organization. Sustainable development as described through the UN process was being carefully followed up, as was the SAICM process. An electronic network of Trade Unions had been established following Budapest. Moreover, Norway had established a strong collaboration and involvement of trade unions on healthy food, which served as a good example of how Trade Unions could work together with governments.

WBCSD were doing research along the four RPGs. This included protection against injuries, indoor and outdoor air pollution and chemical free environments.

France had no government at present to allow for preparations for the IMR, elections were underway. Regrettably no funds from the environment ministry were available for a temporary replacement of the French environment and health focal point, which had slowed down their participation in the process over the past few months. The French NEHAP was to be completed by a CEHAP part and this would be presented at the IMR. Methodological development of assessment tools to measure CEHAPE and NEHAP implementation was underway.

Georgia reported that municipalities such as Tbilisi had made major investments in school in the rehabilitation of school and residential areas. Particular efforts were made in public transportation including the rehabilitation of school bus system (RPG II). The Health ministry was investing efforts in the development and improvement of the health care system

UNEP had hosted a meeting for the Parties of the Climate Change Convention in November 2006. They were focusing on transboundary issues in December and gender issues had also been prioritized.

UNECE reported on the latest developments of THE PEP, the Water and health protocol, and air pollution convention

REC reported back on the developments since the last EEHC meeting we they had hosted in Szentendre in Hungary. They were giving particular attention to RPG 2 and 3 and were in the process of data collection on the environmental quality in schools. They were also involved in a number of projects with Balkan countries as well as in the development of a second NEHAP for Hungary

OECD would be unable to participate at the IMR because of a major meeting organized by them at the same time. They were currently providing assistance to the Russian Federation on laboratories

EEA was finalizing as assessment of the cost associated to the Environmental Burden of Disease Study in Europe, replicating Phil Landrigan's approach and hoped to present this to the IMR Belgium reported on national activities addressing RPG 3 and 4. In 2006 it was agreed to initiate a study on Persistent Organic Pollutants as well as on indoor air quality and related respiratory diseases. Elections were to take place before the IMR.

9. IMR programme

WHO Euro presented the modifications to the programme that had taken into consideration the suggestions made on the first day of the EEHC meeting. The secretariat explained how reporting back would take place in the parallel sessions. Clear guidelines through the circulation of a template would be issued to all IMR participants thereby ensuring that interventions were focused, not too long and extracted learning experiences. The secretariat thanked Austria for providing simultaneous translation even in parallel sessions to enable this reporting back in the most productive way possible

10. Closure

WHO EURO thanked Professor Dab and Mr. Zaal Lomtadze for their efficient chairmanship over the past years. Those present were informed that the next EEHC meeting would probably take place around October or November 2007 and the details would follow. The Chair thanked participants for their valuable contributions to the discussions of the past two days and thanked the Belgian delegates for hosting the meeting.

Annex

LIST OF PARTICIPANTS

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