Consultation on update to WHO Road map on air pollution (A69/18)

Member State information session

21 June 2024, 14:00-15:30 CET

World Health Organization

Agenda

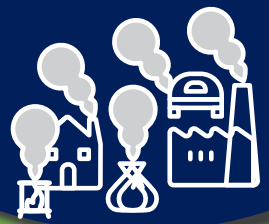
- Opening remarks - Maria Neira
- Background: 2015 Resolution on air pollution and health (WHA 68.8)
- Updating Road map for an enhanced global response to the adverse health effects of air pollution (A69/18)
- Global conference on air pollution and health – 25-27 March 2025
- Closing and next steps

Air Pollution – The Silent Killer

Every year, around

7 MILLION DEATHS

Are due to exposure to both outdoor and household air pollution



Air pollution, mainly arising from inefficient energy use, is a major environmental risk to health.

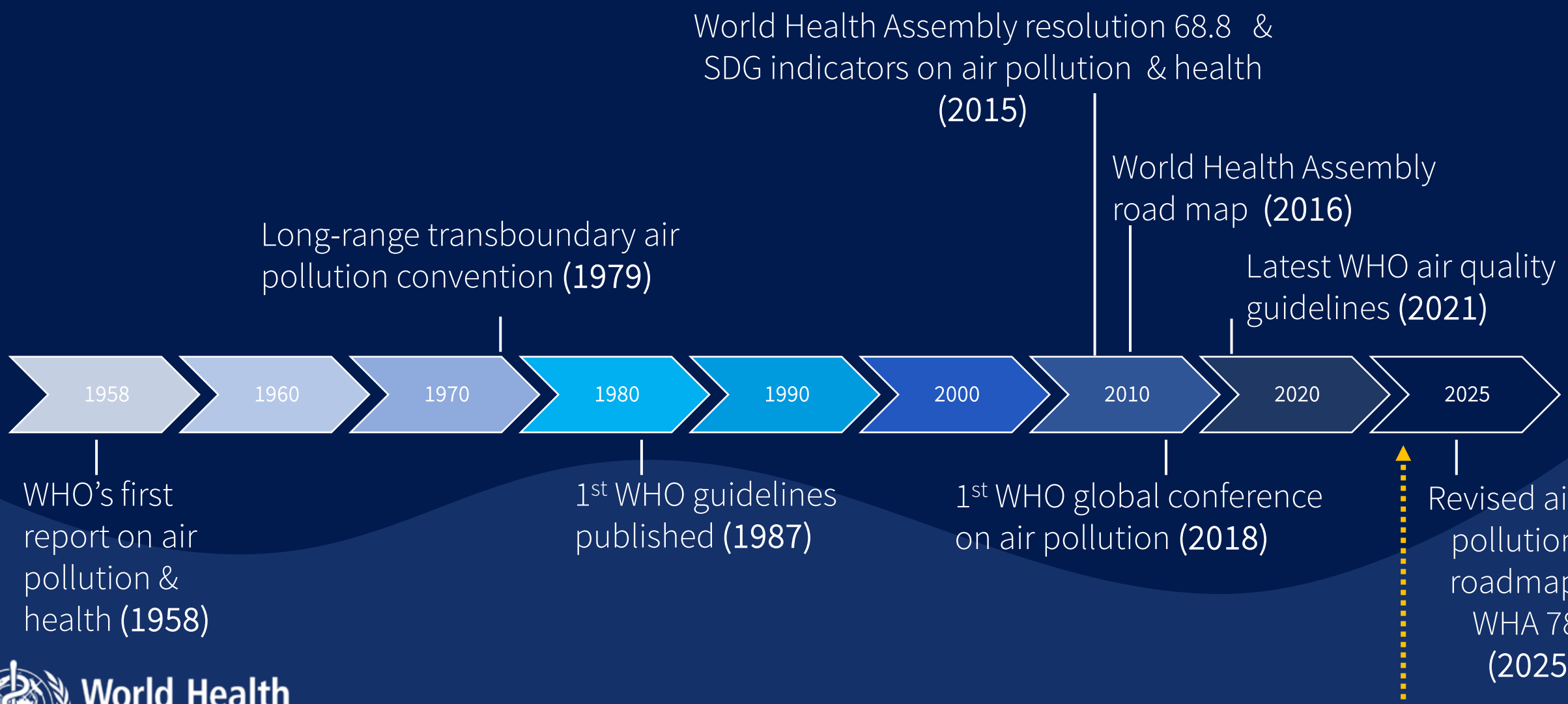
By reducing air pollution levels, countries can reduce:

Stroke

Heart disease

Lung cancer, chronic obstructive pulmonary disease, pneumonia and asthma

WHO's milestones on air pollution and health



World Health Organization

Health and environment: addressing the health impacts of air pollution

2015 WHA Resolution on Air Pollution and Health (WHA 68.8)

SIXTY-EIGHTH WORLD HEALTH ASSEMBLY WHA68.8
Agenda item 14.6 26 May 2015

Health and the environment: addressing the health impact of air pollution

The Sixty-eighth World Health Assembly,

Having considered the report on health and the environment: addressing the health impact of air pollution;[1]

Reaffirming its commitment to the outcome document of the Rio+20 Conference "The future we want", in which all States Members of the United Nations committed to promoting sustainable development policies that support healthy air quality in the context of sustainable cities and human settlements, and recognized that reducing air pollution leads to positive effects on health;[2]

Noting with deep concern that indoor and outdoor air pollution are both among the leading avoidable causes of disease and death globally, and the world's largest single environmental health risk;[3]

Acknowledging that 4.3 million deaths occur each year from exposure to household (indoor) air pollution and that 3.7 million deaths each year are attributable to ambient (outdoor) air pollution, at a high cost to societies;[4]

Aware that exposure to air pollutants, including fine particulate matter, is a leading risk factor for noncommunicable diseases in adults, including ischaemic heart disease, stroke, chronic obstructive pulmonary disease, asthma and cancer, and poses a considerable health threat to current and future generations;

Concerned that half the deaths due to acute lower respiratory infections, including pneumonia in children aged less than five years, may be attributed to household air pollution, making it a leading risk factor for childhood mortality;

[1] Document A68/18.
[2] UNEA resolution 1/7, PP6.
[3] Global Health Observatory http://www.who.int/gho/phe/en/ (accessed 18 March 2015).
[4] WHO. Burden of disease from ambient air pollution for 2012. http://www.who.int/phe/health_topics/outdoorair/databases/AAP_BoD_results_March2014.pdf?ua=1 (accessed 1 December 2014).

2016 Road map for enhanced global response to air pollution

World Health Organization

SIXTY-NINTH WORLD HEALTH ASSEMBLY A69/18
Provisional agenda item 13.5 6 May 2016

Health and the environment

Draft road map for an enhanced global response to the adverse health effects of air pollution

Report by the Secretariat

1. In May 2015, the Sixty-eighth World Health Assembly adopted resolution WHA68.8, in which the Director-General was requested, inter alia, to propose to the Sixty-ninth World Health Assembly a road map for an enhanced global response to the adverse health effects of air pollution. In response to this request, an early version of the draft road map was considered by the Executive Board at its 138th session.[1] A revised and elaborated draft road map is provided in the present report (see Annex 1), and includes a proposed monitoring and reporting framework with indicators and objectives to track progress.

2. The initial period covered by the proposed road map and its related actions is 2016–2019, at the end of which the road map will be updated to incorporate results from monitoring, feedback and evaluation, and submitted to the Health Assembly by the Secretariat. In addition, it will be aligned with priorities included in the thirteenth general programme of work.[2]

3. In response to the urgent need that had been identified for the health sector to respond to the effects on health associated with air pollution, the Health Assembly through resolution WHA68.8, inter alia, noted with deep concern that indoor and outdoor air pollution are both among the leading avoidable causes of disease and death globally, and the world's largest single environmental health risk; and acknowledged that 4.3 million deaths occur each year from exposure to household (indoor) air pollution and that 3.7 million deaths each year are attributable to ambient (outdoor) air pollution, at a high cost to societies. In addition, the Health Assembly, inter alia, underscored that the root causes of air pollution and its adverse impacts are predominantly socioeconomic in nature, and was cognizant of the need to address the social determinants of health related to development in urban and rural settings, including poverty eradication, as an indispensable element for sustainable development and for the reduction of the health impact of air pollution. Furthermore, the Health Assembly, inter alia, recognized that in order to contribute to national policy choices that protect health and reduce health inequities, the health sector would need to engage in cross-sectoral approaches to health, including adopting a Health in All Policies approach.

[1] See document EB138/17 and the summary record of the Executive Board at its 138th session, sixth meeting (document EB138/2016/REC/2).
[2] Following on from the Twelfth General Programme of Work, 2014–2019, the thirteenth general programme of work commences in 2020.

WHA 68.8 – Health and environment: addressing the health impact of air pollution

- Provides background & global context of health risk
- Identifies key opportunities and needs of health sector engagement
- Outlines “asks” for Member States including
  - Increasing efforts to prevent health impacts from AP, and strengthen role/engagement of health sector in multi-sectoral action
  - Increase/advance evidence-base, normative standards, dissemination of good practices
  - Implement WHO air quality guidelines
- Outlines “asks” for Director General
  - Enhanced technical support for MS including Air Quality Guideline updates
  - Strengthened advocacy/communication, including through dissemination of evidence-based best practices
  - Engage with UN partners, and engagement with other related conventions/mechanism
  - Ensure adequate resources for Secretariat in programme budget and 12th GPW
  - **Proposes a ‘road map’ for resolution implementation**

A69/18 – Road map structure (2016-2019)

I. Rationale for road map (Para 1 – 2)

II. Mapping of global context and opportunities (Para 3 – 6) w references to:
   - Paris Agreement
   - 2030 Agenda for sustainable development

III. Description of road map structure (Para 7 – 8)

IV. Description of Road Map's 4 Organizational (Para 9)
   - Expanding knowledge base
   - Monitoring and reporting
   - Global leadership and coordination
   - Institutional capacity strengthening

V. Description of health sector capacity limitations and evidence gaps

VI. Elaboration of rationale for different categories mentioned above, providing specific examples of actions that can/should be taken in to support health sector engagement

VII. Appendix I – Provides a sequential mapping of activities outlining the current state and ending with 'desired state' for each of the four categories

VIII. Appendix II – Theory of Change

Appendix I & II – Mapping activities & theory of change

ROAD MAP FOR AN ENHANCED GLOBAL RESPONSE TO THE ADVERSE HEALTH EFFECTS OF AIR POLLUTION

The road map for the period 2016–2019 is represented in the figures below, which depict the sequence of activities. Figures 1–4 focus on the f relevant activities, which are, respectively, expanding the knowledge base, monitoring and reporting, global leadership and coordination, and institutio capacity strengthening.

Figure 1. Expanding the knowledge base

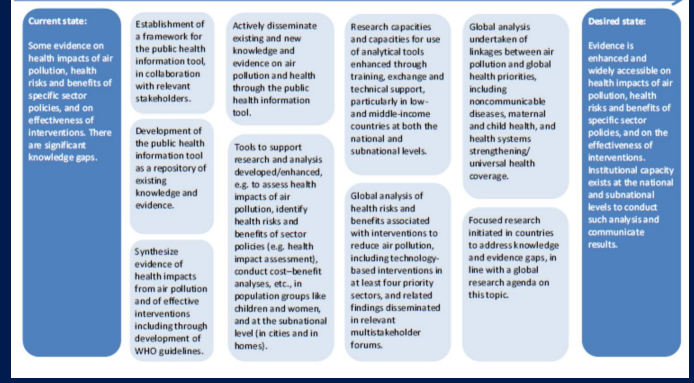


Figure 2. Monitoring and reporting

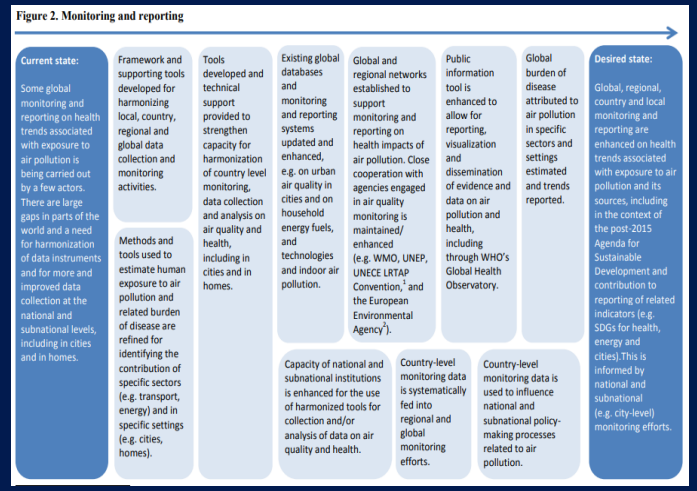


Figure 3. Global leadership and coordination

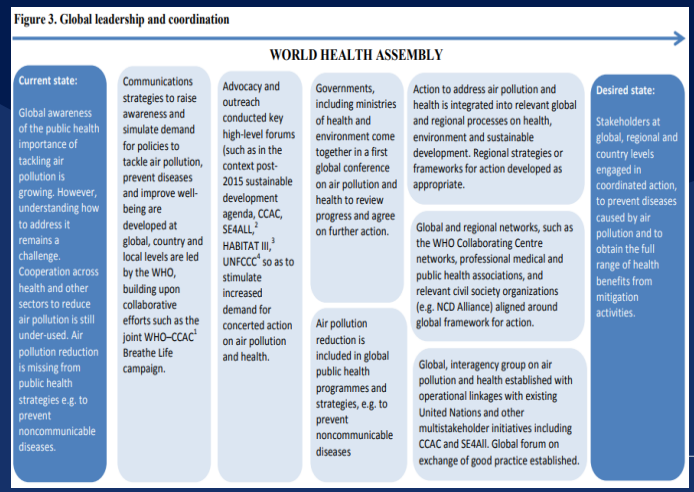
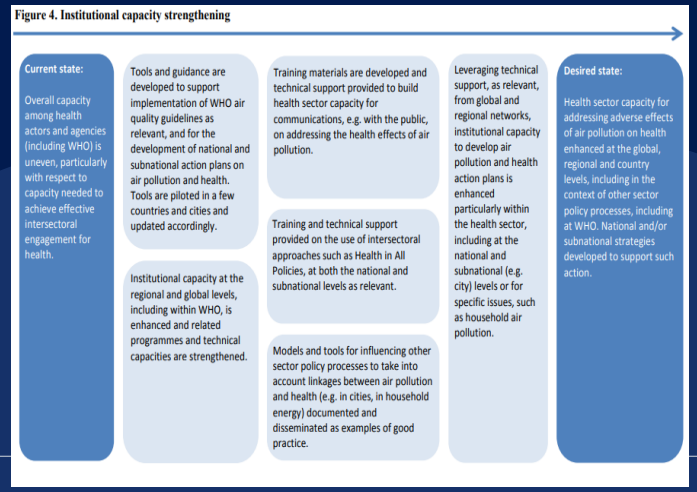


Figure 4. Institutional capacity strengthening



Appendix 2

AN ENHANCED GLOBAL RESPONSE TO THE ADVERSE EFFECTS OF AIR POLLUTION ON HEALTH – A THEORY OF CHANGE

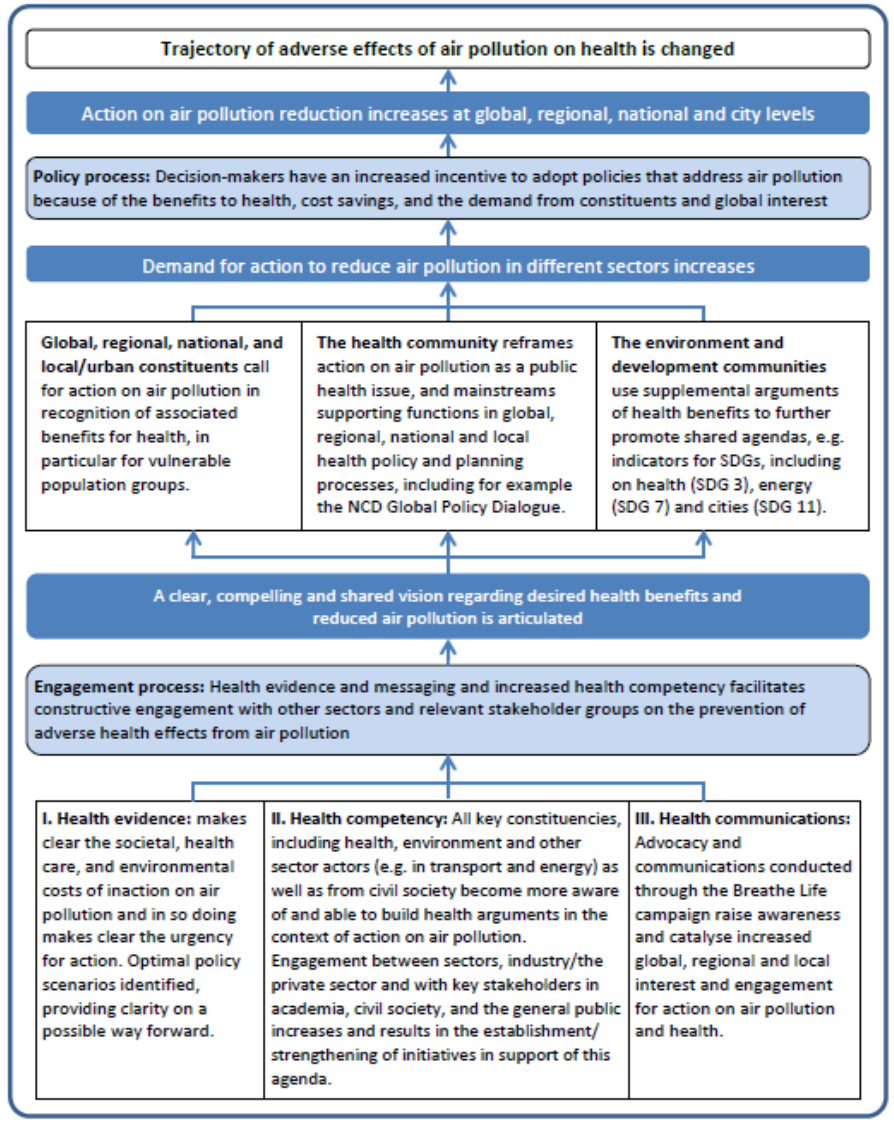


Figure 1. Expanding the knowledge base

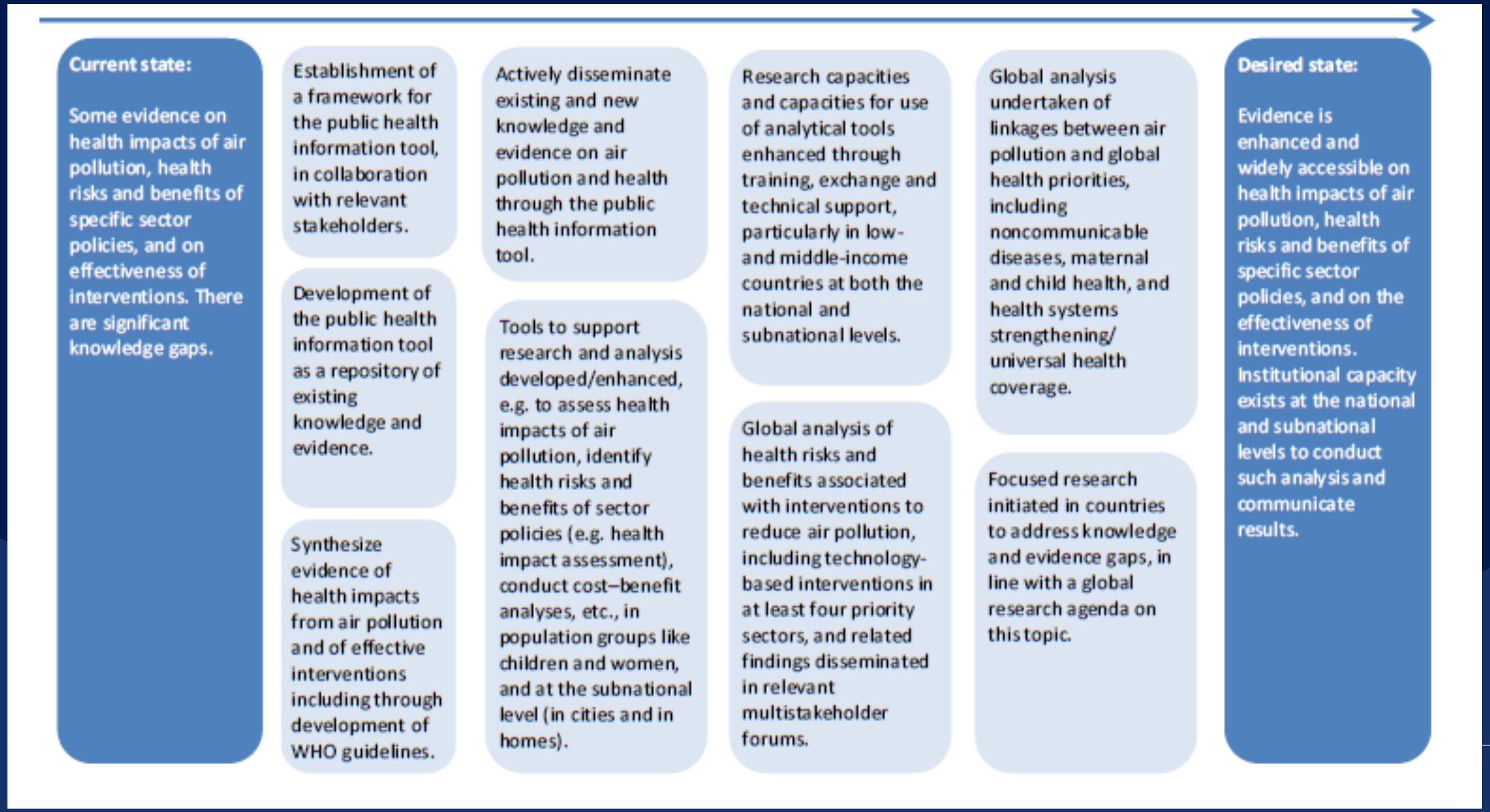
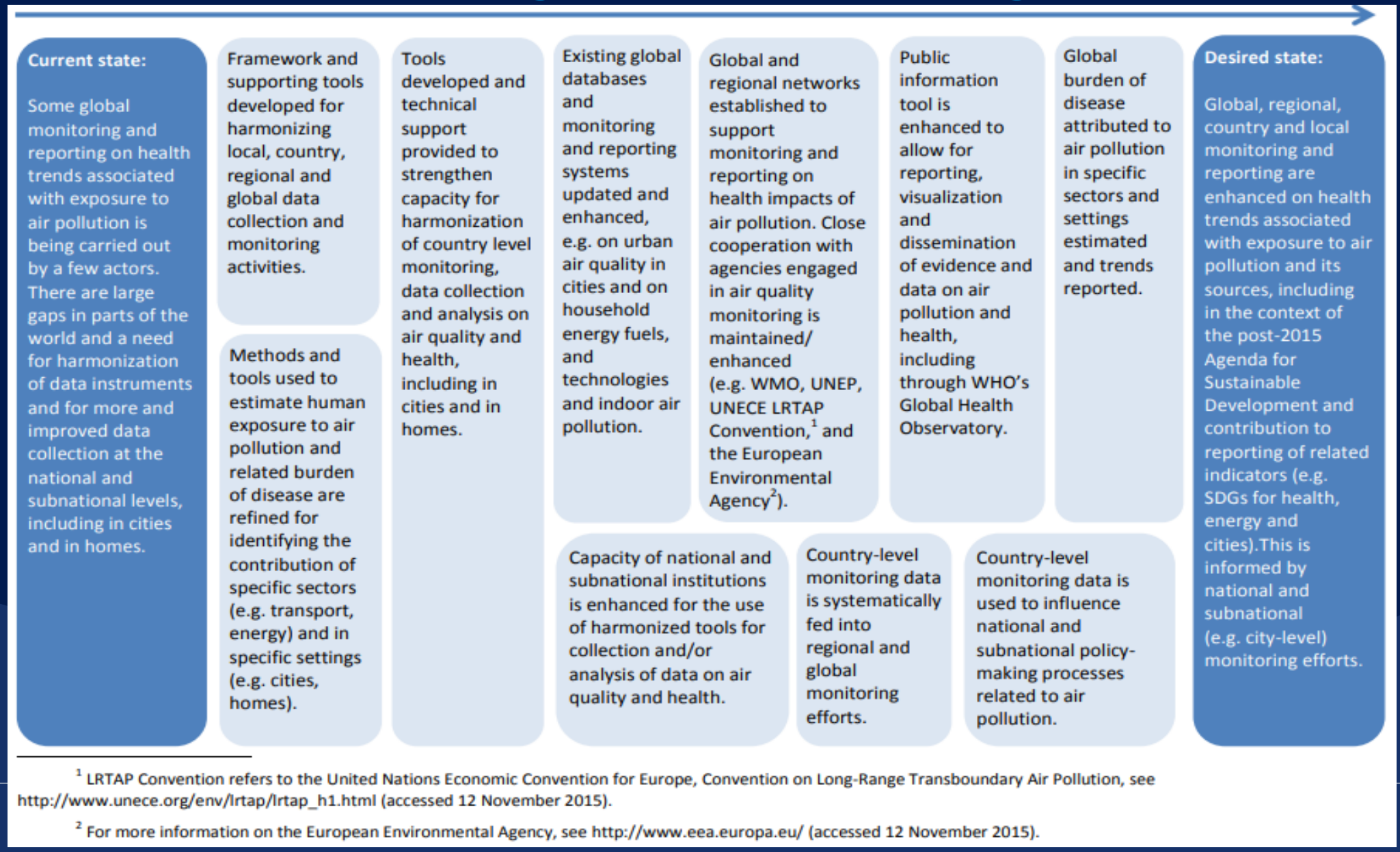


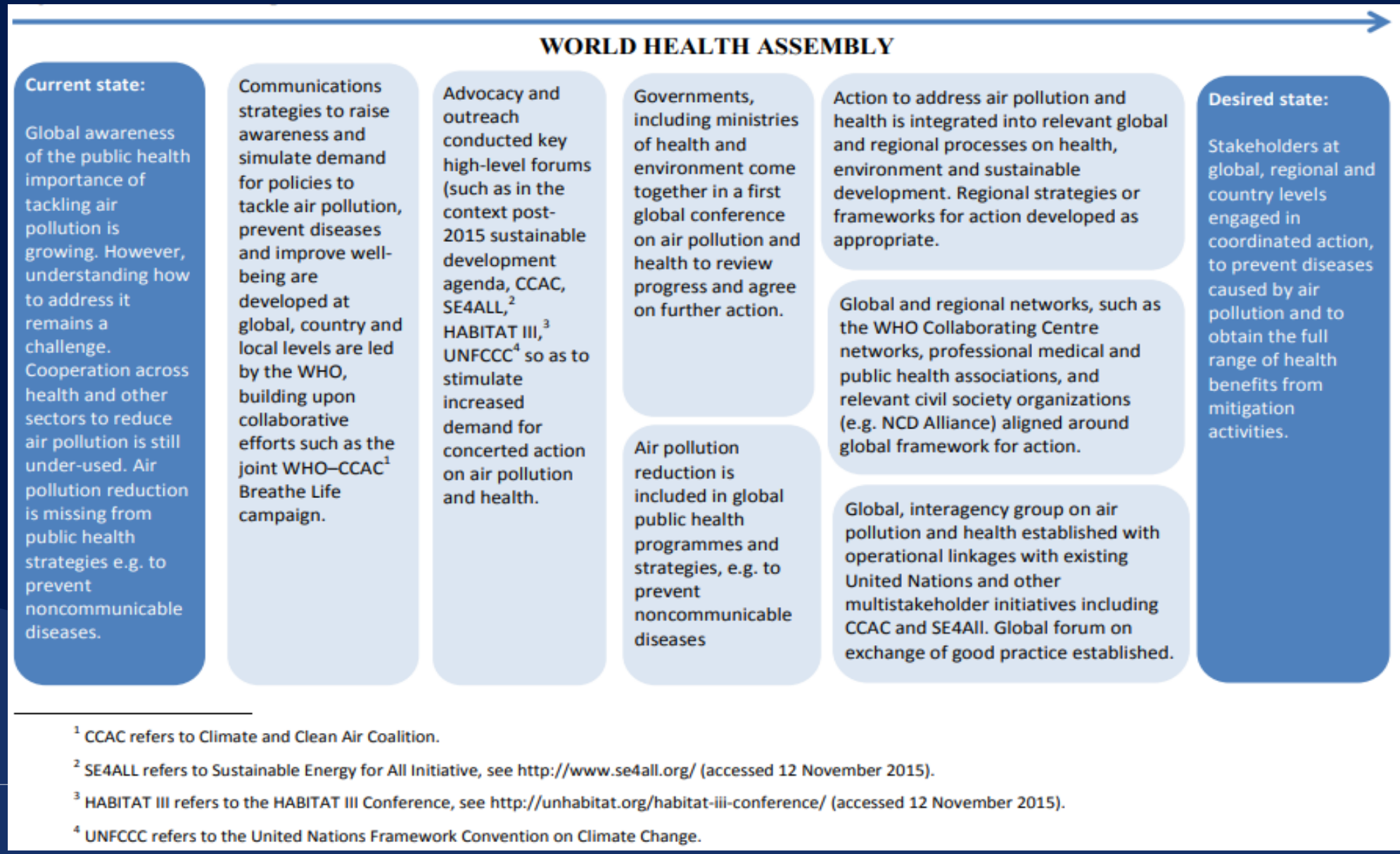
Figure 2. Monitoring and reporting



[1] LRTAP Convention refers to the United Nations Economic Convention for Europe, Convention on Long-Range Transboundary Air Pollution, see http://www.unece.org/env/lrtap/lrtap_h1.html (accessed 12 November 2015).

[2] For more information on the European Environmental Agency, see http://www.eea.europa.eu/ (accessed 12 November 2015).

Figure 3. Global leadership and coordination



[1] CCAC refers to Climate and Clean Air Coalition.

[2] SE4ALL refers to Sustainable Energy for All Initiative, see http://www.se4all.org/ (accessed 12 November 2015).

[3] HABITAT III refers to the HABITAT III Conference, see http://unhabitat.org/habitat-iii-conference/ (accessed 12 November 2015).

[4] UNFCCC refers to the United Nations Framework Convention on Climate Change.

Figure 4. Institutional capacity strengthening

Areas for Strengthening action on air quality & health for consideration?

- Linkages with new global discussions
- New evidence & emerging topics
- Legislation/governance
- Quantification of differentiated impacts e.g. gender, equity, displaced populations, vulnerable populations
- WHO Secretariat Roles
- Other ideas?

Feedback for Secretariat

I. Structure
   - Does the current structure need updates?
   - Are there missing sections of the roadmap?
   - Do the four categories of action make sense? (i.e. Expanding knowledge base; Monitoring and reporting; Global leadership and coordination; and Institutional capacity strengthening.)
   - Should the appendix figures be updated and included in the updated road map?
   - Any other types of diagrams, visualisations or mapping that should be included?

II. Content
   - Are there any key topics not covered?
   - Any key opportunities for interlinkages to be highlighted (e.g. NDCs)?
   - Do we want specific targets? Is the level of ambition appropriate?
   - Should the roadmap look forward beyond the 2030 agenda?

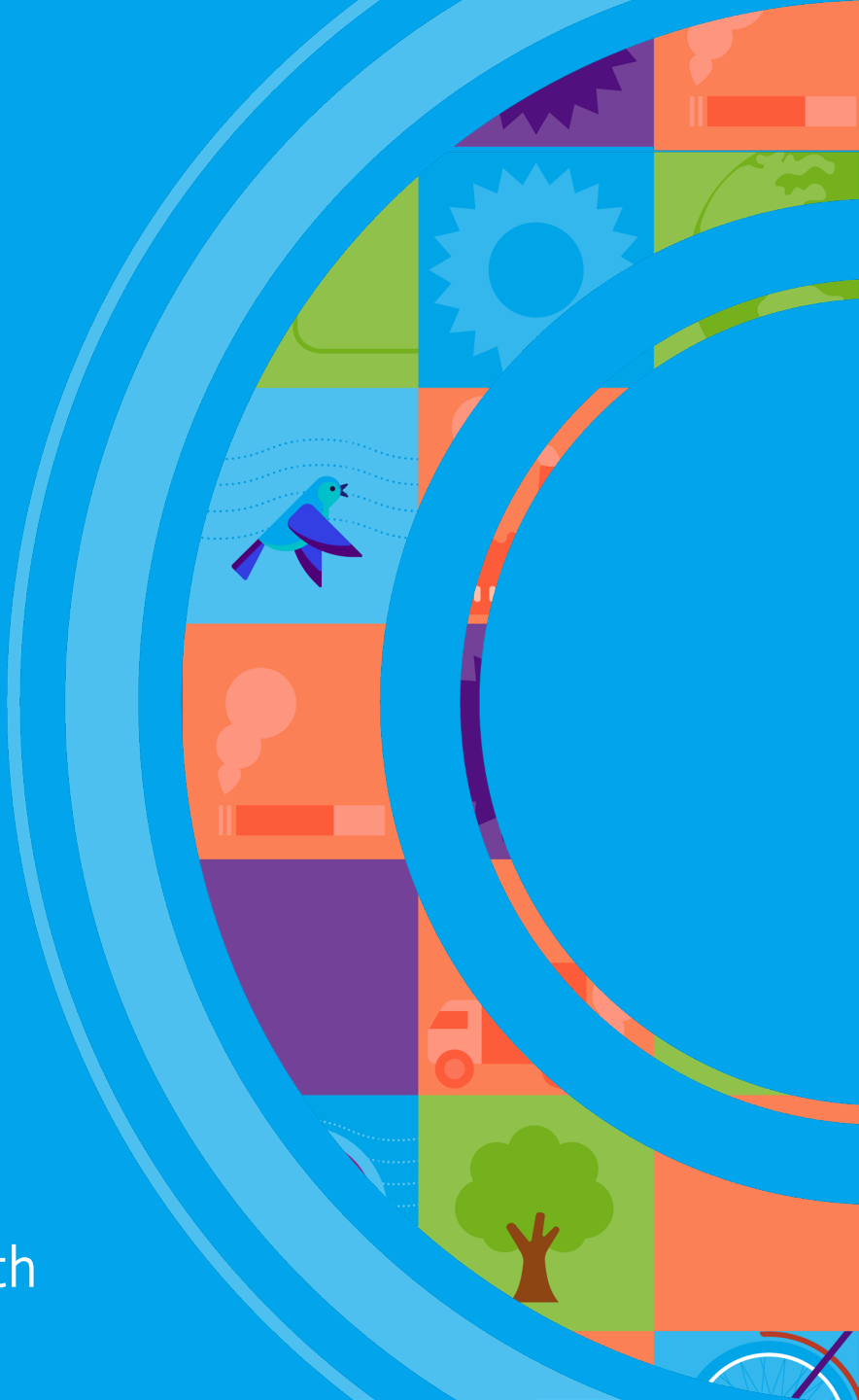
WHO Global Conference on Air Pollution and Health

Accelerating action for clean air, clean energy access and climate mitigation

25-27 March 2025*
Cartagena, Colombia

*With pre- and post-conference sessions on 24 and 28 March

- Health evidence – Setting the scene
- Sustainable solutions – Powerful policies and interventions
- Governance (including finance) and health sector leadership
- Advocacy and awareness raising – Mobilizing beyond the health sector



Setting targets & commitments

Pledge - Seeking countries, cities, and other stakeholders to commit to overall pledge:

> ***"Reduce air pollution for health protection through actions that advance countries and cities toward the WHO air quality guideline targets"***

Time Frame for commitments – *until 2030?*

Getting down to details – seeking more specific commitments for health & other sectors at various levels – Governance (policy, finance), Institutional strengthening (e.g. capacity-building), Global leadership (advocacy, awareness-raising)

Next steps…

- Template for feedback to be distributed by Secretariat
- Member States send feedback to WHO Secretariat by **12 July 2024**
- Formal in-person MS Consultation (**July** but exact date & time, TBD)
- Secretariat incorporates updates to the Roadmap, and submits draft Roadmap to WHA Executive Board (**September 2024**)
- WHO Global Conference on Air Pollution and Health **(March 2025)**
- Revised air pollution roadmap introduced WHA 78 **(May 2025)**

World Health Organization

Thank you!

Dr Maria Neira, HEP/ECH

Ms Heather Adair-Rohani, HEP/ECH/AQE

World Health Organization