Round tables: healthy environments for children

Report by the Secretariat

1. Four ministerial round-table discussions on healthy environments for children were held concurrently on 20 May 2003, during the Fifty-sixth World Health Assembly. Ministers of health or their representatives analysed the issue and indicated how the challenges posed by unhealthy environments could best be tackled. They shared information on best practices, identified means of overcoming major constraints and obstacles to success, highlighted essential policy interventions and action strategies, examined the role of the health and other sectors in improving children’s environmental health, and made recommendations to WHO and the Healthy Environments for Children Alliance to take forward work in this area. The main issues raised in the round tables are summarized below.

ENVIRONMENTAL RISKS TO CHILDREN’S HEALTH OF IMPORTANCE GLOBALLY

2. Participants identified six principal categories into which environmental health risks for children fell: household water insecurity; hygiene and sanitation; air pollution (including indoor air pollution and environmental tobacco smoke); vector-borne diseases; chemical hazards (e.g. lead, mercury and unsafe use of pesticides); and unintentional injuries. Participants underlined that, although these areas indicate the overarching priorities, specific risk factors and issues may prove to be a higher priority in certain communities or settings.

TACKLING MULTIPLE AND ENVIRONMENTAL RISKS TO CHILDREN’S HEALTH

3. Participants recognized that children are often simultaneously exposed to several of the above risks where they live, learn, play and sometimes earn. They indicated the value of the “settings approach” as an integrated, intersectoral response to the multiple risks to children’s health in priority settings such as the home, school and community.

4. Participants highlighted the progress that had been made in many countries to improve the health of children as demonstrated in indicators of child health such as infant and under-five mortality rates and percentage immunization coverage. However, children’s environmental health remained an area of high concern as evidenced in the numerous examples given of risks to children’s health in different countries.
5. Some participants called attention to the importance of considering the environment in its broadest sense. The social dimensions were, said one, at least as important as physical aspects. The value systems and cultural context within which children grow and develop have an important impact on children’s health, both directly and indirectly. One minister emphasized the absolute importance of a peaceful environment. The impact of poverty as an underlying determinant of many, if not all, environment-related risk factors was underscored. Poverty and inequities have their greatest impact on children and families; they undermine belief in a prosperous and healthy future with sound economic and social development.

6. “Children must be seen as a vulnerable population group in their own right, and not just as small adults”, said one minister. Other participants stressed the need to consider children in their diversity, including differences based on gender, ethnicity, rural and urban environments, an approach that has implications for the design and implementation of child-based, child-friendly policies and interventions. Many participants underlined the importance of achieving a balance between prevention and care in pursuing healthy environments for children, and of early prevention to prevent life-long disability and suffering, starting with the protection of pregnant women and neonates. There is much that can and should be done to tackle risk factors and prevent mortality and morbidity. At the same time, effective, high-quality health systems and comprehensive integrated approaches to care and treatment are vital in ensuring healthy environments for children.

ESSENTIAL POLICIES AND ACTION STRATEGIES

7. In addressing environmental risks to children’s health and the creation of healthier environments for children, participants shared many examples of effective policies, legislative measures, institutional mechanisms, best practices in interventions, and promising initiatives on which to build. High-level, sustained commitment to healthy environments for children was seen as vital in all spheres of policy and action.

8. Participants repeatedly stressed the importance of policy and legislative measures, including effective monitoring and enforcement of legislation, and the establishment of norms and standards to protect and promote the health of children and to secure the environments in which they live, learn and play. Many examples were given from diverse countries. Common themes in the policy arena highlighted by participants included: the need to base policies on evidence; making children’s needs a priority when setting policies; ensuring coherence of policies, within and between sectors; and the need to seek creative and imaginative solutions to ensure healthy environments for children, such as using a mixture of policy initiatives to tackle risks and creating incentives for families, service providers, communities and others to effect the changes necessary.

9. Many institutional mechanisms were highlighted that can be crucial to protecting children’s health and the environment, ranging from ministries of child development, children’s councils with cross-sectoral representation and national committees for healthy environments for children to children’s parliaments and national observatories for children’s rights. In citing these and other examples, participants underscored the importance of empowering children and ensuring children’s participation in appropriate ways so that they have a voice in determining the policies and programmes that concern them and that their perceptions of risk and health are taken into account in the design of interventions.

10. The round-table discussions provided a unique opportunity to share information on best practices in intervention as well as promising initiatives on which to build healthier environments for
children. Among the “keys to success” identified were: adoption of integrated, intersectoral, community-based approaches to deal with multiple risks in different settings; ensuring effective participation of communities, families, children and all stakeholders at all stages of design, implementation, monitoring and evaluation of interventions and initiatives; emphasis on creating opportunities for action by other stakeholders themselves; importance of using education and communication to reduce exposure to risk factors and to promote understanding and adoption of healthier behaviours and lifestyles.

11. A common theme was the need for strategic planning for healthy environments for children in countries as an essential first step. Such plans establish direction and approach, set the basis for action and allow for the measurement of improvements using indicators of children’s environmental health. Strategic plans also allow countries to identify specific priority needs at national and subnational levels and ways to meet them in relevant action plans at different levels, by all sectors, and in all settings.

THE ROLE OF THE HEALTH SECTOR AND OTHER SECTORS

12. Participants emphasized that the health sector alone or in isolation cannot tackle all environmental risk factors to children’s health, and advanced the idea that the health sector should be seen as a leader, a coordinator and a facilitator. Activities in which the health sector is well placed to take the lead include: providing and facilitating access to the scientific evidence of the impact of the broad environment on children’s health and well-being; identifying problems and working with other sectors to develop integrated solutions; initiating joint development planning; initiating standard setting and formulating guidelines; identifying indicators for assessment, monitoring surveillance and evaluation by all sectors of progress in securing healthy environments for children; highlighting areas for research. It should also lead and facilitate the creation of alliances with other governmental sectors, the private sector, nongovernmental organizations and other stakeholders concerned with healthy environments for children.

13. The health sector should also foster communication at all levels and between all actors and stakeholders. Such communication is important in spreading messages and information on healthy environments for children and the steps that can be taken by all to attain that goal. Communication can also be a tool to ensure that the mass media do not convey messages that are harmful to children’s health and well-being, but rather are used to encourage behaviours, actions and initiatives that promote healthy environments for children.

14. Participants recognized the need for intersectoral action to ensure that all aspects of healthy environments for children are dealt with in an integrated manner within and between sectors. Many examples of successful programmes and projects were cited, including health-promoting schools, healthy cities, healthy municipalities, healthy borders and healthy islands, as well as initiatives such as Integrated Management of Childhood Illness, Roll Back Malaria, the Framework Convention on Tobacco Control and Safe Motherhood. Intersectoral approaches and programmes in other sectors with important positive outcomes for healthy environments for children include: phasing out lead in petrol, rural electrification programmes, improving water-supply infrastructure, strengthening hygiene education and food security programmes. Participants emphasized that lessons should be learned from these and that these successes should be built on, strengthened and replicated appropriately.
THE ROLE OF WHO AND THE HEALTHY ENVIRONMENTS FOR CHILDREN ALLIANCE

15. Ministers and their representatives called on WHO to continue to support and foster the Healthy Environments for Children Alliance and to work with Member States in securing healthy environments for children. The Alliance was strongly supported as a means to intensify global action on environmental risks to children’s health by providing knowledge, increasing political will, mobilizing resources and catalysing action.

NEXT STEPS

16. The following activities that were highlighted during the round tables are likely to be given priority in follow-up action by Member States:

- developing strategic plans for healthy environments for children in countries
- undertaking needs assessments, identification of priorities and mapping of health and environmental risks to children in countries
- establishing regional centres working on healthy environments for children
- creating regional networks on healthy environments for children
- sharing best practices through an information clearinghouse on healthy environments for children
- initiating pilot projects for healthy environments for children in one or two countries in each region
- disseminating broadly the evidence on environmental risks to children’s health through fact sheets
- identifying overarching indicators for monitoring and evaluating progress in healthy environments for children, building on work already being undertaken in this area
- preparing training and educational materials
- undertaking action research on environmental risks to children’s health
- mobilizing resources for movements for healthy environments for children in countries.