REPORT
THIRD MINISTERIAL CONFERENCE ON ENVIRONMENT AND HEALTH
LONDON, 16–18 JUNE 1999
**EUROPEAN HEALTH21 TARGET 9**

**REDUCING INJURY FROM VIOLENCE AND ACCIDENTS**

By the year 2020, there should be a significant and sustainable decrease in injuries, disability and death arising from accidents and violence in the Region

*(Adopted by the WHO Regional Committee for Europe at its forty-eighth session, Copenhagen, September 1998)*

---

**EUROPEAN HEALTH21 TARGET 10**

**A HEALTHY AND SAFE PHYSICAL ENVIRONMENT**

By the year 2015, people in the Region should live in a safer physical environment, with exposure to contaminants hazardous to health at levels not exceeding internationally agreed standards

*(Adopted by the WHO Regional Committee for Europe at its forty-eighth session, Copenhagen, September 1998)*

---

**EUROPEAN HEALTH21 TARGET 11**

**HEALTHIER LIVING**

By the year 2015, people across society should have adopted healthier patterns of living

*(Adopted by the WHO Regional Committee for Europe at its forty-eighth session, Copenhagen, September 1998)*

---

**ABSTRACT**

This document reports on the proceedings of the Third Ministerial Conference on Environment and Health, held in London, United Kingdom, from 16 to 18 June 1999. It summarizes the main discussions held and decisions taken, as a supplement to the Conference working papers (and in particular the London Declaration, which documents countries’ agreement to future action). The theme of the Conference was “Action in partnership”, and this report records the emphasis placed during each session on putting plans into effect and on intersectoral collaboration as a means of achieving this. The Conference adopted three documents: the London Declaration, a Charter on Transport, Environment and Health, and a Protocol on Water and Health. The Conference welcomed the participation of nongovernmental organizations and the organization of a parallel conference (the Healthy Planet Forum) for them. The mandate of the European Environment and Health Committee was renewed for a further five years, in order to coordinate activities agreed on by the Conference.

**Keywords**

- ENVIRONMENTAL HEALTH – congresses
- ENVIRONMENTAL POLICY
- INTERSECTORAL COOPERATION
- EUROPE
## CONTENTS

<table>
<thead>
<tr>
<th>Introduction</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proceedings of the Conference</td>
<td>1</td>
</tr>
<tr>
<td>Opening session</td>
<td>1</td>
</tr>
<tr>
<td>Overview of the environment and health in Europe in the 1990s</td>
<td>1</td>
</tr>
<tr>
<td>Transport, environment and health</td>
<td>2</td>
</tr>
<tr>
<td>Early human effects of climate change and stratospheric ozone depletion in Europe</td>
<td>2</td>
</tr>
<tr>
<td>Environment and health research for Europe</td>
<td>3</td>
</tr>
<tr>
<td>Economic perspectives on environment and health</td>
<td>3</td>
</tr>
<tr>
<td>Health, environment and safety management in industrial and other enterprises</td>
<td>3</td>
</tr>
<tr>
<td>Children’s health and the environment</td>
<td>4</td>
</tr>
<tr>
<td>Access to information, public participation and access to justice in environment and health matters</td>
<td>4</td>
</tr>
<tr>
<td>Water and health</td>
<td>4</td>
</tr>
<tr>
<td>Local processes for environment and health action</td>
<td>5</td>
</tr>
<tr>
<td>Implementing NEHAPs in partnership</td>
<td>5</td>
</tr>
<tr>
<td>“Action in partnership” – panel session</td>
<td>6</td>
</tr>
<tr>
<td>WHO “HEALTH21” media award</td>
<td>7</td>
</tr>
<tr>
<td>Closing session</td>
<td>7</td>
</tr>
<tr>
<td>Conference decisions</td>
<td>7</td>
</tr>
<tr>
<td>Annex 1. Programme of the Third Ministerial Conference on Environment and Health</td>
<td>8</td>
</tr>
</tbody>
</table>
Introduction

The Third Ministerial Conference on Environment and Health built on foundations laid at previous regional ministerial conferences held in Frankfurt (1989) and Helsinki (1994), which had themes of “Policy formulation” and “planning”, respectively. The theme of this Conference was “Action in partnership”.

A total of 1146 people participated in the Conference, including 73 ministers from 54 countries, representatives of 7 United Nations bodies and 11 international organizations, a delegation of representatives of nongovernmental organizations (NGOs), and 186 observers from the parallel conference for NGOs, the Healthy Planet Forum.

The Conference elected as co-presidents the Rt. Hon. Tessa Jowell (Minister of State for Public Health, United Kingdom), the Rt. Hon. Michael Meacher (Minister for the Environment, United Kingdom), and the Lord Whitty of Camberwell (Parliamentary Under-Secretary of State for Environment, Transport and the Regions, United Kingdom). The chairperson of each session and Professor Liam Donaldson (Chief Medical Officer, United Kingdom) were elected co-vice-presidents. Dr Alan Pintér (Hungary) was elected rapporteur.

The programme of the Conference, session chairpersons and keynote speakers are shown in Annex 1.

Proceedings of the Conference

Opening session

The opening session was addressed by the Rt. Hon. Frank Dobson (on behalf of the Government of the United Kingdom), Dr Gro Harlem Brundtland (Director-General of WHO), Professor Klaus Töpfer (Executive Director of the United Nations Environment Programme – UNEP), Mr Yves Berthelot (Executive Secretary of the United Nations Economic Commission for Europe – ECE), Dr Jürgen Trittin (on behalf of the Presidency of the European Union), Ms Victoria Elias (on behalf of the Healthy Planet Forum and the NGO community) and Dr Jo Asvall (WHO Regional Director for Europe). A message of support was delivered from His Royal Highness the Prince of Wales.

Overview of the environment and health in Europe in the 1990s

Keynote speakers and several delegations acknowledged various improvements that had been seen during the last decade, notably through the development of national environmental health action plans (NEHAPs) and specific achievements within individual countries. However, deterioration had also been observed in many countries of the Region, and various problems such as air pollution, insufficient quantity and quality of drinking-water, food safety, armed conflicts and traffic continued to pose significant threats to health in Europe.

The Conference noted that information and assessment systems needed to be further developed as a basis for implementing and monitoring policies, and also for communication with the public. Particular concern was expressed at the large differences between the levels of
environment and health risks in various parts of the Region, linked to the degree of social and economic development, and at the apparent trend towards increases in these differences.

**Transport, environment and health**

The Conference recognized the value and necessity of mobility for today’s society but it expressed concern that the adverse effects of transport on the environment and health were increasing and considered that steps were urgently needed to alleviate those effects as much as possible. Participants welcomed the Charter on Transport, Environment and Health as a framework for measures such as integrating health concerns within transport policies; promoting collaboration between stakeholders; increasing walking and cycling; and internalizing the external costs due to transport. The Conference noted the potential of integrated strategies to reduce car use while promoting cycling, walking and public transport; the efforts being made to cut emissions from motor vehicles through technological advances; and the benefits of switching freight traffic from roads to railways. Participants from some countries of central and eastern Europe (CCEE) and the newly independent states (NIS) expressed particular concern about the growth of road traffic, pollution and accidents in their countries, and acknowledged the need to curb imports of older cars, to phase out leaded fuels and to introduce alternative fuels.

In order to make it easier to carry out the Charter’s plan of action and attain its targets, the Conference asked WHO to develop tools such as health guidelines and methodological guidance on assessment and economic valuation of health impacts and on monitoring. The importance of research in areas such as ultra-fine particulate emissions was emphasized. The Conference noted the important role of the European Commission (EC) and the value of the Charter for those countries seeking membership of the European Union (EU).

A proposal was made that the Charter should be developed further into a legally binding international instrument, but it was also mentioned that several international agreements already existed and care would be needed to avoid duplication. The Conference agreed the final wording of paragraph 19 of the London Declaration, in order to take this issue forward.

The Charter on Transport, Environment and Health was adopted by consensus and signed by the three co-presidents and the WHO Regional Director for Europe.

**Early human effects of climate change and stratospheric ozone depletion in Europe**

The Conference recognized that changes in the global climate system and in stratospheric ozone were challenges for the environment and health. Irrespective of any action that might soon be taken to reduce or halt those environmental changes, human populations would be exposed to some degree of climate change and increased ultraviolet irradiation over the coming decades. Member States recognized that there was a need to consider how those global change processes would affect the health of European populations, how to improve research and monitoring, and how to minimize adverse health impacts. The need was stressed to act on the basis of the precautionary principle, to advocate human interventions to reduce the emissions of greenhouse gases (mitigation), and to avoid duplication of effort. Delegates welcomed the recommendations that an international network should be set up, with a coordinating role to be played by the Rome Division of the WHO European Centre for Environment and Health (ECEH). Member States stressed that this network should develop indicators of early human health effects, develop,
advocate and monitor prevention, mitigation and adaptation policies (spontaneous or planned responses to climate change), and identify specific research priorities in that field.

**Environment and health research for Europe**

The Conference emphasized the importance of basic, strategic and applied research (as the cornerstone of effective policy development and implementation) and the need for concerted research efforts to fill gaps in understanding critical issues. The initiative taken by the European Science Foundation (ESF), EC and WHO to identify research needs in environmental health was fully supported, and supranational collaboration and coordination were seen as necessary for effective and efficient use of available resources.

It was proposed that more attention should be paid to research related to occupational health, the harmonization of approaches and standards, alertness to emerging concerns, development of indicators and further elaboration of risk assessment procedures. The Conference underlined the need for continued collaboration between ESF, WHO and EC on research activities and the establishment of a task force; for ministers of health and of the environment and, where appropriate, ministers of science to work together in countries on implementing the research recommendations; and for the European Environment and Health Committee (EEHC) to monitor progress.

**Economic perspectives on environment and health**

The Conference considered the huge costs resulting from pollution and noted that fiscal measures (“eco-taxes”) had the potential to internalize costs and prevent pollution. There was a need to foster public understanding of these aims of fiscal policy. The roles and views of international finance institutions were considered to be important, and participants stressed the need to adapt markets to human health priorities. Countries in transition towards a market economy should be able to realize their potential to reform environmental health services in ways that secured better performance and greater cost-efficiency.

Although participants emphasized the importance of taking account of the costs related to environmental pollution and health, they also noted the difficulty of calculating them and of introducing appropriate economic policy responses. WHO should support further efforts in this direction. The Conference endorsed the “polluter pays principle”, recalling that its rationale was prevention rather than cure, and proposed that regulatory systems should aim to give appropriate incentives to develop the contribution of industry, especially in countries in transition.

**Health, environment and safety management in industrial and other enterprises**

The Conference emphasized the need for harmonized management approaches that would protect and promote the health of workers and people living in industrial settings and protect the general environment. Many countries reported progress and opportunities (for example, when introducing regulations as part of the process of adopting the European Community’s legislation and rules, or “acquis communautaire”), but also areas needing more attention (for example, the need for more reliable and comparable data); other countries reported deteriorations that were contributing to widening health inequities. The Conference endorsed the need to develop good practice in health, environment and safety management (HESM) in enterprises, in cooperation with all relevant partners. Enterprises were willing to cooperate in applying harmonized
management approaches, and it was clear that involving employees in the process was also a
important factor for success. NGO participants stressed the importance of corporate responsibility
and referred to the declaration of the Healthy Planet Forum on this point. A proposal was made
to initiate pilot projects in some countries, with international coordination and assistance.

The need was noted for close collaboration between WHO, the International Labour
Organization (ILO) and other organizations, in order to help countries develop harmonized
processes leading to good practice in HESM. The new EEHC should have a leading role in
promoting such collaboration and should consider establishing a task force. The representative of
Poland pledged to launch a pilot project for implementing good practice in HESM.

**Children’s health and the environment**

The Conference stressed the rights of children, their particular vulnerability and the extent
of ill health in children caused by environmental tobacco smoke, asthma and injuries, and the
need to respond to emerging concerns.

It was proposed that the next Environment and Health conference should be focused on
children, and that consideration should be given to developing an international instrument in that
area. In general, more coordination between agencies and programmes was called for. Education
was seen as a key factor, and Portugal proposed a programme on environmental health
education, involving the WHO/EC/Council of Europe Network of Health Promoting Schools.
Chemicals were also seen as important, particularly in view of the need to take account of
children’s susceptibility when establishing limit values.

**Access to information, public participation and access to justice in environment
and health matters**

The Conference noted the importance of this topic and of the 1998 ECE Convention on
Access to Information, Public Participation in Decision-making and Access to Justice in
Environmental Matters (the “Århus Convention”), from which it took its lead. The need was
emphasized for ratification of or accession to, and especially implementation of, the Århus
Convention. There was strong support for extending its principles and provisions into the sphere
of health.

Several countries supported the idea of a protocol to the Århus Convention on strategic
environment and health impact assessment, and the theme was proposed as a topic for the next
Environment and Health conference.

**Water and health**

The Conference noted the serious burden of water-related diseases and the pressing
problems in water management, water supply and sanitation that existed in the European Region.
Participants described the particular problems of NIS; the importance of education, training and
the involvement of communities and enterprises; and the policy frameworks offered by the ECE
1992 Convention on the Protection and Use of Transboundary Watercourses and International
Lakes and by EU policy instruments. The importance of the Protocol on Water and Health was
emphasized, as was its significance as WHO’s first legislative act jointly with ECE.
Many countries expressed strong support for the Protocol, voiced expectations that it would be effective and proposed practical measures to assist implementation (for example, production of guidance, capacity-building measures, and sharing of information). The roles played by EEHC, the Meeting of the Parties to the Convention and the Government of Hungary were commended. The Conference welcomed initiatives to develop pilot projects on implementing the Protocol and noted that in many countries implementation would require extensive financial support. The Conference invited the secretariats of WHO and ECE to finalize a Memorandum of Understanding between their organizations, in the light of decisions about programmes and budgets for the period after 1999. The Conference took note of plans to hold the first Meeting of the Parties to the Protocol in October 2000 and for a seminar on sustainable water management and health to be held in the Russian Federation in May 2000.

The Conference adopted the Protocol on Water and Health by consensus. The Protocol was signed by the following countries: Albania, Armenia, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Georgia, Germany, Greece, Hungary, Iceland, Italy, Latvia, Lithuania, Luxembourg, Malta, Monaco, Netherlands, Norway, Poland, Portugal, Romania, Russian Federation, Slovakia, Slovenia, Spain, Sweden, Switzerland, Ukraine and United Kingdom. A number of other countries expressed their readiness to sign the Protocol soon.

Local processes for environment and health action

The Conference emphasized that action at local level was necessary in order to implement national plans such as NEHAPs. Some countries required external financial support (and possibilities for obtaining this were described), while others already had extensive experience of local approaches, but even they needed to ensure that different programmes were coordinated both nationally and locally. The importance was noted of involving local communities, ensuring political support, influencing behaviour and attitudes, and taking account of social dimensions. The background document a source book on implementing local environmental and health projects was welcomed.

Many delegations stressed the importance they attached to implementation at local level and to putting health at the heart of local environmental protection, and they endorsed the Healthy Cities movement. Several countries saw a focus on local activity as the next phase of implementing NEHAPs, several expressed willingness to collaborate internationally, and some countries in transition described progress they had made, including innovative use of economic instruments to finance local projects and efforts to mitigate long-term environmental damage or crises caused by armed conflict. The Healthy Planet Forum stressed the importance of local action to NGOs and communities and drew attention to a petition signed by 126 organizations which urged greater community involvement in planning and implementing local environment and health projects.

Implementing NEHAPs in partnership

Many Member States voiced strong political commitment to implementing NEHAPs and acceptance of the roles identified for governments (such as mobilizing actors and monitoring progress). Many countries emphasized the important contribution that NEHAPs were making to adoption and enforcement of the "acquis communautaire", while noting the need to strengthen the capacities of environmental health services and environmental health professionals, and
requested international support with meeting that need. It was stressed that the International Federation of Environmental Health had an important role to play in upgrading the capacities of local environmental health services. Both recipient and donor countries acknowledged the importance of external financial support for helping some countries to implement their NEHAPs. Many delegations emphasized the need for international collaboration at regional, subregional and bilateral levels, pointing out how important it would be for the NEHAP Task Force and EEHC to coordinate and monitor NEHAP implementation.

Among the pledges made, Uzbekistan proposed opening a WHO project office in Tashkent for NEHAP implementation and offered to host the second ministerial conference for central Asian republics on NEHAP. Germany pledged to continue its support for the work of the Robert Koch Institute as a WHO collaborating centre, including the preparation of the International Glossary of Terms on Environment and Health. The NGO Public Participation Campaign noted the value of the Århus Convention to NEHAP implementation and proposed a pan-European conference on public participation in environment and health action plans; The Former Yugoslav Republic of Macedonia offered to host such a conference in 2000. Malta offered to host a subregional centre for tourism, the environment and health in the Mediterranean area. Slovenia offered to host a joint EC/WHO centre for environment and health and accession to the European Union.

“Action in partnership” – panel session

A lively discussion was held between conference participants and a panel of ministers and NGO representatives. Discussion focused on expectations from the Conference, the role of EEHC, implementation of the Protocol on Water and Health, and the agenda of the next Environment and Health conference.

During this session, the recent situation in the Balkans was discussed. The EU expressly welcomed the fact that the prerequisites for ending the military conflict and for a political solution had been met with the adoption of United Nations Security Council resolution 1244 on Kosovo and the other affected areas of the Federal Republic of Yugoslavia. With the cessation of the military conflict in south-eastern Europe, the EU considered that the environmental and health problems which had resulted from the conflict must be rapidly tackled. The EU wished to call the attention of the Conference to the decision of the European Council on 3–4 June 1999 according to which the EU was to play an important role in the region. The EU believed it was now necessary to immediately obtain reliable and verifiable information to enable an assessment of the type and extent of environmental and public health consequences and to move rapidly to their elimination. Particular urgency must be attached to eliminating environmental damage that could pose a threat to human health. For that reason, the hazard potential had to be identified and examined even at the stage of surveying the damage. The EU welcomed the support given by WHO, UNEP and other international organizations to that process. The EU advocated that support should be given to the bordering countries, in particular Albania and The Former Yugoslav Republic of Macedonia that were faced with considerable problems as a result of accepting refugees from Kosovo.

The Russian Federation stated that there was a need for international assessment of the damage done to the environment and health and for provision of the corresponding international assistance. In order to prevent the future occurrence of armed conflicts, with their inevitable repercussions on the environment and on people’s life and health, environmental and health leaders of European countries and international and nongovernmental organizations needed to
take all possible steps to influence the policy of heads of state with regard to the settlement of armed conflicts.

WHO “HEALTH 21” media award

A number of clips were shown of films shortlisted as finalists for this new media award organized by WHO. The finalists were present and received their awards from Dr Jo Asvall (WHO Regional Director for Europe), and the winning film was screened.

Closing session

Closing remarks were made by Mrs Andrea Fischer (on behalf of the Presidency of the European Union), Mr Padraig Flynn (Commissioner for Employment, Industrial Relations and Social Affairs of EC), Mr Yves Berthelot (Executive Secretary of ECE), Dr Jo Asvall (WHO Regional Director for Europe) and the Rt. Hon. Tessa Jowell (on behalf of the Government of the United Kingdom).

Conference decisions

The Conference:

- Adopted the Charter on Transport, Environment and Health (conference document EUR/ICP/EHCO 02 02 05/9 Rev.4, dated 16 June 1999);
- Adopted the authentic texts of the Protocol on Water and Health to the 1992 Convention on the Protection and Use of Transboundary Watercourses and International Lakes which were in front of the meeting (document MP.WAT/AC.1/1999/1 – EHCO 02 05/8, conference document EUR/ICP/EHCO 02 02 05/13 Rev.5, dated 24 March 1999);
- Adopted the London Declaration (conference document EUR/ICP/EHCO 02 02 05/18 Rev.5, dated 18 June 1999);
- Welcomed and supported the other working papers and background documents;
- Renewed the mandate of EEHC for a further five years;
- Welcomed the participation of NGOs in the Conference and its preparatory process, and welcomed their parallel Healthy Planet Forum;
- Commended the lead countries (Austria, Bulgaria, Finland, France, Hungary, Ireland, Italy, Netherlands, Poland, Slovenia, Ukraine, United Kingdom) for the role each had played in making preparations for the Conference;
- Welcomed and accepted the offer by the Government of Hungary to host the next Environment and Health conference in 2004;
- Thanked the Government of the United Kingdom for its hospitality and the outstanding arrangements for the Conference.
Annex 1

PROGRAMME OF THE THIRD MINISTERIAL CONFERENCE ON ENVIRONMENT AND HEALTH

Wednesday, 16 June 1999

10.00–11.00 Opening session

Mr M. Meacher (United Kingdom), Dr J.E. Asvall (WHO), Mr F. Dobson (United Kingdom), Mr Y. Berthelot (ECE), Professor K. Töpfer (UNEP), Ms V. Elias (Eco-Accord), Ms A. Fischer (Germany)

11.00–11.45 Overview of the environment and health in Europe in the 1990s

Mr A. Yatsek (Ukraine), Mr D. Beltrán (European Environment Agency), Dr Z. Reiner (Croatia), Mr S. Auken (Denmark), Ms M. McPhail (European Public Health Alliance)

13.45–15.45 Transport, environment and health

Dr M. Bartenstein (Austria), Dr E. Westheide (Germany), Mr V. Galea (Malta), Dr R. Alekna (Lithuania), Mr T. Zimmerman (European Federation for Transport and the Environment), Mr H. Rat (International Union of Public Transport Operators and Authorities), Mr L. Bastard (European Automobile Manufacturers’ Association), Mr G. Hanreich (EC)

16.30–17.15 Early human health effects of climate change and stratospheric ozone depletion in Europe

Mr C. Clini (Italy), Mr D. Gunnarsson (Iceland), Dr P. Gantar (Slovenia), Professor A. McMichael (Intergovernmental Panel on Climate Change)

17.15–18.00 Environment and health research for Europe

Professor Sir Kenneth Calman, Professor Laszlo Miklos (Slovakia), Mr L. Respini (Dow Europe), Mr R. Gerold (EC)

Thursday, 17 June 1999

09.00–09.45 Economic perspectives on environment and health

Ms D. Voynet (France), Dr H. Nikogosian (Armenia), Mr P. Hansen (Luxembourg), Mr H. Lever (European Chemical Industry Federation), Dr G. Silberschmidt (International Society of Doctors for the Environment (ISDE)), Mr T. Murphy (European Bank for Reconstruction and Development)

09.45–10.30 Health, environment and safety management

Dr J. Piotkiewicz (Poland), Dr H. Kranich (Estonia), Mr W. Buschak (European Trade Union Congress), Mr V. Jaksons (Latvia),

11.15–12.00 Children’s health and the environment

Mr B. Cowen (Ireland), Mr P. Robertson (USA), Dr I. Zelenkevitch (Belarus), Ms M.–L. Bistrup (Childwatch International)

12.00–12.45 Access to information, public participation and access to justice in environment and health matters

Professor W. Kakebeeke (Netherlands), Dr M. Kuzvart (Czech Republic), Mr J. Hontelez (European Environment Bureau), Dr G. Rayner (UK Public Health Association), Mr J. Strith (Regional Environmental Center for Central and Eastern Europe)
15.00–17.00 Water and health

Dr A. Gőgl (Hungary), Mr H. Micheev (Russian Federation), Ms O. Ataniyazova (Karakacpak Sustainable Development Centre), Ms L. Kauppi (Finland), Mr J. Currie (EC), Dr J. Goicoechea (Andorra), Mr A. Norman (Severn Trent).

17.00–18.00 Signing ceremony for the Protocol on Water and Health

Mr Y. Berthelot (UN/ECE), Dr J.E. Asvall (WHO), Mr K. Bärlund (UN/ECE), Dr G. Klein (WHO), Mr P. Kohona (United Nations)

Friday, 18 June 1999

09.00–09.45 Local processes for environment and health action

Ms E. Biaudet (Finland), Mr T. Alykulov (Kyrgyzstan), Ms K. Regnér (International Federation of Environmental Health), Dr I. Panopoulou (Greece), Mr J. Al Reding (Project Preparation Committee)

09.45–10.30 Implementing national environmental health action plans in partnership

Professor P. Boyadjiev (Bulgaria), Professor T. Zeltner (Switzerland), Ms A. Onisimova (Mama-86), Dr A. Khabibullayev (Uzbekistan)

11.15–12.15 “Action in partnership” (panel session)

Mr N. Clarke (BBC), Mr H. Nikogosian (Armenia), Mr M. Meacher (United Kingdom), Dr J.E. Asvall (WHO), Ms A. Onisimova (Mama-86), Dr G. Silberschmidt (ISDE)

12.15–12.30 WHO “HEALTH21” media award

Ms T. Jowell (United Kingdom), Dr F. Apfel (WHO), Dr J.E. Asvall (WHO), Ms V. Taylor Gee (WHO)

12.30–13.00 Closing session

Ms T. Jowell (United Kingdom), Mr P. Flynn (EC), Mr Y. Berthelot (UN/ECE), Ms A. Fischer (Germany).