Driving transformative action: from Ostrava to Budapest and beyond with National Portfolios of Actions on Environment and Health

Policy brief
ABSTRACT

The Ostrava Declaration, adopted at the Sixth Ministerial Conference on Environment and Health, highlighted the development of National Portfolios of Actions on Environment and Health as a key objective. While over half of the Member States that signed the Declaration have embraced this commitment, there is a need for a deeper understanding of the factors impeding higher compliance, considering the significant disruptions caused by COVID-19. This policy brief presents an assessment of the implementation of this Ostrava commitment, utilizing data from a desk review, survey and interviews with members of the European Environment and Health Task Force. The findings of this assessment will inform policy- and decision-makers in the WHO European Region, providing recommended actions to enhance and strengthen National Portfolios. These recommended actions will be presented at the Seventh Ministerial Conference in July 2023, aiming to guide future actions and decisions in this important area.

KEYWORDS

ENVIRONMENT, HEALTH, NATIONAL PRIORITIES, SUSTAINABLE DEVELOPMENT GOALS, COVID-19, ONE HEALTH, WHO EUROPEAN REGION

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Key messages

This policy brief summarizes the results of an assessment of the implementation of the Ostrava Declaration commitment to develop National Portfolios of Actions on Environment and Health (NPs). It presents recommended actions to guide policy- and decision-makers in Member States of the WHO European Region to develop and strengthen NPs. The key messages from the assessment are as follows:

- Member States have set their own priorities for environment and health policies and actions in accordance with the Ostrava Declaration, with some Member States including additional topics relevant for their country context (e.g. biodiversity loss).

- Countries predominantly use NPs to summarize and report existing environment and health policies and activities across sectors on a national level. NPs have the potential to be used as a tool for communication, for strategically planning future activities and decision-making, and for evaluation of progress towards national environment and health targets, especially when linked to the United Nations Sustainable Development Goals (SDGs). NPs may support further consideration of environment and health issues in national legislation.

- NPs assist decision- and policy-makers in tracking implementation of existing policies and actions and thus provide an overview of progress towards national objectives and support prioritization related to environment and health issues. NPs can inform decision-makers as to where limited resources should be invested to achieve effective and timely action.

- Using NPs to guide the implementation of health and environment actions can support cross-sectoral coordination through collaboration and dialogue at national and local levels. Implementing NP actions effectively requires a cross-sectoral approach to evidence and research, capacity-building, implementation and review, at a local level. The NP can be used as a “health and environment in all policies” tool to coordinate with other sectors at all levels.

- Monitoring and evaluation of NP implementation can drive priority setting, as well as identify gaps and new topic areas (such as One Health and biodiversity loss) to be included when updating NPs.

- Policy-makers are encouraged to address challenges in NP development and implementation through, for example, advocating for consistent political support, mediating between ministries, setting up coordinating and monitoring mechanisms, and building capacity. To this end, active knowledge exchange and sharing of experiences and good practice examples are essential for an effective NP development, implementation and review process.
• The COVID-19 pandemic and the respective response measures disrupted the environment and health agenda. Shifts in political priorities, the transfer of human resources towards COVID-19 response teams and a high fluctuation of staff drew away attention and resources from environment and health action. Many Member States still face challenges in implementing interventions for a green and healthy recovery from the COVID-19 pandemic in line with WHO recommendations. In some instances, the COVID-19 pandemic has contributed to a better understanding of the significance of public health and the need for integrated approaches – such as One Health and Planetary Health – in policy-making, public communication, capacity-building and research.

• The NP development and implementation process carries strong potential to be used as a strategic planning instrument and as a tool to implement transformative action in environment and health on all levels. To make use of NPs’ full potential, they should be anchored in existing evidence and guidelines on environment and health action (e.g. WHO guidelines on air quality) and linked to the commitments of the forthcoming Budapest Declaration. Through cross-sectoral training and opportunities for exchange, capacities can be built and strengthened among national focal points, the health and environment workforce at ministries and youth representatives, to promote transformative action on environment and health.
Driving the health and environment agenda in the WHO European Region

In 2017, Member States came together in Ostrava in Czechia for the Sixth Ministerial Conference on Environment and Health. The main commitment in the resulting Ostrava Declaration (1) aimed at developing NPs focused on seven priority areas (Box 1). These can be stand-alone policy documents or parts of other documents, and they are intended to respect differences in countries’ circumstances, needs, priorities and capacities (1). According to the Compendium of possible actions to advance the implementation of the Ostrava Declaration (2) the main objective of NPs is to ensure that Member States have well-coordinated, comprehensive and coherent strategies and policies to address the persistent burden of diseases attributable to environmental determinants. NPs attempt to achieve this objective by:

- closing the gaps in priority areas of the Ostrava Declaration which are not adequately or sufficiently addressed;
- creating policy coherence among plans and actions which would benefit from a greater synergy with other relevant policies and actions;
- aligning environment and health policies and actions with the 2030 Agenda for Sustainable Development;
- strengthening systems-based approaches in the area of health and environment;
- sufficiently scaling up targets and actions so that they accelerate improvements in health and well-being in relation to the environment, within a foreseeable timeframe.

Since then, multiple crises, including the ongoing COVID-19 pandemic, climate change, biodiversity loss, armed conflicts and the energy and food crises, have put tremendous stress on people’s health and national health systems in the WHO European Region.

Box 1. Seven priority areas for the National Portfolios set in the Ostrava Declaration (1)

1. Improving indoor and outdoor air quality for all
2. Ensuring universal, equitable and sustainable access to safe drinking-water, sanitation and hygiene for all and in all settings
3. Minimizing the adverse effects of chemicals on human health and the environment
4. Preventing and eliminating the adverse environmental and health effects, costs and inequalities related to waste management and contaminated sites
5. Strengthening adaptive capacity and resilience to climate change-related health risks and supporting measures to mitigate climate change and achieve health co-benefits in line with the Paris Agreement
6. Supporting the efforts of European cities and regions to become more healthy, inclusive, safe, resilient and sustainable
7. Building the environmental sustainability of health systems and reducing their environmental impact.
This policy brief aims to identify and analyse challenges, opportunities and drivers for developing, implementing and evaluating NPs in Member States of the European Region. The analysis draws attention to the impacts of the COVID-19 pandemic on the implementation of the Ostrava commitments, as well as the challenges associated with a green and healthy recovery (3).

The brief summarizes the results of the assessment of the implementation of NPs and presents recommended actions for strengthening NPs as a dynamic and strategic tool to drive the environment and health agenda and for accelerating transformative action at the national and local levels. It intends to inform the Seventh Ministerial Conference on Environment and Health, which will take place on 5–7 July 2023 in Budapest, Hungary. The policy brief may also guide policy-and decision-makers in Member States in developing strategies and incentives to foster policy coherence, governance and effective monitoring mechanisms for transformative environment and health action.
How NPs were assessed

The assessment built on a survey carried out among Member States in 2019 (4) and triangulated data from three sources: i) an updated survey among Member States, ii) a desk study of existing NPs, and iii) semi-structured interviews with Member States representatives, from which good practice examples were extracted (Fig. 1 and 2).

The aims of the assessment were to:

- more comprehensively identify current and future priority areas in the light of multiple crises;
- assess the potential use of and benefits from the process of developing, implementing and reviewing NPs for transformative environment and health action;
- identify challenges that policy-makers might need to address when developing NPs and technical support that might facilitate this process;
- suggest potential amendments of the NP development, implementation and review process to facilitate and accelerate the implementation of the Ostrava Declaration (1) and potentially forthcoming decisions and commitments;
- identify mechanisms to ensure a participatory and intergenerational process to achieve health equity for present and future generations within planetary boundaries;
- select good practice examples of transformative actions related to measures, policies and governance structures for Planetary Health.

Annex 1 gives an overview of the methodological approach used to conduct this assessment.

Fig. 1. Member States' participation in the assessment

<table>
<thead>
<tr>
<th>DESK REVIEW</th>
<th>SURVEY</th>
<th>SEMI-STRUCTURED INTERVIEWS</th>
</tr>
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<tbody>
<tr>
<td>Twenty-two Member States have uploaded portfolios, 14 have provided an NP as a stand-alone document, and 8 have equivalent documents such as extensive summaries of actions or policy overviews. Analysis categories include: status of portfolios, impact of COVID-19, governance, financing, monitoring, communication and (non-state actor) participation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Of 53 Member States, 41 submitted the survey (response rate: 77%). Out of these, a total of 33 reported having developed an NP (29 Member States) or that they are currently developing one (4 Member States), while the remaining 8 indicated no NP was currently under development.</td>
<td></td>
<td></td>
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<tr>
<td>Seven Member States participated. Two interviews were conducted with representatives from the health and the environment sectors for each Member State.</td>
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Fig. 2. Geographical distribution of participating Member States of the WHO European Region (marked in blue)
Developing NPs for effective implementation of environment and health action

Data shows that many Member States have developed NPs to follow up on the joint commitment made in the Ostrava Declaration (1). One of the main aims was to increase the effective implementation of environment and health policies and actions from different sectors (e.g. transport, agriculture, energy, tourism, economy, research and education). Developing NPs helped policy-makers to identify gaps and duplication of efforts, but also synergies between and within sectors. NPs have the potential to increase policy coherence through oversight of existing actions and intersectoral coordination. The assessment showed that most NPs outline responsibilities for implementation and indicate different ministries involved in the planning and/or implementation of environment and health action. Financing and monitoring mechanisms for implementation, however, were not always reported (Fig. 3).

**Fig. 3. Overview of structural aspects of NPs**
While some Member States used the NP as a tool for communication with the public, few NPs included comprehensive communication strategies. In rare instances, NPs were also used to inform or engage with subnational health and environment authorities. The involvement of youth and civil society organizations in the development or the implementation was only specified (to some extent) in eighth out of 22 NPs submitted. Only four out of 22 NPs made a significant link to research and education.

Three Member States that have not yet developed an NP, but have provided information on the survey attributed this to a lack of political support, leading to a deprioritization of the health and environment agenda. Political instability due to recent changes in government, diverted interests and a lack of collaboration between the ministries of health and environment, were additional concerns.

Of the nine Member States who provided data on the survey, six mentioned a lack of funding and insufficient capacities as the main challenges to development of an NP. Six Member States emphasized the importance of knowledge transfer and capacity-building for staff in order to enhance the planning and coordination of environment and health policies and the development of NPs. The Member States that had not yet developed an NP, had each implemented environment and health actions in sectoral programmes.
Aiming for cross-sectoral collaborations through NPs

Across the European Region, both the formats and the use of NPs showed great variability. In general terms, NPs are mostly used as a retrospective report and as a list of actions, summarizing existing activities and policies in the area of environment and health across sectors on a national level. In this regard, they facilitate cross-sectoral collaboration and provide a general overview of national environment and health activities, such as strategies, legislation and action programmes. Countries also occasionally employ NPs as tools for communication, strategic planning or measuring the success of implementation (Box 2).

More than half of the Member States reported that they had considered and implemented all or most aspects of the Ostrava commitments in their developed NPs (Fig. 4). Among these, measures to improve air quality, access to safe drinking-water and sanitation, and protection against exposure to chemical hazards were listed as the most relevant aspects. Climate adaptation measures within the health sector, specifically against heatwaves, were mentioned less often.

Overall, NPs were only rarely used as a strategic planning instrument. However, there are opportunities that policy-makers can leverage to enable the use of NPs as a tool to implement transformative action.

Fig. 4. Extent to which Member States have implemented Ostrava commitments in their respective NPs
Box 2. Case study: collaborations driving transformative change in Sweden

In Sweden, the approach to environmental health has undergone an exciting transformation. Recognizing that many issues are interconnected, various agencies responsible for environmental quality objectives have joined forces to incorporate a health perspective into their work on sustainable development. This collaborative effort, initiated by the Public Health Agency in 2017, aims to establish long-term partnerships among relevant agencies and national bodies in the field of environmental health. By aligning with the Ostrava commitments and SDGs, Sweden is actively working towards a healthier and more sustainable future.

A significant milestone in this endeavour was reached in June 2018 when the Riksdag, Sweden’s highest decision-making assembly, introduced a comprehensive policy framework for public health. This framework not only sets an overarching objective but also identifies eight specific target areas. The ultimate goal is to create a society that promotes good health for everyone and reduces health disparities within a single generation. Crucially, these target areas encompass a wide range of factors, including societal and living conditions, lifestyle choices and environmental health. This holistic approach recognizes the intricate connections between our well-being and the environment we inhabit. This aligns with Swedish environmental policy, which ultimately aims to pass on a society to the next generation where the major environmental problems have been solved.

To ensure the success of the public health policy, a series of workshops were organized, bringing together participants from national, regional and local authorities; academia; nongovernmental organizations; and the private sector. These workshops facilitated in-depth discussions on the needs and actions required for each of the priority areas outlined in the Ostrava Declaration. The outcomes of these collaborative sessions serve as valuable monitoring tools, enabling the country to assess its progress and build upon the achievements of previous years.

In 2021, the findings from these workshops were consolidated in a comprehensive report (5) which is considered as a National Portfolio. This report reflects the insights gained from engaging with various stakeholders, as it identifies specific environment and health needs and proposes effective recommendations to address them. Based on this previous work, the Environmental Objectives Council (Miljömålsrådet), comprising the directors-general of 19 national agencies, established a four-year cross-sectoral collaborative programme on “Health as a driver for the environmental goals and sustainable development” to be led by the Public Health Agency in 2023–2026. The programme, which builds on identified needs and recommendations, will also incorporate the commitments of the Budapest Declaration, to continue the work towards sustainable development and to extend the network of engaged stakeholders to build a robust and long-term platform for environmental health issues. By harnessing the collective wisdom and expertise of all collaborating actors, Sweden is poised to tackle environment and health challenges head-on and pave the way for a healthier and more sustainable future for its citizens.
Opportunities for and benefits of developing and implementing NPs

The majority of Member States reported NPs as being helpful in overcoming siloed approaches (Box 3). They highlighted the significant benefits of consistent intersectoral meetings, which have fostered progress and breakthroughs in key priority areas outlined in the Ostrava Declaration. This progress has been the product of enhanced collaboration, holistic approaches, synergistic solutions, knowledge exchange, and improved alignment and coherence.

Increased, intensified and new collaborations between different ministries were one of the strongly observed benefits of the NP process. In one instance, collaboration between the health and infrastructure ministries on the implementation of active mobility and urban planning provided a tangible demonstration of the positive outcomes that intersectoral meetings can yield. This joint effort resulted in increased opportunities for physical activity, reduced traffic congestion, and enhanced overall health and well-being.

In many countries, opportunities also arose from setting up new working groups for the coordination of environment and health policy (e.g. water and health plans) comprising representatives from multiple sectors – such as health, environment, agriculture, mining, education, transport, foreign affairs and social affairs. Interviewed participants reported that the achievement of health and well-being through actions on the environment could be promoted through the development of shared narratives (e.g. the benefits of taking climate action within health systems).

Box 3. Benefits of NP development and implementation for Member States

- Facilitating alignment of environment and health policies and actions with the 2030 Agenda for Sustainable Development
- Delivering political legitimacy (including through commitments, evidence, guidelines and legislation)
- Breaking silos and driving cross-sectoral collaboration and action, and strengthening systemic approaches
- Providing an overview of actions, responsible stakeholders and their roles, timeframes, objectives, outcomes, impacts, review mechanisms and financing
- Triggering development and use of integrated approaches (e.g. One Health) in policy development
- Improving data collection on environment and health
- Serving as a “health and environment in all policies” tool
- Functioning as a communication tool on international commitments, to a broad range of sectors, to regional and local authorities, and to the public
- Connecting Member States to share knowledge
- Highlighting the need to use health and environment impact assessments tools

In cases where non-state actors, including academia, the business community and civil society organizations were invited to collaborate, the development of national environment and health strategies
benefited from the respective contributions. Reportedly, the development of NPs helped encourage the collection, organization and systematization of data from different sectors, informing policy-making as well as the evaluation of action.

Survey respondents confirmed that the Ostrava Declaration (1) and its compendium of possible actions (2) reinforce the implementation of the health and environmental targets and indicators of the SDGs (6,7) at the national level. To ensure consistency with the SDG framework, the Ostrava Declaration set out to monitor and report on progress towards its objectives using identical indicators to those established for reporting on the achievement of the SDGs and their targets. The actions outlined in the compendium (2) also support countries in selecting evidence-based priority actions and in articulating them in a professional and clear way (Fig. 5).

The Declaration, as an international instrument, can facilitate the promotion of the Ostrava commitments in other sectors. Health and environmental stakeholders can use the Declaration to reach out to other sectors using its international legitimacy. Health and environmental impact assessment can also serve as a tool to anticipate and evaluate the impact of health and environment action and to inform policy-making and thus foster “health and environment in all policies”.

**Fig. 5. Usefulness of the compendium of possible actions in advancing implementation of the Ostrava Declaration**

<table>
<thead>
<tr>
<th>Number of Member States</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very useful</td>
<td>25.8%</td>
</tr>
<tr>
<td>Useful</td>
<td>45.2%</td>
</tr>
<tr>
<td>Moderately useful</td>
<td>16.1%</td>
</tr>
<tr>
<td>Not useful</td>
<td>0</td>
</tr>
<tr>
<td>Not applicable/ I don’t know</td>
<td>12.9%</td>
</tr>
</tbody>
</table>

Number of Member States (of the 31 Member States that responded on this issue)
Overcoming challenges to develop and implement NPs and actions on environment and health

In the process of developing and implementing NPs, Member States have faced various challenges. Member States saw themselves confronted in particular with challenges at the levels of governance and implementation due to personnel retirements, transfers or a general lack of human capacity. Changes of government may lead to significantly decreased political interest for further improvement of the NP in several countries (Box 4). Bringing together diverging priorities between health and environment ministries could establish the basis for joint priority setting in many Member States. It could also address challenges such as high staff turnover and changes in government through a clear sharing of responsibilities and coordinated division of labour between ministries.

Establishing the legitimacy of the NP and an accompanying monitoring framework by adopting it as a legally binding document could foster the engagement of ministries across sectors in some countries. Furthermore, supporting the horizontal coordination of topics, such as environmental health, could help to overcome the challenges of fragmentation of competencies between and within sectors. Advocating for increased financing could foster the start of new research projects and programmes triggered by the NPs.

Member States of the European Union (EU) are bound by highly specialized and complex EU legislation. Thus, EU Member States need to plan for capacity assessment and the alignment with EU requirements of national priorities and policies that are informed by the Ostrava commitments (e.g. in the case of measures to promote air quality in the Region).

Currently, NPs are mainly being discussed among political actors at national level. Translation, implementation and engagement at subnational levels (regions/states and municipal/local level authorities) is needed to drive roll-out of effective and transformative environment and health action.

Most Member States reported that a harmonized NP format (e.g. a template) would be beneficial for the development of NPs, as well as knowledge transfer between Member States, as long as the format provides full flexibility for national priority setting. This format could be accompanied by a manual or guide together with webinars and “clinics” for online support for Member States – acting as a platform for exchange to increase active sharing of experiences and good practice examples.

Most Member States, especially those who have yet to develop an NP, requested training and opportunities for exchange among national focal points, to build their capacity as agents for transformative action. The participation of youth representatives in the development and implementation of NPs was generally seen as beneficial for transformative environment and health action.
Box 4. How Member States can address NP-related challenges

- Advocate for consistent political support
- Mediate between ministries with competing political priorities and interests
- Use synergies between institutions and their capacities within and between sectors
- Adopt the NP as a legally binding process at a national level
- Set up a coordinating mechanism
- Build human capacities for environment and health
- Ensure sufficient financial support (for processes and actions)
- Carry out risk assessments regarding new hazards and environment and health topics
- Strengthen the engagement and involvement of non-state actors (e.g. youth, civil society organizations)
- Set up review mechanisms to foster learning through monitoring and evaluation
- Define concrete objectives, milestones, indicators and a timeline for implementation and review
- For EU member states: align national processes with EU legislation
- For non-EU member states: align the domestic policy agenda with multilateral and cross-border instruments
- Encourage engagement and accelerate implementation at subnational level

A few Member States reported having implemented monitoring mechanisms for their NPs (Box 5). In some cases, these mechanisms were integrated with existing monitoring mechanisms in relation to the SDGs or international conventions. Furthermore, most EU countries aligned their NPs with specific monitoring commitments related to EU guidelines and regulations. Some Member States presented isolated monitoring mechanisms developed by ministries for their sectoral policies and strategic planning, instead of having a cross-ministerial mechanism in place. After the disruption caused by the COVID-19 pandemic, several Member States were reviving the process of developing monitoring and evaluation mechanisms to assess NP implementation. Furthermore, some countries reaffirmed their aim to review environment and health actions in view of the forthcoming Ministerial Conference on Environment and Health in July 2023.
COVID-19 and the environment and health agenda

Shifts in political priorities, the transfer of human resources towards COVID-19 response teams and a high fluctuation of staff, drew away attention and resources from the environment and health agenda during the pandemic in many Member States. To address these challenges, WHO launched guidance for a green and healthy recovery (3). A few Member States applied a green and healthy recovery lens to managing and recycling an increased amount of medical waste following the peak of the COVID-19 pandemic. However, many countries could not fully implement an environmentally friendly pandemic response and recovery. Systematically using the expertise, experience and networks of staff involved in the COVID-19 crisis response, in the field of environment and health, could greatly support enhancing resilience and a green and healthy recovery (Box 5).

Box 5. Case study: monitoring and evaluation of an NP in France

Since 2004, France has developed four successive NPs, based on a revision process every five years and considering the Environment and Health Declarations of Budapest (2004), Parma (2010) and Ostrava (2017); the fourth NP was compiled in 2021. Significant funding from the €30 billion “France Relance” COVID-19 recovery plan will be dedicated to implementing environmental health initiatives included in the revised NP. The regular revision process is coordinated at national level by an interministerial steering committee, which includes all relevant ministerial departments (e.g. health, environment, agriculture, research, education, consumer affairs), and by a national steering body including relevant stakeholders (e.g. an association for the protection of the environment and human health, health professionals, industry, civil society etc.). The national steering body is chaired by a member of parliament, who is in charge of monitoring the implementation and orientation of actions plans. The priorities of the NP are integrated into local plans in each of the 18 French regions, including overseas territories. All regional plans are included in the review mechanism.

The aim of the process and its evaluation is to apply and constantly improve a cross-cutting approach, which accounts for the interactions between animal and human health, as well as environment and ecosystems. Overall, the evaluation takes place at national and local level with the involvement of research organizations and non-state actors. Four key areas of focus have been identified: i) the provision of training and information on environment and health issues; ii) reduction of environmental exposures; iii) achievement of a better understanding of environmental exposures through research; and iv) application of the One Health approach. For each of these four areas, a working group at national level monitors the actions of the plan. In addition, a structure dedicated to monitoring at local level has been put in place.

Initially, the NP revisions focused on the impact of actions, risk reduction and prevention, and on gaps and synergies with other strategies. Using the cross-cutting and participatory approach in the monitoring and evaluation process has promoted policy coherence in France. This can be seen in the integration of the One Health approach in other policy fields, which was initiated in the latest review. Other existing thematic plans – focusing on issues such as the reduction of exposure to endocrine disruptors, the improvement of ambient air quality, the protection of biodiversity, and combatting antimicrobial resistance – are now better integrated and coordinated after the latest review.
A positive side-effect of the COVID-19 pandemic is that health and environment topics have been moved higher up the political agenda, and public awareness and acceptance of non-pharmaceutical public health interventions has increased (such as measures to improve indoor air quality and wastewater disease surveillance (Box 6)). These interlinkages between environment and health impacts that have arisen from COVID-19, have also led to interdisciplinary research projects, especially in the fields of virology, public health, environmental sciences and urban planning. A greater understanding of the need for integrated approaches, such as One Health, in policy-making, public communication and research was observed. Solutions devised for managing and responding to COVID-19 related misinformation could also facilitate communication for public health stakeholders, including on topics that touch upon environmental issues (e.g. the effectiveness of face masks and indoor air quality).

Overall, the COVID-19 pandemic disrupted the environment and health agendas in a many Member States and it is important to work towards overcoming the challenges of implementing a green and healthy recovery from the pandemic.

Box 6. Case study: wastewater monitoring and surveillance in Hungary

Hungary has been involved in the environment and health process since 1989 and developed its environmental protection plan in the 1990s. This plan defines all environmental protection priorities for Hungary and includes a chapter which delineates an environmental health action plan, corresponding to the NP. The environmental protection plan and the respective chapter on environmental health is a key policy document as it gives a short summary of tasks and includes a strong monitoring system with a broad range of indicators. While all seven health priority areas of the Ostrava Declaration are relevant for Hungary, and all are considered in the respective chapter of the environmental protection plan, the main focus lies on issues related to chemical pollution, especially combined exposures and mixtures of chemicals. Hungary has developed tools for risk assessment for single chemicals, but it is important that environmental health risk assessments for chemical exposure are improved.

Health and environment protection agencies need to invest in risk assessment and consolidate environmental and health policies. In this regard, the COVID-19 pandemic provided an opportunity for the Hungarian National Public Health Centre, which became the focal point for pandemic response management, thus giving growing public attention to its work on non-pharmaceutical public health interventions. There is growing recognition of the importance of environmental health issues and the new technologies and methodologies to address them. The wastewater disease surveillance system developed in Hungary serves as an example of how public health experience can be applied to other public health risks. In the past, Hungary has experienced disease outbreaks related to biological water pollution. A severe outbreak in 2006 triggered the development of a water safety plan, including a water surveillance system for early detection of health risks. Today, Hungary’s advanced wastewater surveillance system monitors for pathogens (e.g. polio and influenza) and chemical pollution, and in the future will monitor antimicrobial resistance.

Actively involving high-level decision-makers from different sectors early in the process of environmental health policy development and implementation could support knowledge and technology transfer between sectors. Strengthened and tailored communication on environmental health issues to decision-makers can underline the importance of addressing them. In this context, an NP is a powerful tool to assist decision-makers in the selection of priorities and the measuring of progress against defined indicators.
Recommended actions to strengthen NPs

Policy-makers benefit from the guidance of the European Environment and Health Process (EHP) Secretariat and other Task Force members in developing and implementing NPs on their own national priorities. Strengthening this process could result in more efficient NP development and implementation. The NP process can help improve cross-sectoral coordination and collaboration among countries and stakeholders, and enhance the overall effectiveness of the collective efforts. Thinking beyond the Budapest Declaration, the following enhancements to the process of developing and implementing NPs could support transformative environment and health action:

- Use the political momentum of the Budapest Ministerial Conference on Environment and Health to review and set priorities at national level on environment and health.

- Use the NP as a “health and environment in all policies” tool to coordinate with other sectors at all levels.

- Strengthen cross-sectoral coordination through applying the One Health approach (Box 7).

- Promote cross-sectoral training and opportunities for exchange for national focal points, the health and environment workforce at ministries and youth representatives – to build their capacity as agents for transformative action.

- Initiate national policy dialogues to foster conversations on health and environment with non-state actors and subnational authorities.

- Develop monitoring and evaluation mechanisms for NPs, including clarification of responsibilities, the definition of indicators and a timeline.

- Develop communication materials linked to the NP for subnational authorities and the public.
Box 7. Case study: using the NP to reinforce the One Health approach in Spain

The approval of Spain’s Strategic Health and Environment Plan (2022–2026) \(^8\) in the midst of the COVID-19 pandemic, marked an important milestone in addressing the impact of environmental factors on public health. This comprehensive plan takes a holistic approach, considering both health and environmental aspects to reduce the health risks associated with environmental factors.

The main objective of the Plan is to promote environments that improve the overall health of the population and mitigate the adverse effects of exposure to environmental factors. The Plan encompasses various cross-cutting themes, including One Health, that will allow a comprehensive approach, the coordination of intersectoral actions and the development of interventions aimed at benefiting and protecting health.

The reinforcement of the One Health approach involves the establishment of risk management mechanisms that encourage collaboration and coordination among all stakeholders. This includes efforts to improve knowledge regarding the effects of climate change on human and animal health, biodiversity and the effectiveness of adaptation measures.

To ensure the effectiveness of the Plan, monitoring and evaluation processes are in place. These include the implementation of biennial action programmes, regular reviews of the Plan, the use of indicators specific to different subject areas, and the monitoring of management and implementation indicators.

Overall, these measures aim to strengthen the One Health approach, promoting collective action and informed decision-making to address the complex challenges posed by climate change and its impact on health and biodiversity.
References


Annex 1. Methodological approach

Assessment of Ostrava commitments related to the National Portfolios

The assessment comprised the following aspects:

- evaluation of NPs, building on 2019 survey results and additional data collection in 2021;
- analysis of insights, opportunities and lessons learned from Task Force experience with the development and implementation of NPs;
- collection of more in-depth insights on selected aspects of the development and implementation of the NPs.

Desk review

During the desk review, a comprehensive analysis was conducted on a total of 22 NPs from Armenia, Austria, Belarus, Belgium, Croatia, Cyprus, Czechia, Estonia, France, Germany, Hungary, Kazakhstan, Lithuania, Malta, Netherlands (Kingdom of the), Portugal, Russian Federation, Slovakia, Spain, Sweden Türkiye and the United Kingdom received in 2022 and 2023.

The categories used as the framework for the desk review focused on governance, finance, monitoring of implementation, and cross-cutting themes such as gender, youth and civil society participation, and communication.

If available, assessments were conducted on English or German versions of the NPs. If not, a publicly available translation tool was used for translating keywords and document passages.

Survey

The survey comprised two variants of a tailored semi-structured questionnaire, administered online, catering to two distinct classifications of Member States – based on progress made with NP development and implementation. These questionnaires incorporated both open-ended and close-ended inquiries, customized to the specific circumstances surrounding the development and implementation of NPs. The survey sought to gather information on the following aspects:

- the present state of NPs;
- factors facilitating or hindering the development and implementation of NPs;
- the requirements expressed by Member States for effectively implementing actions related to environment and health.

In February 2023, the two surveys were disseminated to members of the Environment and Health Task Force or their designated focal points. The surveys were distributed through the WHO Regional Office for Europe, and subsequently forwarded to the relevant departments responsible for handling environment and health matters within each Member State, as deemed appropriate. On 15 February, during a webinar conducted by the Regional Office, representatives of Member
States were notified about the surveys and provided with instructions on how to complete them. The data collection period spanned 15 February–14 April 2023 with a couple of late submissions.

Out of the 53 Member States invited to participate in the survey, a response was received from 41: a response rate of approximately 77%. The database compiled for analysis comprised a total of 43 responses, as two countries had submitted two surveys each. The 41 Member States participating in the survey were Albania, Andorra, Armenia (two responses), Austria, Belarus, Belgium, Bosnia and Herzegovina, Croatia, Cyprus, Czechia, Estonia, Finland, France, Georgia, Germany, Greece, Hungary, Iceland, Ireland, Israel, Kazakhstan, Kyrgyzstan (two responses), Latvia, Lithuania, Luxembourg, Malta, Montenegro, Netherlands (Kingdom of the), North Macedonia, Norway, Poland, Portugal, Republic of Moldova, Russian Federation, San Marino, Serbia, Slovakia, Slovenia, Spain, Sweden and the United Kingdom.

**Interviews**

Considering that 18 out of 53 Member States had uploaded an NP or equivalent documents as of February 2023, it was determined that a minimum representative number of key informant interviews should be set at 10% of the total Member States within the WHO European Region. Consequently, a minimum of six interviews was considered necessary. These interviews took place in March and April 2023, utilizing telephones or virtual platforms. A structured set of guiding questions was employed during these in-depth interviews in English or Russian languages.

To ensure a comprehensive and diverse range of insights into the various national contexts of NP development across the European Region, 12 Member States were identified as potential interview partners. Due to limited capacity, nine Member States were invited to participate in the interviews.

Invitations were sent to country focal points in February 2023. Subsequently, interviews were conducted with the relevant key informants involved in environment and health matters in seven Member States during the months of March and April 2023.
The WHO Regional Office for Europe

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

Member States
Albania Lithuania
Andorra Luxembourg
Armenia Malta
Austria Monaco
Azerbaijan Montenegro
Belarus Netherlands (Kingdom of the)
Belgium North Macedonia
Bosnia and Herzegovina Norway
Bulgaria Poland
Croatia Portugal
Cyprus Republic of Moldova
Czechia Romania
Denmark Russian Federation
Estonia San Marino
Finland Serbia
France Slovakia
Georgia Slovenia
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Greece Sweden
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