



## Health and Environment Alliance

### Written Submission on stakeholder consultation:

### “Final assessment of the 6<sup>th</sup> Community Environment Action Programme”

Brussels, 8 April 2011

## General Questions

### **1. The four priority areas of the 6th Environment Action Programme (6thEAP) are climate change, environment and health, nature and biodiversity, natural resources and waste. What positive environmental impacts can be identified in each of these four priority areas over the last 9 years (2002-2010)?**

In this written submission, HEAL will concentrate on the environment and health (E&H) aspects of the 6 EAP.

HEAL is an alliance of over 65 organisations, and represents many partners in the health and medical community. As we have seen in the past five years, the health constituency is increasingly becoming vocal and supportive on stronger environmental laws to reduce pollution and ill health.

They have issued strong position statements on the importance of E&H issues such as chemicals, climate and air quality to name a few. European wide patient groups, including those suffering from cancer or asthma, are also advocating for continued EU focus on E&H.

Overall, having a clear focus on environment and health in the 6EAP, which was the case for the first time, has helped immensely that E&H issues, including the need to protect vulnerable groups, gained more prominence on the EU agenda and more political attention. In parallel, it has responded to a public concern across Europe on how environmental pollution is negatively impacting human health, by giving more visibility and providing concrete links between environmental policies and health status. We have witnessed this increased political attention and political momentum especially in the process leading up to the adoption of the 6EAP and the first years of its implementation.

A dedicated priority area on E&H within the 6EAP created the impetus and tools to develop an EU SCALE strategy and the first ever EU Action Plan on Environment and Health, as well as contribute to the development a comprehensive children’s environment and health action plan in Europe in 2004 as part of the Budapest Ministerial commitments, the first of its kind in the world.

The clear focus on E&H in the 6EAP was a driving force for the EU SCALE strategy and the EU Environment and Health Action Plan EHAP (2004-2010). The first EHAP added immense value in ensuring more targeted research on environmental impacts and health outcomes with numerous EU funded research projects on outdoor and indoor air pollution, environment and chronic diseases or noise. It also helped to develop the methodologies needed to understand and quantify health outcomes of environmental pollution, and helped to facilitate coordination among different DGs and within national environment and health ministries. Lastly, by providing an EU framework to discuss and develop environment and health activities, it helped the wide range of civil society groups (such as HEAL and its members) to increase education, awareness raising and advocacy on just how crucial environmental objectives were to human health outcomes, and provided a more integrated and holistic conception of sustainable development.

This helped the general acceptance of the 6EAP, but more specifically the objective of “better understanding threats to environment and health”, as we have seen a stimulus to E&H research in FP7 overall (so far 256 million EUR EU research funding for E&H under FP7) which is adding to our understanding of the issues and the impacts on citizens.



Thus the 6 EAP with its clear focus on E&H has helped immensely on driving the policy agenda forward, and having both the 6EAP and EHAP has provided for important synergies for environment and health research and political action.

Although recently the general shift has been towards EU economic and budget policies by EU decision makers, a recent Eurobarometer from 2010 shows that European citizens remain as concerned as ever about environment and health issues and EU action. Moreover, an increasing solid body of environmental health science is highlighting that challenges remain in the way we regulate pollution, and how early life exposure can increase the risk of the most debilitating diseases later in life such as cancer, Parkinsons disease and even obesity.

Fifty two environment and health ministers from the WHO European region met just a year ago and adopted the Parma Declaration on E&H to provide a roadmap for decision-makers action, that is to implement the Parma commitments with ambitious objectives and targets.

Given the situation outlined above, there is a clear necessity to have a 7 EAP as well as a 2<sup>nd</sup> EHAP.

## **2. In what ways has the 6thEAP contributed to the achievement of these positive environmental impacts? What in your view were the notable successes of the 6th EAP in that respect?**

As noted above, the successes are to have put E&H on the strategic and overall EU agenda, and spelling out concrete ways to reduce the environmental burden of disease with the EAP goals and through the thematic strategies, for example on pesticides and air pollution.

The Thematic strategy on pesticides with the legislation on pesticides authorization and the directive on sustainable use have great potential for providing better protection of human health, especially for vulnerable groups. However, full implementation remains a key issue.

This is also true for REACH, which is a milestone in EU chemicals policy, but also characterized by many compromises, and slow implementation. We need to advance swifter on the goal of phasing out hazardous chemicals and on substitution, especially given the increased environment and health science on the potential harmful effects of chemicals cocktails and endocrine disruptors.

## **3. In which areas have there been less progress than expected in the 6thEAP and what are the likely reasons for this lack of progress?**

The success of the 6EAP also depends on the political willingness for a strong implementation in order to reach the aim of “providing an environment where the level of pollution does not give rise to harmful effects on human health and the environment.”

There are certainly areas where progress has been less than expected:

A lack of progress can be seen in reducing outdoor air pollution, where the level of ambition was already reduced in the Thematic Strategy on air pollution, and we are still far back from reaching the 6EAP goal. This should not mean that the level of ambition is reduced, as the EU limit values are still above WHO recommended limits, but rather that renewed efforts are being carried out to assist EU Member States in reaching ambient air quality limits. The revision of the National Emissions Ceilings Directive is also overdue.



We would have also liked to see more exchange of good practices between EU member states, as they do not sufficiently exchange information on instruments and strategic approaches that could be drivers for change and would result in a substantial gain in time, human and financial resources spend by each member state for developing and implementing new methods and approaches in sectors with a high impact on the environment, such as energy production and consumption, public transport etc.

We can especially not be satisfied with the progress made in ensuring health and quality of life in urban environments, where health impacts because of air pollution, chemicals/pesticides or noise pollution are high, and where impacts of climate change are of specific concern (see the recent research that has come out for example the WHO assessment of burden of disease of environmental noise, the Aphekom findings etc.) Therefore we view critically the success of the Thematic Strategy on Urban Environment, which unfortunately has been quietly forgotten. The Thematic strategy was an excellent opportunity to set out an integrated approach to tackling a range of related E&H issues as they affect the most vulnerable in society, and this opportunity was not seized. We know that 75% of EU citizens live in cities, the number is expected to rise, so there is an urgent need to address health and quality of life in cities.

This reflects overall a lack of progress in integrated thinking / multidisciplinary approaches. Single discipline matters do seem to have progressed (e.g. pesticides) but we haven't really made any progress on integrating concerns for example with sustainable agriculture, chemical use and diet, or physical activity, sustainable transport and air quality / noise. It is also notable that certain rules put in place for legislation in one area such as pesticides may not be the same for a similar category of products such as biocides.

Because of these and other continued and emerging challenges it is essential to have a renewed commitment with a 7 EAP addressing and acting on the E&H challenges.

#### **4. In your view are there gaps in environment policy that are not addressed by the 6thEAP?**

The 6EAP presents the state of information on environment and health links at the time. In the meantime and because of the 6EAP and EHAP, we have seen an immense increase in the science base, which has in turn supported policy making and highlighted gaps in political action.

This relates especially to the area of chemicals and pesticides, where scientific evidence has increased on the harmful effects to health of chemicals mixtures. EU policy-makers have started to recognize the need to include chemicals mixtures in risk assessment and authorization, but progress is not fast enough. Chemicals mixtures should be a priority for a 7 EAP.

Indoor air pollution was only briefly addressed under the E&H section, and was followed up in EHAP and the EU Public Health Programme. As the SOER 2010 mentions it is a somewhat neglected area considering the amount of time Europeans spend indoors. This should be a focus of a 7 EAP.

We also have seen only recently heightened efforts on establishing an EU-wide Human biomonitoring system as a way to determine exposure to hazardous chemicals and to act on reducing exposure. As shown in the US, cross population of HBM can also facilitate the development of health impact assessments of certain chemicals and in turn provide more realistic economic data. HBM is one of the successes of EHAP, and we need to ensure that future funding is secured.

An E&H focus in the 7EAP should also make a clear link to socio-economic factors such as health



inequalities and socio-economic benefits of health supporting environments: for example changing our ways of transport will benefit climate change mitigation policies, air quality and the general health of the population.

## **5. What lessons can be learned from the 6thEAP?**

All EU environment action programs have provided a longer term orientation on objectives and where the EU wants to go in terms of environmental policy.

We need to have such an “overarching vision” in order to bring together the scope of environmental challenges we are facing today and thinking about the right policy answers.

## **6. Taking into account the lessons learned from the 6thEAP what in your view are the emerging environmental policy challenges?**

As the SOER 2010 pointed out, for environment and health progress has been made, but many challenges remain. Chronic disease such as cancer, asthma+allergies, respiratory diseases, cardiovascular diseases continue to be on the rise in Europe, and evidence on role that the environment plays as a cause is increasing and consolidating. Especially worrying are the findings on critical windows of exposure, that exposure to environmental pollution can have effects on illnesses much later in life.

We need to have a broad focus on prevention and precaution with a 7 EAP but also a next EHAP to drive forward E&H research and policy action with the goal of reducing the environmental burden of disease.

The list of challenges is long:

- chemicals mixtures,
- indoor air quality (ensuring especially that energy and resource efficient buildings are also health-friendly),
- ensuring good urban environment
- better calculation of economic gains from reducing ill health related to unsafe, unhealthy, environments
- Climate change and changing environment, and potential for re-emergence / new zoonotic diseases
- Increased mobility of EU citizens and potential disease transmission
- Changing demographics of EU population (and strategies such as Healthy Ageing which do not yet consider environmental factors)
- Degradation of ecosystem services

## **Specific Questions**

### **7. The 6thEAP had a number of characteristics on which it would be useful to have your views:**

- i. Considering how the objectives and priority actions are formulated in the 6thEAP, do you consider them, including the 156 actions, to be too detailed or not detailed enough?
- ii. Was the ten-year timeline of the 6thEAP appropriate? Was it the right balance between providing a degree of certainty for future policy development, the need to keep momentum in the programme and the time required for adoption of proposals, transposition into national legislation and implementation?



- iii. Was the approach of developing thematic strategies before proposing legislative initiatives helpful or not?
- iv. Are there any other characteristics of the 6thEAP which you regard as particularly helpful or unhelpful?

The environment and health links are complex phenomena, so it is important to grasp all aspects of it with different actions. 10 years was the right timeframe to achieve results.

**8. Did the 6thEAP contribute to improving implementation of EU environment legislation? Could that contribution have been made more effective? How (e.g. by the inclusion of additional implementation targets and indicators, etc) ?**

Implementation depends on political will and funding, which is influenced by an understanding of the issues. Having a 6 EAP has helped to keep the environmental momentum for EU policy in general; more specifically having the clear focus on E&H has served to increase awareness. But implementation remains key and should be tied better to other EU policies such as Cohesion policy and EU financing schemes through for example EIB.

**9. Did the 6thEAP improve coherence within environmental policy and between environment policy and other policy areas? Was the 6thEAP able to boost integration of environmental concerns into other policy areas and, if so, how?**

Yes, the EAP helped to increase cohesion with for example the EU public health programme, but integration and policy coherence remains a key challenge.

**10. How far has the 6thEAP advanced the EU's international environmental agenda? What do you consider to be the notable successes, disappointments and the reasons why?**

No comments on this question.