

THE EUROPEAN EXAMPLE

What Have We Learned about Health and the Environment?

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Over the past decade, an important new debate on health protection through environmental action has been created and several significant reforms in European law introduced. Although changes have not necessarily been commensurate with the urgency of the problem, or fully responsive to the scale of the emerging research on the impacts to our health, progress has nevertheless been made.

The health community, including medical professionals, health-affected groups, and researchers, has proved vital in shaping the strategic and legislative developments and in engaging the public on how pollution is intrinsically linked to human health. The energy of these groups coalesced into a new network in 2003, which is now known as the Health and Environment Alliance (HEAL). HEAL has been inspired by and collaborates with the U.S.-based Collaborative on Health and the Environment and its extensive evidence-based resources on diseases and environmental risk factors.

Health and Environment Strategies

Ten years ago, policy makers, doctors, and scientists were increasingly concerned about the special vulnerability of children to environmental hazards. The World Health Organization in Europe, which brings together fifty-three countries, had been running an environment and health process for more than ten years. But 2002 marked a turning point, with a landmark publication reviewing the scientific basis for linking environmental causes to key children's health problems. Its findings had wide appeal and it quickly led to the groundbreaking Children's Environmental and Health Action Plan for Europe (CEHAPE).

This political attention also spread to the European Union, led by the E.U. Commissioner for the Environment at the time, Margot Wallstrom, who helped articulate a new rationale for precautionary interventions to protect human health. The E.U. formulated a health and environment strategy in 2003, and an associated Action Plan put a special focus on vulnerable groups and on identifying emerging environmental health threats, such as endocrine disrupters and priority diseases.

Chemicals and Pesticides Legislation

The framing of the debate and heightened awareness were reflected in several key pieces of E.U. law, including REACH, which established the registration, evaluation, authorization, and restriction of chemical substances. Medical experts and the health community played a key role in bringing the health arguments in favour of REACH to the policy makers

and in highlighting the public health benefits of the new legislation. In 2004, hundreds of individuals and networks, including the Standing Committee of Medical Doctors (CPME), representing more than two million doctors across Europe, signed the Paris Appeal on the role of chemical pollutants in damaging public health.

The new law radically changed chemicals governance, establishing new principles of mandatory registration, health and environmental data submission, and company responsibility for chemical safety. Certain hazardous chemicals must now obtain authorization to remain on the market. Although inadequate in its implementation and weak on endocrine-disrupting chemicals (EDCs), REACH aims to eventually phase out the most harmful chemicals on the European market and has set a high benchmark for chemicals legislation reform around the world.

At the national level, medical and health groups are continuing to raise awareness of the shortcomings in E.U. legislation on EDCs. Doctors in Denmark and France have been important in achieving national bans on the EDC bisphenol A in certain products, which catalyzed an E.U.-wide ban in baby bottles.

A second important reform involved updating the existing pesticides law to reflect the science on health and environment risks. Again, the health community's role in bringing forward the evidence to E.U. and national decision makers proved crucial, for example through scientific consensus statements. The new law represents a significant step forward for public health protection because the basis on which pesticides are now judged has been changed: from a risk approach to one based on "hazard" (or intrinsic properties). This means certain harmful pesticides—specifically those that are carcinogenic, mutagenic, and toxic to reproduction, as well as endocrine disruptors—will now be banned.

Putting Health into the Climate Debate

The voice of medical professionals and health groups has changed the policy debate on climate change, not only in the E.U. but also at global level. While climate change is relatively well accepted in Europe, the necessary political measures are not. The health community has therefore worked with scientists and economists to find strategic arguments. For example, HEAL has highlighted how moving to a 30 percent reduction target on carbon emissions in the E.U. (to mitigate climate change) would bring up to 30 billion Euros per year by 2020 in public health benefits. These benefits occur because policies to reduce carbon emissions also reduce pollutants in outdoor air. A growing understanding of these so-called "health

co-benefits” has contributed to the climate debate by bringing arguments in terms of economic savings and also in how climate action can directly improve the lives of people suffering from asthma and other respiratory diseases.

Clearly, in the past ten years in Europe, the environmental health movement has successfully advanced the debates and legislative changes. This has been achieved because scientists, doctors, and health-affected and community groups have taken a scientific dialogue to politicians in a format that works for them.

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