Acknowledgements

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The views expressed in this document do not necessarily reflect the official views of the EU institutions.
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2006 was the year in which HEAL forged new global partnerships and launched its first major advocacy campaign. As an alliance of more than 50 groups working to improve environmental health collectively, HEAL and its members worked at both national and EU level for change. We delivered an array of educational, scientific and advocacy resources to highlight the health impacts and prevention opportunities of current EU policies on mercury, air pollution, pesticides and industrial chemicals.

As environmental health challenges increasingly require global solutions, HEAL’s accreditation within the United Nations Environment Programme framework paved the way for greater sharing and pooling of resources. We also consolidated a transatlantic partnership with a US coalition called the Collaborative on Health and the Environment (CHE), which has a wealth of expertise in the science behind much needed preventive health policy development worldwide. HEAL also joined the International POPS Elimination Network (IPEN) this year. Our aim is to bolster efforts towards a Toxics Free World and to help ensure emerging science on how chemicals can cause disease is used to promote and support precautionary policies.

Our global dimension also took the form of working with groups in Latin America and Asia in our first advocacy campaign. Groups in India, Argentina and the Philippines took part in our “Stay Healthy, Stop Mercury” promotion. HEAL chose to focus on mercury because, in its chemical form, it represents an environmental contaminant for which there is strong evidence of harm to human health. Encouragingly, the EU has recognised this and is poised to show strong global leadership on reducing mercury use.

Even very low doses of exposure to mercury, for example through consumption of certain fish by a pregnant woman, can adversely affect the developing brain of the foetus. The main messages of our campaign were for women – on what they can do to protect themselves, and for policy makers - on what changes are needed. By involving more than 250 women in community research in 21 countries, and then launching the campaign results in Brussels and via our network contacts, the findings were taken up by key EU and national policy makers in presentations and other documents and by the television, press and electronic media throughout Europe.
The campaign was also important because it created a coalition with Health Care Without Harm Europe and the Zero Mercury Campaign, which has continued to strengthen in response to ongoing EU policy developments that have emerged since.

The year 2006 saw us change our name from the EPHA Environment Network (EEN) to the Health & Environment Alliance, which is more immediately self-explanatory and understandable.

None of this work would have been possible without the expertise and contribution of our diverse and committed member organisations and Executive Committee. We would like to take this opportunity to thank all of you for your important efforts.

We hope that in reading this review of activities, you will think of new ways in which your organisation can work more closely with HEAL.

Génon K. Jensen
Executive Director
I. Mission and goals

Our mission at the Health and Environment Alliance (HEAL) is to improve the health and well-being of European people by protecting the environment in which they live. We advocate for public policies that promote a cleaner and safer environment by bringing more health expertise to the EU environmental policy-making process.

An overall goal is to lay the groundwork for needed legislative and policy reform in recognition of the growing body of scientific evidence of the impact of the environment on our health.

This is achieved by fostering an understanding of the environmental contributors to the onset and worsening of health conditions that people confront. Particular emphasis is given to vulnerable groups, such as children, women of child-bearing age and the economically and socially disadvantaged.

As a result of its advocacy, policy monitoring, information and media activities, HEAL has become a leading voice and trusted resource centre on EU-level environment and health policy, and is extending its outreach globally.

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“In prevention is less costly than cure”

European Voice, 26 January 2006

In an article about how EU governments could reduce healthcare bills by investing in preventative policies, Génon Jensen said that although there was no question that lifestyle changes could cut healthcare bills, “they can also be reduced by policy changes that make our environments safer.”
II. Key events

Health vs Environment Quiz: Getting environment and health sectors to work together

To manifest the linkages between environmental exposures and health problems and increase sectoral cooperation, HEAL organised a quiz “Health versus Environment” that gathered health and environment experts on the occasion of HEAL’s Annual General Assembly in June 2006. The event, which was opened by European Commissioner for the Environment, Stavros Dimas, attracted a large audience and created an animated atmosphere.

The two teams, one of health experts and the other of environment experts, comprised an MEP, an NGO representative, a journalist, and a Commission official.

The Health Team: MEP Dorette Corbey; Lara Garrido-Herrero, Secretary General European Public Health Alliance; Sara Lewis, Food Chemicals News; and, Michael Huebel, DG SANCO.

The Environment Team: MEP Frédérique Ries; Jorgo Riss, Director Greenpeace Europe; Paul Kaye, ENDS Europe Daily; and Chantal Bruetschy, DG Environment, European Commission
The quiz questions underscored the urgent need for more precaution in policy-making across all sectors. Many scientists now believe that environmental exposures at least partly explain the recent rising trends in diseases such as cancer, allergies, reproductive disorders, asthma and other respiratory problems, especially among children.

**Quiz question**

The World Health Organization (WHO) estimates the total proportion of deaths due to environmental-related factors in the 52 countries of the WHO European region as:

- 10%?
- 15-19%?
- 25%?
- 33%?

*Answer at end of the report.*

To take the quiz, visit our website at: [http://www.env-health.org/a/2181](http://www.env-health.org/a/2181)
Using emerging science for better environmental health protection

The challenge of translating the growing body of environmental health science into more protective public policies was the key message of the congress “Environment and Sustainable Health: An International Assessment” that HEAL co-organised with the Association for Research and Treatments Against Cancer (ARTAC) and US-based Collaborative on Health and the Environment (CHE). It gathered over 500 scientists, doctors and representatives of health and environment groups at the UNESCO headquarters on 9 November 2006 in Paris.

Representatives from the World Medical Association and the Standing Committee of European Doctors opened the conference highlighting doctors’ increasing concerns about the impact of the environment on people’s health. A comprehensive roadmap, called the “Paris Appeal Memorandum II”, was launched which outlines over 150 recommendations and measures for making progress in environmental health, including many related to reducing the incidence of cancer, infertility, birth defects and allergies.

The 2004 Paris Appeal statement has been signed by key international scientists as well as the Standing Committee of European Doctors which represents all medical governing bodies and organisations of the then 25 members of the EU. It underlines the cause-and-effect relationship between chemical pollution and diseases.

You can also sign the Paris II Appeal at:
http://www.artac.info/static.php?op=MemorandumParisAppeal.txt&npds=1

Génon Jensen, HEAL’s Executive Director chairing the session on Children’s Environmental Health. Also pictured (far right) is HEAL Executive Board member Sascha Gabizon from Women in Europe for a Common Future (WECF).
Consolidating a transatlantic partnership

On 10 November 2006, the day after the Paris congress, HEAL and the Collaborative on Health and the Environment (CHE) held a strategy meeting with 15 other non-governmental actors working on environment and health at the European and international level.

HEAL’s aim was to gain insights into how the two organisations could share more effectively what science is indicating are the current needs for preventive health policy in Europe. The meeting included a session on the tools and strategies for communicating environmental health science led by Pete Myers, the founder of Environmental Health News, and co-author of Our Stolen Future.

CHE engages in high quality science-based dialogue with over 2,800 partners in 48 US states and 40 countries. This dialogue is a powerful agent of social change for health professionals, scientists, government officials, patients’ groups and health-affected communities. Over the past five years, CHE has made a major contribution to transforming scientific dialogue on the impact of the environment on health in several fields.

Understanding human biomonitoring

The process of requesting groups of people to give samples of human urine, serum, saliva, blood or other tissue and having them analysed for the presence of certain chemicals is known as human biomonitoring. It can help determine human exposure and which chemicals a given person has absorbed and accumulated in the body. Repeated over time, it can be used to check whether policy measures aimed at reducing exposure are indeed working effectively. Bio monitoring can also be used to identify possible cause–effect relationships between environmental exposures and health effects.

In December 2006, HEAL worked closely with DG Environment and the European Centre for Ecotoxicology & Toxicology of Chemicals (ECETOC) in the organisation of a human biomonitoring workshop on “Ethics and data interpretation”. The event provided a platform for dialogue between policy-makers, NGOs, industry, academia and other stakeholders during a period when human bio-monitoring is being increasingly used to support policy development. HEAL recommended that methylmercury, brominated flame retardants and phthalates should be among the first substances to be bio-monitored in EU population studies.
III. Campaigns: Protecting children and women

*Stay Healthy, Stop Mercury*

Numerous research studies have shown how large increases in environmental contaminants are permeating everything from air and water to household products. Recent findings show that even exposure to low doses of some contaminants can result in a build up in a pregnant mother that can cross the placenta, and be transmitted to the foetus. Mercury, in its chemical form - methylmercury, is one of these toxics.

The EU Extended Impact Assessment states that anywhere from 3 to 15 million people in Europe have mercury levels around the recommended limit and a percentage have levels ten times as high, at which there are clear neuro-developmental effects on an unborn child.

HEAL’s joint campaign with partner organisation, Health Care Without Harm, is entitled “Stay Healthy, Stop Mercury”. It is part of civil society efforts to ban mercury but has a special focus on the health impact of mercury and mercury in healthcare globally. It aims to raise awareness of the health threats and the solutions needed to reduce exposure.

Because of the special health risks associated with pre-natal exposure, HEAL’s campaign focused on women of childbearing age. The survey involved the testing of hair samples of 250 women in Europe and beyond. The aim was to compare the results of a mini bio-monitoring exercise with the estimates of the EU assessment showing that safety limits were being exceeded, and underscore the need for an EU wide humanbiomonitoring system, and stricter EU and global regulation.

*MEPs Frédérique Ries and Åsa Westlund at the launch of the “Halting the Child Brain Drain: Why we need to tackle mercury contamination” campaign. They themselves had taken part in the hair sampling and provided testimony on their perceptions.*
The campaign results showed that more than one in six women has a level of mercury above the protective limit or “reference dose” of the US National Research Council. The findings were used to raise awareness about the issue with the women who took part, with politicians and policy makers in the 21 countries involved, and at the EU level with the help of extensive media coverage.

The campaign was timed to run parallel with “to the adoption of the” legislative package by the European Parliament to ban the manufacture, use and marketing of all types of mercury-containing medical devices within Europe. The information on European human exposure to mercury was widely publicised raising awareness of current health and societal hazards and of the need to protect sensitive groups.

The campaign report “Halting the Child Brain Drain: Why we need to tackle mercury contamination” was launched in the European Parliament with MEPs, including Frédérique Ries, Åsa Westlund, and Jana Hybaškova, Dr Gavin ten Tusscher (paediatrician), campaign partners, NGOs and journalists.

The report’s executive summary and press release were translated into 10 languages - Spanish, French, Russian, Swedish, Polish, Armenian, Bulgarian, Croatian, Slovak, and Czech.

The campaign report, a series of fact sheets (see Publications) and other materials, including translations are all downloadable at: http://www.env-health.org/stopmercury

**Getting mercury out of products**

At HEAL’s mercury campaign launch in the European Parliament, which called for a total ban on the use of mercury, Génon Jensen, Executive Director, was quoted in a story filed by Associated Press, the biggest news agency in the world. She said: “Even if we stopped all mercury production and spills and emissions today, our global food supply would still be contaminated for years to come.” The story went out on the day of the launch and was picked up by newspapers and magazines around the world including the International Herald Tribune, published in Paris, and Business Week in the US.
Making sure REACH reaches people’s health

It was a discouraging year for environmental health advocates watching development on the EU chemical safety legislation, known as REACH. The Council Common Position taken in June 2006 failed to agree on the substitution of hazardous chemicals with safer alternatives whenever possible. Instead only chemicals which are persistent and bio-accumulative must be substituted whenever safer alternatives are available. As a result, carcinogens, chemicals that are toxic to reproduction (e.g. the phthalate, DEHP), and hormone-disrupting substances (e.g. bisphenol A) may remain on the market even if safer alternatives exist. Another concern is that the Council did not tighten controls to ensure full chemical safety testing. For example, REACH does not currently require that all chemicals are tested for reproductive and developmental toxicity.

HEAL regularly voiced its reactions to both negative developments and some more positive moves, such as the banning of 22 hair dyes, for which industry had not submitted safety files, in July 2006. It organised a discussion on EU policy responses with the help of the milestone article in “The Lancet”

1 Developmental Neurotoxicity of Industrial Chemicals: A Silent Pandemic” at an event in the European Parliament on 7 March 2007, hosted by Avril Doyle MEP. This ground-breaking research was one of the first to provide conclusive evidence that low-dose environmental exposure to chemicals was harming the foetus in the womb - with significant developmental effects on the child later in life. The article called for curbs on the use of 200 chemicals to protect the unborn child. Guest speakers were Prof. Philippe Grandjean, author of the Lancet article, MD, PhD, Department of Environmental Health, Harvard School of Public Health and Dr Roberto Bertollini, Director of WHO Europe Special Programme on Health and Environment.

Irish MEP Avril Doyle hosts luncheon with WHO Director and Prof Philippe Grandjean

“Danger: chemical hazards”,
The Guardian, UK, 9 November 2006

Just after the publication in The Lancet of an article calling for curbs on the use of 200 chemicals to protect the unborn child, Génon Jensen, Executive Director, spoke to the health editor of a leading UK quality newspaper. She was at the time taking part in the Paris Appeal II conference, which was co-organised by HEAL (see above). Many of the scientists at the meeting were providing new evidence of the dangers to health of exposure to low doses of chemicals in the environment.

“We’re not talking about the impacts you can see right now but what you may see in 20 or 30 years’ time...The argument is (about) what is the appropriate political and precautionary public health response.”
Chemical safety lowers health costs

During 2006, ENDS Europe Daily (22 May) mentioned a HEAL report by US researchers showing that deca-BDE should be banned by the EU; Peopleandplanet.net (21 February) quoted HEAL’s Policy Officer Christian Farrar-Hockley, on the “Big health savings that could be made from EU chemical laws”.

Linking chemicals and disease - The Chemicals Health Monitor:

http://www.chemicalshealthmonitor.org/

In 2006, HEAL worked with new partners to identify resources to build on and expand public health expertise in chemicals legislation. This resulted in a brand new project, called the Chemicals Health Monitor, which was launched at the beginning of 2007.

Chemicals Health Monitor aims to improve public health by ensuring that key scientific evidence on the links between chemicals and ill-health are translated into policy as quickly as possible. The strategy involves fostering dialogue, sharing perspectives and promoting greater collaboration between policy makers and governments on the one hand and scientific researchers, medical and health professionals, patient groups, environmental organizations and the public on the other.

The project will highlight the compelling scientific basis for added controls over certain chemicals and encourage EU policies that are precautionary and participatory, especially with regard to the implementation of REACH and the substitution of hazardous chemicals with safer ones.
Health as a driver for safer pesticide use

During 2006, new scientific understanding of the health impact of pesticides emerged. It emphasised the need for not only more precautionary policy making but also for a review of current risk assessment processes in the European Union. Together with member organisation Pesticides Action Network Europe (PAN Europe), HEAL addressed the inadequacies of the current risk assessment for pesticides to protect human health, in particular that of vulnerable groups – pregnant women, foetuses and children - at a European Parliamentary roundtable debate.

At the meeting, HEAL and PAN Europe highlighted the emerging science on the health impact of pesticides and pesticide residues in food, especially during pregnancy or early childhood. Our call for more attention to be given to this concern was supported by MEPs Hiltrud Breyer, Erna Hennicot Schoepges, Dorette Corbey, Roberto Musacchio, Dr. Roberto Bertollini, WHO, Prof. Philippe Grandjean, Technical University of Denmark, and stakeholders. Presentations covered potential links between pesticide exposure and neurotoxicity to children’s developing brain as well as acute and chronic illnesses including allergies, asthma, several types of cancer and Parkinson’s disease.

The meeting urged MEPs to “cut back on pesticides for healthier lives”. A briefing and a poster supported these demands. They expose the failure of current legislation to address the health effects of pesticides and gave offer concrete policy recommendations on how to ensure the highest level of health protection, especially for vulnerable groups.

“You only have one chance to develop a brain” says Prof. Philippe Grandjean shown here presenting the latest scientific evidence on how pesticide exposure can affect neurodevelopment in the womb.
The briefing emphasises the special sensitivity of children and defines the elements needed for effective application of the precautionary principle.

Pesticides and children

An article in the European Voice (23 November) highlighted a European Commission survey on pesticides in food. It showed that 70% of Europeans were worried about pesticides in food. HEAL’s Executive Director Génon Jensen had an opportunity to point to research linking chemicals to foetal brain damage.

“Exposure to pesticides for babies and unborn children could increase the risk of chronic adult disorders, including cancer. If evidence suggests a possible link between a pesticide and damage to the foetus, but the link cannot be absolutely proved, she says, a precautionary approach is essential and the pesticide should come off the market.”
Clean air makes a big difference to our health

HEAL worked closely with key partners in the public health community to gain a hearing during important phases of air quality regulation. These partners include European Public Health Alliance, European Respiratory Society, International Society of Doctors for the Environment, and European Federation of Allergy & Airway Diseases Patients Association. Efforts have been made to raise awareness of WHO air quality guidelines and to increase understanding for the need to oppose renegotiation of existing limit values to protect vulnerable groups such as children, older people and those suffering from allergies, asthma and respiratory diseases. Recommendations are outlined in a position paper developed by the European Respiratory Society in April 2006 and in a HEAL policy paper in May 2006.

HEAL worked with member organisation, the European Lung Foundation to produce a patient leaflet on respiratory disease and environmental factors and an interactive fact sheet on outdoor air quality for 5-11 year olds, in English, French, Spanish, German, Italian, Greek, Polish and Russian.
Making the case for environmental justice

Living in a healthy environment is a fundamental human right. The poor and socially disadvantaged are the hardest hit by environmental degradation and injustice.

Case studies of environmental injustice in Central and Eastern Europe are described in a HEAL project undertaken with member organisation - the Centre for Environmental Policy and Law at the Central European University in Budapest, Hungary. The report “Making the Case for Environmental Justice in Central and Eastern Europe” describes the appalling environmental conditions in which some Roma (formerly known as gypsies) and displaced communities live, work, and play. Based on scientific research, the report argues that the best way to improve the health of adults and children in these communities is to integrate environmental, health and human rights and promote them.

Environmental Justice: Listening to women and children

“While poor and minority populations suffer disproportionate exposure to environmental harms, women and children within these groups suffer most,” says editor Dr Tamara Steger, Central European University, Centre for Environmental Policy and Law (CEPL).

The report was accompanied by a brochure “Environmental Justice: Listening to Women and Children”, which links the findings to the Children’s Environment and Health Action Plan for Europe (CEHAPE) and provides policy recommendations. Both publications are downloadable at: http://www.env-health.org/r/128
IV. Improving national capacity for advocacy

The Health & Environment Alliance’s annual capacity-building seminars focus on non-governmental organisations from Central and Eastern Europe. Building capacity to monitor and implement the existing EU policy and law among national, regional and local NGOs and community groups has been key to our mission of improving environment and health in the EU.

Capacity building workshop on environment and health
Croatia, March 2006

Thirty local participants took part in sessions on monitoring the implementation of the existing EU law and policy; advocacy; and improving media relations and skills for better advocacy. Part of the aim was skill-sharing among the organisations taking part to stimulate cooperation and the formation of local coalitions.

NGO advocacy training for Polish and Hungarian NGOs
Brussels, February 2007

Our workshop in Brussels was aimed at providing NGOs from Poland and Hungary with an overview of the EU’s role and activities on environment and health policies, and capacity building on how they could increase participation in EU environment and health policy-making. The seminar also created an opportunity for feedback from the 15 organisations on the NGO environment and health priorities in Poland and Hungary. This session laid the groundwork for further discussion about the potential for coalition partnership building in the future.

The training workshop was followed the next day by a preparatory meeting for the mid-term Pan-European Intergovernmental Conference on Environment and Health (Vienna, 13-15 June 2007). This meeting for NGOs was hosted by the Belgian Federal Public Service for Health, Food Chain Safety and Environment.

V. Policy input

In 2006, HEAL produced and disseminated 43 letters, positions papers and model letters, 142 information alerts for members, attended over 55 meetings and conferences, and put out 22 press releases.

Policy Development & Consultation
• Relevant scientific evidence linked to health-focused policy recommendations.
• Monitoring of all stages of the EU policy development cycle.
• Views of member organisations brought to decision makers at crucial stages of the policy-making process.

Advocacy
• Raising the awareness of policy makers on the impact on health of different environmental factors, particularly the effects on vulnerable groups – children and women of child-bearing age.
• Engaging in issue-specific coalitions to more effectively address the links between environmental exposures and health problems.

• Catalysing initiatives around new scientific findings to promote policy that better protects children’s health.

• Stimulating greater involvement of health professionals and other key constituencies in the policy-making process.

• Encouraging accurate media coverage relating to HEAL policy and activities.

**Representation**

HEAL represented its membership as an advisory expert to the following EU and WHO committees and meetings.


› EU Indoor Air Quality Expert Working Group

› European Environment and Health Committee (WHO framework): [http://www.euro.who.int/eehc](http://www.euro.who.int/eehc)

**Raising Awareness**

• Publicising concerns relating to policy issues in HEAL’s monthly newsletter, on the website, to working group list serves, and in publications, press releases, briefings, and other educational tools.

• Informing the membership of the latest EU policy developments through the virtual working groups; electronic flashes, and the “members-only” section of the website.

• Disseminating information to new groups to widen key constituencies, such as patient organisations and consumer associations.

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**ENVIRONMENTAL HEALTH MYTHS**

*Pollutants' links with diseases 'underestimated'*

ENDS Daily, 29 November 2006

In several instances, HEAL worked with member and partner organisations to challenge misconceptions or inaccurate statements quoted in key European policy media. For example, HEAL was concerned when an article appeared (ENDS Daily 22 November) claiming that the EU had overplayed the “environment-health risks” in its SCALE action plan. Alerted to the article, HEAL member Women in Europe for a Common Future challenged a commission official about the statement during a meeting in Brussels.

The second article in the same daily (29 November) provided evidence from experts presenting at the WECF meeting that: “Existing risk assessments based on conventional science such as toxicology ‘dramatically underestimate’ the links between pollutants and diseases, including cancers and asthma.” It also said that: “During the (WECF) meeting a European commission official denied a report in ENDS Europe Daily that the commission had admitted to exaggerating environmental impacts on human health in the past.”
VI. Publications

Each year, HEAL produces a number of publications linked to its policy priorities. All can be downloaded at: http://www.env-health.org/r/128. Hard copies are also available on request.

Reports

• *Halting the Child Brain Drain: Why we need to tackle mercury contamination* (available in English and German, and Executive Summaries in several languages at http://www.env-health.org/stopmercury )
• *Making the Case for Environmental Justice in Central and Eastern Europe*

Briefings

• *Cut back on Pesticides for Healthier Live* (available in English and French)

Fact sheets

• *Mercury & Health* (available in English, Spanish, French and German)
• *Mercury & Fish Consumption* (available in English, Spanish, French and German)
• *Mercury & Health Care*
• *Mercury & Vaccines* (available in English, Spanish, French and German)
• *Managing small mercury spills*
• *Substituting mercury in sphygmomanometers* (available in English and Spanish)
• *Outdoor Air Pollution and the Lungs* (available in English, French, German, Russian, Italian, Polish, Spanish and Greek)
• *Dirty Air & your Lungs* (available in English, French, German, Russian, Italian, Polish, Spanish and Greek)

Brochures

• *Environmental Justice: Listening to Women and Children*
• *Outdoor Air Pollution and the Lungs*

Joint publications

• *Saving life “Ten simple steps to help halt biodiversity loss”*
• *A programme for the Sustainable Development of the European Union*
• *REACH: economic facts and figures*
• *Zero Mercury: key issues for the EU Strategy on Mercury*
• *Breast milk is best for babies, but it could be better*...
VII. Partnerships and coalitions

The Green 10

The Health & Environment Alliance is a member of the Green 10 group - a coalition of the ten leading environmental NGOs active at EU level. They coordinate joint responses and recommendations to EU decision makers. The combined membership of the Green 10 is more than 20 million people. Website: www.green10.org

The Civil Society Contact Group

The EU Civil Society Contact Group is an informal coalition which brings together seven of the largest European NGO platforms. HEAL has been a member of the Group through the Green 10 since 2004. The Group works for an accessible, inclusive and just civil dialogue. Website: http://www.act4europe.org

International POPs Elimination Network (IPEN)

The International POPs (Persistent Organic Pollutants) Elimination Network is a global network of public interest non-governmental organisations united in support of a common POPs elimination goal. HEAL joined the network in 2005. Website: http://www.ipen.org/

Collaborative on Health and Environment (CHE)

HEAL became the European partner of the Collaborative on Health and the Environment (CHE) in 2006. It has a wealth of scientific resources linking environmental exposure and disease built by a coalition of scientists, doctors, patients’ groups and others promoting the prevention of environmental ill health. A CHE-HEAL list serve is now available. Website: www.healthandenvironment.org

VIII. Organisation

History

In 2003, member organisations of the European Public Health Alliance founded the European Public Health Alliance Environment Network as an international non-governmental organisation with a remit to influence EU environmental policy. The organisation is based in Brussels.

In September 2006, the name was changed to Health & Environment Alliance (HEAL).
Governing Bodies

The governing bodies of HEAL are the Executive Committee and the General Assembly.

The General Assembly comprises the entire membership of the organisation, which determines and endorses the broad policy guidelines of the organisation. It meets once a year in Brussels. Elected for two years (renewable), the Executive Committee is responsible for setting priorities, financial management, overseeing the work of the Secretariat, and enlisting the support of the members.

The Executive Committee (2006 – 2008)

President: Marie-Christine Dewolf, Hygiène Publique en Hainaut, Belgium
Vice President: Tamara Steger, Center for Environmental Policy and Law, Hungary
Treasurer: Sascha Gabizon, Women in Europe for a Common Future, The Netherlands / Germany
Lara Garrido-Herrero, European Public Health Alliance, Belgium
Peter van den Hazel, International Network on Children’s Health, Environment and Safety, The Netherlands
Peter Ohnsorge, European Academy for Environmental Medicine, Germany
Carolyn Stephens, London School of Hygiene & Tropical Medicine, United Kingdom

The Secretariat

The Brussels Secretariat feeds policy information from the European scene to the membership, advising on interventions as political opportunities arise. It monitors policy developments, channels members’ input into draft legislation, and advocates key messages to the EU institutions through thematic campaigns.

Génon K. Jensen, Executive Director
Vessela Karloukovska, Director Programmes & Operations
Monica Guarinoni, Policy Coordination & Information Officer
Lisette Van Vliet, Toxics Policy Advisor
Christian Farrar-Hockley, Policy Officer
Diana Smith, Communications Advisor
Anna Marks, Intern
Marta Koltay, European Voluntary Service volunteer

Membership

HEAL accomplishes its ongoing mission through close collaboration with a broad and diverse network of members and supporters.

Eleven new organisations joined in 2006 to reach a total of 50 groups across Europe.
Strategic orientation

In June 2006, the Health & Environment Alliance and its membership recognised a need to define long-term strategic goals for the organisation, to help it work towards its vision of a healthy planet for healthy people.

Six strategic goals have been identified for the period 2007-2012.
1. Strengthening the role of the environmental and health policy debate in the European region and internationally.
2. Strengthening and utilising the knowledge base on the environment and health links.
3. Growing, strengthening and engaging our membership.
4. Mobilising other constituencies for advocacy on environment and health issues.
5. Increasing public outreach.
6. Ensuring the sustainability of the organisation.

IX. Finance

Our financial year runs from 15 March 2006 to 14 March 2007.

Income & Expenditure

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<th>Income</th>
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<td>EU income</td>
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<td>Other grants (foundations, members' contributions, etc.)</td>
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<td>Other income</td>
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</tr>
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</table>

Answer to quiz question

According to the WHO report, Preventing disease through healthy environments: Towards an estimate of the environmental burden of disease, (June 2006), between 15-19% of deaths are due to environmental-related factors in the WHO European region.
HEAL Member Organisations in 2006

**EUROPE-WIDE NETWORKS**

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>European Child Safety Alliance</td>
<td><a href="http://www.childsafetyeurope.org">www.childsafetyeurope.org</a></td>
</tr>
<tr>
<td>European Council for Classical Homeopathy</td>
<td><a href="http://www.homeopathy-ech.org">www.homeopathy-ech.org</a></td>
</tr>
<tr>
<td>European Federation of Allergy and Airways Diseases Patients’ Associations</td>
<td><a href="http://www.efanet.org">www.efanet.org</a></td>
</tr>
<tr>
<td>European Federation of Nurses of the EU</td>
<td><a href="http://www.efnweb.org">www.efnweb.org</a></td>
</tr>
<tr>
<td>European Lung Foundation</td>
<td><a href="http://www.european-lung-foundation.org">www.european-lung-foundation.org</a></td>
</tr>
<tr>
<td>European Network for Smoking Prevention</td>
<td><a href="http://www.ensp.org">www.ensp.org</a></td>
</tr>
<tr>
<td>European Public Health Alliance (EPHA)</td>
<td><a href="http://www.epha.org">www.epha.org</a></td>
</tr>
<tr>
<td>European Respiratory Society</td>
<td><a href="http://www.ersnet.org">www.ersnet.org</a></td>
</tr>
<tr>
<td>Pesticides Action Network Europe</td>
<td><a href="http://www.pan-europe.info">www.pan-europe.info</a></td>
</tr>
<tr>
<td>International Baby Food Action Network (IBFAN)</td>
<td><a href="http://www.ibfan.org">www.ibfan.org</a></td>
</tr>
<tr>
<td>International Society of Doctors for the Environment (ISDE)</td>
<td><a href="http://www.isde.org">www.isde.org</a></td>
</tr>
<tr>
<td>Women in Europe for a Common Future</td>
<td><a href="http://www.wecf.eu">www.wecf.eu</a></td>
</tr>
</tbody>
</table>

**ARMENIA**

<table>
<thead>
<tr>
<th>Organisation</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Armenian Women for Health and Healthy Environment</td>
<td><a href="http://www.awhhe.am">www.awhhe.am</a></td>
</tr>
<tr>
<td>EcoTox</td>
<td></td>
</tr>
</tbody>
</table>

**BELGIUM**

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inter-Environment Wallonie</td>
<td><a href="http://www.iewonline.be">www.iewonline.be</a></td>
</tr>
<tr>
<td>Health &amp; Environmental Care Technical Organization (HECTOR)</td>
<td><a href="http://www.hector-asbl.be">www.hector-asbl.be</a></td>
</tr>
<tr>
<td>Hygiène Publique en Hainaut asbl</td>
<td></td>
</tr>
<tr>
<td>Stop Poison Santé asbl</td>
<td><a href="http://www.stopoisonsante.com">www.stopoisonsante.com</a></td>
</tr>
<tr>
<td>Espace Environnement</td>
<td><a href="http://www.espace-environnement.be">www.espace-environnement.be</a></td>
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**BULGARIA**

<table>
<thead>
<tr>
<th>Organisation</th>
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<tbody>
<tr>
<td>Sustainable World Foundation</td>
<td></td>
</tr>
<tr>
<td>Institute for Ecological Modernisation</td>
<td></td>
</tr>
<tr>
<td>Women and Mothers against Violence</td>
<td></td>
</tr>
<tr>
<td>Earth Forever Foundation</td>
<td><a href="http://www.earthforever.org">www.earthforever.org</a></td>
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</table>

**CROATIA**

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Website</th>
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</thead>
<tbody>
<tr>
<td>Croatian Nurses Association</td>
<td><a href="http://www.hums.hr">www.hums.hr</a></td>
</tr>
<tr>
<td>PIN for Health</td>
<td><a href="http://www.pinforhealth.hr">www.pinforhealth.hr</a></td>
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</tbody>
</table>

**CZECH REPUBLIC**

<table>
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<tr>
<th>Organisation</th>
<th>Website</th>
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<tbody>
<tr>
<td>Society for Sustainable Living</td>
<td><a href="http://www.stuz.cz">www.stuz.cz</a></td>
</tr>
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</table>

**FRANCE**

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Website</th>
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</thead>
<tbody>
<tr>
<td>Association for Research and Treatment against cancer (ARTAC)</td>
<td><a href="http://www.artac.info">www.artac.info</a></td>
</tr>
</tbody>
</table>

**GERMANY**

<table>
<thead>
<tr>
<th>Organisation</th>
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<tbody>
<tr>
<td>European Academy for Environmental Medicine</td>
<td><a href="http://www.europaem.net">www.europaem.net</a></td>
</tr>
<tr>
<td>Network Children’s Health and Environment</td>
<td><a href="http://www.netzwerk-kindergesundheit.de">www.netzwerk-kindergesundheit.de</a></td>
</tr>
<tr>
<td>Country</td>
<td>Organization/Association</td>
</tr>
<tr>
<td>--------------</td>
<td>------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>HUNGARY</td>
<td>Center for Environmental Policy and Law</td>
</tr>
<tr>
<td>IRELAND</td>
<td>Irish Doctors Environmental’ Association (IDEA)</td>
</tr>
<tr>
<td>ITALY</td>
<td>International School on Environment, Health &amp; Sustainable Development</td>
</tr>
<tr>
<td>LUXEMBOURG</td>
<td>Akut asbl</td>
</tr>
<tr>
<td>MACEDONIA</td>
<td>Macedonian Association of Doctors for the Environment</td>
</tr>
<tr>
<td>NETHERLANDS</td>
<td>Dutch Monitoring Network for Health and Environment</td>
</tr>
<tr>
<td></td>
<td>Platform Health and Environment</td>
</tr>
<tr>
<td>ROMANIA</td>
<td>Department of Environmental Health, University of Medicine &amp; Pharmacy Cluj-Napoca</td>
</tr>
<tr>
<td></td>
<td>Eco Counselling Centre Galati</td>
</tr>
<tr>
<td>SERBIA</td>
<td>Health Development Promotional and Educational Center (CEPRO-MED)</td>
</tr>
<tr>
<td>SWEDEN</td>
<td>Department of Earth Sciences and Clinical Microbiology, Uppsala University</td>
</tr>
<tr>
<td>UNITED KINGDOM</td>
<td>British Medical Association – European Office</td>
</tr>
<tr>
<td></td>
<td>Breast Cancer UK</td>
</tr>
<tr>
<td></td>
<td>London School of Hygiene &amp; Tropical Medicine</td>
</tr>
<tr>
<td></td>
<td>Chartered Institute for Environment and Health</td>
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<tr>
<td></td>
<td>South Sefton PCT – Department of Public Health</td>
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<td></td>
<td>Royal Society for the Prevention of Accidents</td>
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<td></td>
<td>Natural England</td>
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<tr>
<td>UKRAINE</td>
<td>Green Doctors – ISDE</td>
</tr>
<tr>
<td>UZBEKISTAN</td>
<td>Centre for Reproductive Health and Environment “Perzent”</td>
</tr>
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</table>
The **Health and Environment Alliance** aims to raise awareness of how environmental protection improves health. It achieves this by creating opportunities for better representation of the perspectives of citizens and health experts in the environment and health-related European policy-making. Our membership includes a diverse network of more than 50 citizens’, patients’, women’s, health professionals’ and environmental organisations across Europe and has a strong track record in increasing public and expert engagement in both EU debates and the decision-making process.

*Our vision is a healthy planet for healthy people*