

Report of the Tenth High-Level Officials Meeting of the Asia-Pacific Regional Forum on Health and Environment



Manila, Philippines
27–28 September 2019



World Health
Organization



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1. Introduction

Regional cooperation on health and environment in the Asia-Pacific was significantly enhanced in 2004 with the establishment of the Regional Forum on Environment and Health for South-East and East Asian countries. Since 2004, the Regional Forum has successfully provided a mechanism for sharing knowledge and experiences; improving policy and regulatory frameworks at the national and regional levels; and promoting the implementation of integrated environmental health strategies and regulations. The Regional Forum has focused on addressing environment and health priorities in ways that add value to the ongoing efforts of countries and other regional and subregional bodies.

Since it was established, the Regional Forum has met at the ministerial level at intervals of three years to determine the overall policy directions for its work. A High-Level Officials Meeting (HLOM) has been held every 18 months to deal with policies, strategies, budgets and planning.

The Fourth Meeting of the Regional Forum took place in Manila in 2016 under the Chairmanship of the Government of the Philippines. While acknowledging the progress made towards achieving the Millennium Development Goals (MDGs), the honourable ministers of the Member States of the Forum expressed concern about the high level of premature deaths attributable to environmental conditions in the Asia-Pacific Region. They also noted the lack of universal sustainable access to safe water and basic sanitation. Health-care facilities and workplaces still lacked resilience to climate-related disasters. They also observed that air pollution had become the single largest threat to environmental health.

The ministers resolved to take urgent action towards meeting the Sustainable Development Goals (SDGs), particularly those relating to climate change, air pollution, hazardous chemicals, water and soil contamination, waste management, land degradation and biodiversity losses, and protecting the working population. The Forum adopted the Manila Declaration on Health and Environment, and an Implementation Plan that set out the priorities to be addressed during the period 2017–2019.

A task force was set up by the ministers to enhance the effectiveness of the Regional Forum, particularly in the light of their decision to extend its membership to all countries in Asia and the Pacific, a practice that was initiated at the Fourth Meeting. The ministers decided that in the future the expanded body should be renamed as the “Asia-Pacific Regional Forum on Health and Environment”.

The Tenth HLOM of the Asia-Pacific Regional Forum on Health and Environment was hosted by the Philippines on 27-28 September 2019 in Manila. The Forum was supported by the Regional Office for Asia and the Pacific (ROAP) of the United Nations Environment Programme (UNEP), and the Regional Offices for the Western Pacific (WPRO) and South-East Asia (SEARO) regions of the World Health Organization (WHO).

The Tenth HLOM was convened to provide recommendations and technical inputs for the formal consideration of the ministers at its planned Fifth Ministerial Meeting. The objectives of the meeting were to:

- (1) Review and discuss the Regional Implementation Plan (2017–2019) and Manila Declaration on Health and Environment, and inform Member States about the activities of the Regional Forum and relevant national initiatives;
- (2) Review and approve the recommendations of the Task Force on governance mechanisms of the Regional Forum, particularly on the:
 - (i) title of the Regional Forum, given the expanded membership;
 - (ii) membership and structural arrangements/mechanisms of the Regional Forum;
 - (iii) Framework for Cooperation; and
 - (iv) thematic working groups.
- (3) Confirm the new members of the Regional Forum and the next Chair of the Forum; and
- (4) Discuss and plan for the Fifth Ministerial Meeting of the Asia-Pacific Regional Forum on Health and Environment.

2. Opening of the meeting

The meeting was co-Chaired by Dr Myrna C. Cabotaje, Undersecretary of Health, Public Health Services Team, Department of Health, and Mr Albert Magalang, Chief Climate Change Division, Department of Environment and Natural Resources, of the Government of the Philippines. The opening address and welcome statements were delivered by Dr Cabotaje; Dr Hai-Rim Shin, Director, Division of Healthy Environments and Populations, WHO Regional Office for the Western Pacific; Dr Thushara Fernando, Coordinator, Social and Environmental Determinants of Health, WHO Regional Office for South-East Asia, and Dr Isabelle Louis, Deputy Regional Director, UNEP Regional Office for Asia and the Pacific.

In her opening remarks, Dr Cabotaje posited that the Regional Forum was even more relevant today than when it was established. The increased number of members of the Regional Forum was evidence of an increasing degree of interest, growing concern about environment and health, and the need to achieve sustainable development. Noting the objectives of the meeting, she hoped that the outputs would be acceptable to all parties as well as responsive to future needs.

Dr Cabotaje said the Tenth HLOM came at an important juncture to identify possible actions and solutions to address emerging and transboundary environmental risks within the context of universal health coverage and “Health For All”. To achieve this, constructive dialogue, knowledge exchange and technical cooperation among countries were necessary, along with fruitful partnerships with academia and civil society. Country ownership of the issues is fundamental and the success of the Regional Forum would continue to depend on cooperation between the environment and health sectors. In conclusion, she conveyed the continuing commitment of the Government of the Philippines to actively participate in the Regional Forum and support the new Chair.

Speaking on behalf of the WHO Regional Director for the Western Pacific Region, Dr Hai-Rim Shin noted with concern that 3.5 million premature deaths occurred each year in the Western Pacific Region from environmental risk factors. Ensuring clean water, safe sanitation and air quality, and addressing climate change were of utmost priority. A white paper on “*For the Future: Towards the Healthiest and Safest Region*” had been developed to set out the priorities for WHO’s work in the Western Pacific Region for the coming five years, he informed. The Seventieth Session of the WHO Regional Committee for the

Western Pacific had strongly supported the white paper, and Member States had agreed to incorporate elements of that paper into their relevant national plans.

Dr Shin also introduced the work of the newly established WHO Asia-Pacific Centre for Environment and Health in the Western Pacific Region, which had recently established as a geographically-dispersed specialized office of WHO hosted by the Republic of Korea. The Centre would provide evidence-based solutions to address environmental health concerns in three key areas: air quality, energy and health; climate change and health; and water and the living environment.

Dr Thushara Fernando addressed the meeting on behalf of the WHO Regional Director for the South-East Asia Region. He joined earlier speakers in recognizing the increasing interest of and commitment to the work of the Regional Forum, and the presence of Member countries participating in it for the first time. Dr Fernando spoke of the growing political commitment to scale up preventive action on health, environment, and climate change, and of the critical role of the Regional Forum to build and sustain this momentum.

Considering that the environment is a determinant in over a quarter of the disease burden, Dr Fernando spoke of the critical role of the health sector which cannot afford to treat diseases without recognizing and acting upon their underlying causes. He reported that an important milestone had been achieved at the Seventy-second Session of the Regional Committee of South-East Asia where ministers of health had endorsed the Regional Plan of Action for Implementing the WHO Global Strategy on Health, Environment, and Climate Change. The SEA Regional Plan of Action sets out four strategic areas of work for guidance over the next 10 years. The SDGs provided a common driver for tackling the environmental determinants of health and for monitoring progress in both the SEA Regional Plan of Action and work of the Regional Forum.

Dr Isabelle Louis urged countries to take further action to address the environmental health-related SDGs. Referring to a recent finding by the UN Economic and Social Council of Asia-Pacific, she said that the Asia-Pacific Region may not achieve the health-related or any of the 17 SDGs by 2030 if it remained on its current trajectory. Progress has to be accelerated on all fronts, she said. She also highlighted a study that estimated pollution costs to be 29% of the gross domestic product (GDP) of low- and middle-income countries, demonstrating that the social and economic costs of inaction far exceeded the costs of action.

With a greater recognition of the inter-connectedness of environment and health, the adoption of more integrated policies promised to bring about the transformative change needed to address the Region's challenges. Loss of biodiversity, air pollution, inadequate waste management, health hazards from mercury, and high asbestos use are among many threats facing the Region.

In October 2018, UNEP had launched the report "*Air Pollution in Asia and the Pacific: Science-Based Solutions*", identifying 25 policy and technology actions that could achieve significant reductions in air pollution for 1 billion people by 2030. Dr Louis proposed the report as a useful tool for the Regional Forum for tracking progress to improve air quality. The Third Meeting of the United Nations Environment Assembly (UNEA-3) in 2018 had recognized the important role of the Asia-Pacific Regional Forum on Health and Environment in strengthening environmental governance around the environment-health nexus. It had adopted a resolution that encouraged the engagement of Member States and stakeholders in this process. She concluded by saying that, in this regard, the Regional Forum provided unique opportunities for the health and environment ministries to accelerate progress to achieve the SDGs.

3. Adoption of the Agenda

The Agenda was adopted as follows:

- (1) Opening of the meeting
- (2) The Approval of the Agenda
- (3) Updates and feedback on the Research and Donor Engagement Forum on health, climate change and environment
- (4) Review of the Regional Implementation Plan and Manila Declaration
- (5) Review of the recommendations of the task force meeting on governance mechanisms of the Regional Forum
- (6) Integrating global developments to regional contexts to meet SDGs
- (7) Confirmation of the next Regional Forum Chair and planning for the Fifth Ministerial Meeting of the Regional Forum
- (8) The way forward
- (9) Closing ceremony.

4. Attendance

A total of 28 Member States participated in the Tenth HLOM. Seven of these were from the WHO South-East Asia Region:

- Bhutan, MoH;
- Democratic People's Republic of Korea, MoE;
- India, MoH;
- Indonesia, MoH and MoE;
- Maldives, MoH;
- Nepal, MoH;
- Sri Lanka, MoH; and
- Thailand, MoH and MoE.

Eighteen were from the WHO Western Pacific Region, and are listed alphabetically below:

- American Samoa, MoH;
- Brunei Darussalam, MoH;
- Cambodia MoH;
- Cook Islands MoE;
- Japan, MoH and MoE;
- Kiribati, MoH;
- Lao People's Democratic Republic (PDR) MoH;
- Malaysia, MoH and MoE;
- Micronesia, Federated States of, MoH;
- Mongolia, MoH;
- Commonwealth of the Northern Mariana Islands, MoE;

- Papua New Guinea, MoH;
- Philippines, MoH and MoE;
- Republic of Korea, MoE;
- Singapore, MoE;
- Solomon Islands, MoH;
- Tokelau, MoH;
- Tuvalu, MoE; and
- Viet Nam, MoE.

Three Member States were from the WHO Eastern Mediterranean Region:

- Afghanistan, MoE;
- Islamic Republic of Iran, MoE; and
- Pakistan, MoE.

The International Secretariat was represented by the Regional Offices for the Western Pacific (WPRO) and South-East Asia (SEARO) regions of the World Health Organization (WHO) and UNEP ROAP. The Philippines Secretariat was represented by the Department of Health and the Department of Environment and Natural Resources, and the WHO Country Office for the Philippines. The Philippine Inter-Agency Committee on Environmental Health (IACEH) was represented by the Department of Health, Department of Environment and Natural Resources, Department of Public Works and Highways, and the Philippine Information Agency. The following observers attended the meeting: Department of Foreign Affairs, Philippines; Institute of Environmental Science and Meteorology; University of the Philippines Diliman; Health Care Without Harm Asia; InterAcademy Partnership; Green Climate Fund; Belmont Forum; and the Red Cross Society.

A list of participants is contained in Annex 1.

5. Updates from the Research and Donor Engagement Forum

Dr Montira Pongsiri, UNEP Fellow, provided an overview of the discussions that took place at the Research and Donor Engagement Forum held during the national celebrations of the World Environmental Health Day on 26 September 2019, hosted by the Government of the Philippines.

Dr Robin Fears and Dr Volker ter Meulen, presented the InterAcademy Partnership, which plays a networking role among national academies of sciences and medicine around the world. A key objective of the InterAcademy Partnership is to provide evidence-based and policy-relevant scientific advice on global health, engineering and technology issues. This connects the scientific community's generation of knowledge with the needs of policy communities. Trends in population growth and economic disparities were identified as two of the key challenges in addressing environment and health concerns in the Asia-Pacific. The InterAcademy Partnership reiterated its interest in addressing inter-regional engagement, research and policy priorities, particularly in its work on minimizing the impact of climate change on health and environment.

During the second session, Dr Erika Keys, provided an overview of the Belmont Forum as a consortium of funding organizations and science councils. Describing their work on climate, environment and health, she invited inputs on project ideas from the Region that

could be considered for funding by the Belmont Forum. Modification in the health-care supply chain for reducing greenhouse gas emissions was one of the ideas discussed during the deliberations.

During the third session, Dr Johannah Wegerdt, gave an overview of the Green Climate Fund as the multilateral fund established within the UN Framework Convention on Climate Change (UNFCCC) to support countries in adaptation and mitigation practices to counter climate change. The Green Climate Fund has identified health and well-being as a priority impact area and has recognized that additional investments in health-related projects are needed. Dr Wegerdt briefly described the different funding opportunities available under the Green Climate Fund and encouraged members of the Regional Forum to work with national designated authorities to develop projects in the future.

In closing her presentation, Dr Pongsiri encouraged the Regional Forum and its Member countries to utilize the opportunities that engagement with research and donor partnerships could bring to their work.

6. Review of the Regional Implementation Plan and the Manila Declaration

Dr Cabotaje of the Philippines Department of Health provided an overview of progress in addressing the Manila Declaration and its implementation plan as well as initiatives undertaken by the Philippines as Chair of the Regional Forum from 2017 to 2019.

As requested by the honourable ministers, a task force meeting had been held to review the governance mechanisms of the Regional Forum, and a meeting had also been convened to align the functions of each of the Regional Forum's thematic working groups (TWG) with the SDGs. Over the intersessional period since the Fourth Ministerial Meeting, the TWGs had continued their initiatives related to capacity-building, policy, research and knowledge exchange. The Chair of the Regional Forum had played an active role in extending its membership. Afghanistan, Guam and Maldives had submitted letters of intent to join the Regional Forum. The Chair had also invited countries to consider taking on the responsibility of the Chair of the Regional Forum over the next five years. The Republic of Indonesia had submitted a formal expression of interest in this regard. This would be formally considered later during this meeting.

A draft resolution to recognize the role of the Asia-Pacific Regional Forum on Health and Environment in contributing to regional and national policy actions, and in strengthening governance around the environment-health nexus, was adopted by UNEA-3 in 2017. The Chair had participated in a number of regional meetings and activities to advocate for the role of the Regional Forum. These included the Climate and Clean Air Coalition Working Group Meeting in October 2018; the WHO consultation for the SEA Regional Plan of Action for implementing the WHO Global Strategy for Health, Environment and Climate Change in June 2019; and the Ministerial Roundtable on Clean Air, Health and Climate of the Association of Southeast Asian Nations (ASEAN) in July 2019.

The Government of the Philippines had strengthened and aligned several of its national activities during the intersessional period. These include updating its National Environmental Health Action Plan (NEHAP), 2017–2022; establishing targets and indicators for relevant SDGs; developing a Health and Pollution Action Plan in support of the NEHAP together with the United Nations Industrial Development Organization (UNIDO); and helping to develop 20 grassroot project proposals on health and environment as a basis for resource mobilization with partners.

Moreover, to further advocate and raise awareness on environmental health issues, the Philippines as Chair of the Regional Forum, through the Inter-Agency Committee on Environmental Health (IACEH), had advocated for the institutionalization of the national celebrations of the World Environmental Health Day under a Presidential proclamation. Presidential Proclamation No. 595 of 2018 is titled “Declaring September 26 of every year as ‘World Environmental Health Day’ in the Philippines”.

Resource mobilization for sustaining the activities of the Regional Forum continued to be a challenge and concerted action by the Regional Forum and its members was needed to address this shortcoming. In its capacity as Chair, the Philippines had been advocating for greater attention for creating strategic funding mechanisms and the adoption of a longer five-year term for the Chair of the Regional Forum. During the discussions, it was agreed that with a longer term for the Chair, a mid-term evaluation of the work of the Regional Forum should be undertaken.

7. Regional-level activities since the Fourth Ministerial Regional Forum

Ms Lesley Onyon of the WHO Regional Office for South-East Asia provided an update on the meeting on regional activities undertaken by the International Secretariat, including those that had brought the Regional Forum to the attention of relevant WHO and UNEP governing bodies; those that had encouraged wider participation and expanded membership of the Regional Forum; and those that had provided technical support to countries.

UNEP highlighted the adoption of the resolution by UNEA-3 and drew attention to its work in promoting the sound management of chemicals and wastes, addressing climate change, and promoting biodiversity, sustainable consumption and production. The release of UNEP’s *“Air pollution in Asia and the Pacific: Science-Based solutions”* in January 2019, the updated Global Mercury Assessment launched in 2018, and revised Toolkit for identification and quantification of mercury were highlighted as key achievements that provided important support for the early implementation of the Minamata Convention on Mercury.

The Western Pacific Region of WHO reiterated that the Asia-Pacific Centre for Environment and Health in the Western Pacific Region was a significant development. The regional consultations on air pollution and health; development of project concepts on climate change; implementation of projects on water, sanitation and hygiene (WASH) in health-care facilities in seven Member States and completion of new regional reports on environmental indicators, WASH and air quality were also important developments in the Region.

The Regional Office for South-East Asia reported on a regional consultation on air quality and health. It was also informed that it would convene a workshop on effective financing for WASH in October 2019¹ and on improving water quality surveillance in the Region in November 2019². In the face of deteriorating air pollution, it had developed public health advisories and guidance and was prioritizing the issue of household air pollution in Member States, including through national multisectoral action plans on

¹ SEARO Regional Workshop on Regional workshop on global analysis and assessment of sanitation and drinking water (GLAAS) and TrackFin tools to monitor progress in the area of drinking water, sanitation and hygiene, held in Nagpur, India, 15–17 October 2019

² SEARO Regional Workshop to strengthen water quality surveillance, Bangkok, 5–7 November 2019

noncommunicable diseases. Support for the auditing of climate-resilient water safety plans, improving WASH in health-care facilities, and helping with the conduct of national health vulnerability assessments in the context of climate change were also important initiatives taken in the Region. The First WHO Collaborating Centre for Poisoning Prevention and Control has been established at Ramathibodi Hospital in Bangkok, Thailand. The publication titled “SDG3 and Beyond – Healthy Environments for a Healthier Population and the Sustainable Development Goals” was launched during the session of the WHO Regional Committee for South-East Asia. This document highlighted the progress made in the Region on relevant environment and health-related SDGs.

During the discussions, delegates highlighted the need to further address transboundary air pollution which affected much of the Region, as well as the importance of improving occupational health and safety of health workers, waste management and environmental hygiene in health-care facilities, and improvements in the health of workers in many countries. The establishment of the Asia-Pacific Centre for Environment and Health in the Western Pacific Region was warmly welcomed.

8. Panel discussion on country updates relevant to the Manila Declaration and Regional Implementation Plan

This session was chaired by Dr Rokho Kim, of the Regional Office for the Western Pacific, who invited India, Kiribati, Republic of Korea, Lao People’s Democratic Republic and Thailand to participate in a panel discussion highlighting national achievements and lessons learned during the intersessional period of the Regional Forum.

India described the national missions established under the Prime Minister’s Council on Climate Change to address sustainable habitat, energy, water and health issues. Joint engagement by both the Ministry of Health and Family Welfare and the Ministry of Environment, Forests and Climate Change had been one of the keys to its success. Climate change is being integrated into the medical curriculum and health-care worker trainings to build the capacity of the health-care workforce and to develop a climate-resilient health-care infrastructure. An ambitious National Clean Air Programme had been launched to address air pollution with targets of reducing PM2.5 and PM10 levels in more than 122 cities nationwide. This had included a significant investment on improving air quality monitoring and source apportionment to understand the origins of key air pollutants. The challenges in serving the huge population of India with its considerable regional and local diversities were noted. Important steps had been taken at the subnational level with a number of action plans being developed by the state on climate change. Positions for nodal officers in environmental health departments were being established to oversee activities.

Kiribati focused its discussion on climate change adaptation; the development of its first NEHAP; efforts made to build climate-resilient health systems; and action taken to address climate impacts on vector-borne diseases. A national climate change and health action plan had been finalized. Kiribati had successfully introduced community-led total sanitation processes to achieve “open defecation-free” status for its islands.

The Republic of Korea recalled its continuing support for the Regional Forum and observed that the Second Ministerial Forum, held in Jeju in 2010, had been instrumental in setting guidance for NEHAPs. The National Institute of Environmental Research had hosted the WHO Collaborating Centre for Vulnerable Population and Environmental Health at Seo-gu, Incheon, in the Republic of Korea since 2014. The Republic of Korea would be providing substantial financial support for the next 10 years to the new Asia-

Pacific Centre for Environment and Health in the Western Pacific Region, located in Seoul. This was a further indication of the strong and continuing commitment of the Government to the work of the Regional Forum and to promote environmental health in the Region.

Capacity-building included developing laboratory capability and human resources for environmental and public health. With funding from the Korea International Cooperation Agency, the Ministry of Health and Medical Services in partnership with WHO was also working to improve the climate resilience of primary health care facilities, facilitate community engagement, and develop emergency preparedness and health information systems.

Lao People's Democratic Republic reported that tackling climate change and ensuring WASH and workers' health were key components of their commitment to the Manila Declaration. To drive water safety planning and implementation, a national water safety planning policy had been institutionalized together with a system for water quality surveillance and for auditing of water safety plans. Priority had been accorded to strengthening the climate resilience of health-care facilities focusing on water, sanitation and hygiene, and medical waste management. Training and field work had been completed to enable use of the WHO Water and Sanitation for Health Facility Improvement Tool (WASH FIT). Selected facilities were also making progress to develop climate-sensitive health management and response plans. Improvements in occupational health and safety regulation and training had been made, including those in cooperation with Cambodia. Priorities for the next 3–5 years included additional work on climate change and health adaptation, WASH in rural communities, chemical safety, occupational health and air pollution.

Thailand drew attention to a number of aspects of the Manila Declaration which it has addressed over the recent intersessional period. These included the launch of a National Air Quality Index in 2018; improvements in the management of water, sanitation and hygiene; chemicals safety; and the promotion of health in all policies to mainstream the tackling of environmental determinants of health through multisectoral approaches. Thailand's 20-year National Strategic Plan (2017–2036) and the Twelfth National Economic and Social Development Action Plan had a focus on environmentally-friendly development and growth that was consistent with many of the values and priorities of the Manila Declaration. The ministries for health and environment had well-established mechanisms for joint action and cooperation that were hallmarks of the successful developments reported.

Following the panel discussion, Bhutan, Indonesia, Japan, Malaysia, Maldives, Mongolia, Pakistan, Sri Lanka and Tokelau also spoke of their achievements and lessons learned.

Bhutan named climate change along with transboundary air pollution, waste management and melting glaciers as its priority concerns. Water scarcity was also leading to localized water conflicts. There is strong national emphasis on WASH and a flagship programme aims to provide 24x7 clean water to all by 2022. Designing "green" hospitals and incorporating WASH in all health-care facilities are priorities. Carbon neutral development with focus on the energy, human settlement and industry sectors are features of government policy. A national adaptation programme of action (NAPA) and a health national adaptation plan (HNAP) are aligned but full implementation remains a challenge.

Indonesia identified WASH, including hospital waste management, as one of its key focal areas. By using community-based methods, including at the village level, it aspired to become open defecation-free by 2024. Two challenges facing the country, however, were

its considerable geographical dispersion and its susceptibility to natural disasters and climate change. Ensuring emergency preparedness and response and climate resilience continued to be two critically important issues. Sharing the experience gained was part of Indonesia's commitment to the work of the Regional Forum. Indonesia was an active participant in international environment governance and a party to the Basel, Rotterdam and Stockholm (or BRS) Conventions, as well as the more recent Minamata Convention on Mercury. Climate change and health issues were also national priorities and the impact of climate change on children's environmental health was accorded high importance.

Japan emphasized its continuing support to countries in the Region with technical assistance made available for climate mitigation, infectious disease control, water supply and wastewater management, air pollution and ratification of the Minamata Convention

Malaysia noted that it has put in place a number of regulations and a NEHAP to address the issues of air quality, WASH, toxic chemicals and climate change. Vector-borne diseases and chemical contamination remained issues of concern. Community behaviour change and empowerment had been successful approaches for dengue control and a solid engagement with the ASEAN Emergency Operations Network in disaster management had been instrumental. While noting the importance of multisectoral and multiagency collaboration, the delegate from Malaysia stated that sustaining these approaches can be challenging.

Maldives had identified waste management as a priority area. It had developed new policies and regulations, including a strong focus on health-care waste management. It has also undertaken initiatives to improve WASH by bringing piped water and sanitation facilities to all islands. Maldives had recently joined the global BreatheLife Initiative and was in the process of developing air quality guidelines for the country. Climate change remains a top concern for the small island nation that is building climate-resilient health-care facilities.

Mongolia observed that addressing air pollution from solid fuel combustion and the burning of coal was a top priority for its government. Together with banning of the use of raw coal, it has instituted integrated monitoring of environmental health risks and hazards, and supported efforts to raise public awareness of their health impacts, as well as ensured preparedness and a responsive health sector.

Pakistan described several ongoing and planned health and environment initiatives. These included the current regime's vision of "Clean and Green Pakistan"; national and provincial action plans under the Ministry of Climate Change to conduct a plantation drive for 10 million trees by 2023; ranking of cities and towns based on their cleanliness, community awareness and participation; establishment of a dengue prevention centre; weekly alerts for eight WASH-related diseases; and water quality testing. An environmental health syllabus had been included in the academic curriculum and environmental health was included as a part of the vision for 2030 of the Ministry of Planning

The Philippines spoke of their commitment to multisectoral initiatives, which had been the cornerstone of its efforts in implementing the Manila Declaration. The Universal Health Care Law of the country had successfully included environmental health services under its focus area of prevention and health promotion. Rather than addressing vector-borne diseases individually, the Philippines would implement an integrated vector control programme. The Boracay and Manila Bay environmental sanitation and rehabilitation projects and efforts to address antimicrobial resistance were used as examples to highlight the Philippines' commitment to multisectoral collaboration and government leadership to address environmental health challenges.

Sri Lanka shared information about the success of WASH initiatives with most households having access to safe water. Like many countries, communicable diseases have declined but noncommunicable diseases are on the rise in the island. Elimination of mercury instruments from hospital settings has been undertaken by the Ministry of Health. The country is moving towards renewable energy and embracing “green building” and “green hospital” concepts. Sri Lanka called upon the United Nations and other international agencies to provide additional support to small nations to mitigate climate change risks

Tokelau observed that the remoteness and small size of the island country made it more vulnerable to the impact of climate change. Priorities for addressing environment and health concerns include a focus on primary health care, health education and investment in community engagement.

Summarizing the country presentations, the Chair commended the headway made in addressing the Manila Declaration and its implementation plan. Countries had shown that they are working towards achieving the SDGs and have progressed with multisectoral cooperation at national levels as well as internationally. Issues such as climate-resilient health-care facilities, WASH, air pollution, climate change and its impact on climate-sensitive diseases were common to all members. The issues highlighted presented many opportunities for the exchange of best practices and lessons learned. Addressing transboundary air pollution, a concern for many countries, would be important in the future.

9. Review of the recommendations of the task force meeting on governance of the Regional Forum

A. Presentation on the recommendations of the task force

Dr Cabotaje, speaking on behalf of the Chair of the Regional Forum, reminded participants of the request emanating from the Fourth Meeting of Ministers to review governance arrangements considering the directions established by the Manila Declaration. A task force was subsequently established comprising 10 Member States. The task force met in September 2017, with the Government of Philippines as Chair, and put forward 12 recommendations for improvements. The recommendations were introduced by Dr Rokho Kim, of the WHO Regional Office for the Western Pacific, for the consideration of the meeting.

The revised title of the Regional Forum – the Asia-Pacific Regional Forum on Health and Environment – and its goal – “To create a platform for national and regional policy and action to enhance and safeguard health and environment towards achievement of the SDGs” – were both adopted by the meeting with no amendment.

The objectives of the Regional Forum were revised as: “To identify and promote the implementation of priority health and environmental issues that require regional cooperation and support for national action.”

The expansion of membership of the Regional Forum was confirmed to all 51 Member States and Territories that are covered by WHO WPRO, WHO SEARO and UNEP ROAP. New members would need to provide a letter of intent to participate in the Regional Forum signed by both their ministries of health and environment. WHO and UNEP would continue to encourage their Member States to participate in the Regional Forum, including through relevant governing bodies. It was agreed that one ministerial meeting and two high-level officials’ meetings would be held every five years.

The mechanism of selecting the Regional Forum Chair would be based on voluntary expressions of interest. In the event of multiple expressions of interest, a roster of countries would be established with the selection following alphabetical precedence. The Chair of the Regional Forum would host the Ministerial Meeting and HLOM; however, other formal meetings could be hosted by other countries if agreed. The position of Vice-Chair would also be subject to voluntary expressions of interest and, unlike previous arrangements, would not be linked to the position of the Chair. In a departure from past practice, the Vice-Chair would not automatically become Chair of the Regional Forum, but this would be the subject of a separate call for expression of interest.

It was agreed that the Secretariat would establish more flexible arrangements for the Scientific Panel, including creating a roster of experts from the Member States that could contribute to different issues.

It was agreed that the TWGs would be more closely governed by the Regional Forum. Each TWG member would have a five-year term that would synchronize with that of the Chair of the Regional Forum. The Secretariat would prepare or revise the Terms of Reference for each TWG. The Chair of each TWG would have the authority to accept new members subject to advice from the Secretariat, who would undertake a process of due diligence to avoid conflicts of interest. The Knowledge Network of the Regional Forum would be retained pending further discussion.

A number of issues of priority interest to the Regional Forum would be the focus of renewed resource mobilization as regional projects. These included: (i) health impact assessment as a planning tool for quantifying air pollution impacts; (ii) building climate-resilient health systems with a particular focus on climate-sensitive diseases such as vector-borne diseases; (iii) safe water and sanitation services for households and health-care facilities; (iv) sustainable urban development, including food, water and clean air; (v) sound management of chemicals and hazardous waste, particularly from health-care facilities; (vi) workers' health; (vii) waste management; and (viii) pollution from plastics.

There was considerable discussion on the transboundary nature of many health and environmental issues in the Asia-Pacific Region. It was agreed that resolution of transboundary issues, such as air pollution, dumping of solid waste, disposal of liquid waste as well as emerging concerns including antimicrobial resistance and loss of biodiversity and ecosystems, should be accorded additional priority by the Regional Forum.

It was agreed that members of the Regional Forum may be recognized for their efforts in addressing health and environment issues and that communication and advocacy should be increased to create additional visibility for its work. A quarterly newsletter highlighting Regional Forum activities would be instituted, and membership could be considered from the private and corporate sectors following necessary due diligence. Resource mobilization was reiterated to be a key element in implementing the Regional Forum workplan, with potential donors such as the Asian Development Bank, the Green Climate Fund and Global Environment Fund identified.

B. Presentation on the recommendations of the task force on the TWGs

Ms Kakuko Nagatani-Yoshida, of the UNEP Regional Office for Asia and the Pacific, introduced the task force recommendations pertaining to the TWGs. The Regional Forum's "Framework of Cooperation" enumerated that TWGs were established to address specific environment and health priority issues in the Region. The TWGs are currently independent technical bodies without any administrative or formal bindings to the Chair or the Secretariat, and are responsible for providing resources for their activities. Seven TWGs had

earlier been established for: (i) air quality, (ii) health impact assessment, (iii) WASH, (iv) solid and hazardous waste, (v) toxic chemicals and hazardous substances, (vi) climate change, ozone depletion and ecosystem change, and (vii) environmental health emergencies.

A number of challenges that affected the work of the TWGs had been recognized. Inadequate resources and the lack of formal oversight by the Regional Forum were two of the most important challenges.

A number of the TWGs present in the meeting gave updates on their work. The TWG on air quality circulated a written policy brief and described its future work on transboundary air pollution. The TWG on health impact assessment reported on the development of a model legal framework, country guidelines, and training and education. The TWG on toxic chemicals and hazardous waste proposed aligning its work with that of the Strategic Approach to International Chemicals Management (SAICM).

Following the discussion, the meeting agreed that the Secretariat would assist in preparing the terms of reference for each group. Each TWG would develop a five-year workplan for its activities and regular progress reports would be prepared for consideration of the Regional Forum. Each TWG would have a lifespan of five years, matching that of the chairmanship of the Regional Forum. Their revised terms of reference would contribute to the new workplan of the Regional Forum for the next five years. Membership of the TWGs would be open to all Member countries, but participation by non-member organizations would be subject to a process of due diligence led by the Secretariat, with confirmation by the Regional Forum. The TWGs would remain responsible for mobilizing their own resources.

Recognizing the priorities of the Region and the directions set by the Manila Declaration, the meeting agreed to retain the following eight TWGs: (i) air quality and health, chaired by the Republic of Korea and Thailand; (ii) water, sanitation and hygiene, to be chaired by Pakistan; (iii) chemicals, waste and health, co-chaired by Japan and Thailand; (iv) climate change and health, chaired by the Philippines; (v) health impact assessment, chaired by Thailand; (vi) ecosystem and health; (vii) sustainable and healthy cities; and (viii) workers' health. Recognizing that no chairs had been suggested for TWGs vi to viii, it was agreed that these would be held in abeyance and would be considered again in the future, should a chair for each be identified.

It was also agreed that the health of children was a cross-cutting issue to be embraced by all relevant TWGs; and that given the relevance of short-lived climate pollutants (SLCPs) to both climate change and air pollution, this issue should be addressed by both TWGs with joint meetings considered as appropriate.

10. Parallel session: Integrating global developments to regional contexts to meet SDGs

Two parallel break-out sessions were held to discuss integrating global developments in subregional contexts.

Dr Rokho Kim led a session for the ministries of environment and health from the WHO Western Pacific Region. The session focused on the role and activities of the new Asia-Pacific Centre for Environment and Health in the Western Pacific Region. Its mission as a centre for technical and scientific excellence was described. The session also noted its contributions to the development of healthier and safer environments, strengthening

community resilience to climate and environmental change for health, and ensuring health equity for all people of the WHO Western Pacific Region.

The new centre has three objectives: (a) to strengthen the scientific information and evidence for policy-making on existing and emerging climate and environmental determinants of health; (b) to assist Member States in developing and implementing policies to protect and promote health and well-being; and (c) to support Member States to develop and strengthen technical capacities and programmes.

The centre would focus on three main issues: (1) climate change and health; (2) air quality, energy and health; and (3) water and the living environment. During the first three years, the work would be guided by the initial workplan while establishing strategic directions, mobilizing resources for the future, and developing relationships with regional and country offices.

It was clarified that although the centre was based in the Western Pacific Region, its work may eventually serve the needs of the broader Asia-Pacific. As such, the centre will develop strong links with the TWGs of the Regional Forum. Discussing the scope of work of the centre, it was noted that it will focus on chemical, pesticide and consumer-product exposures. Occupational health and safety will not be a focus of the Centre's work in the immediate future. Dr Kim also reported on the outcome of the Asia-Pacific Parliamentarian Forum on Global Health that had focused on climate change and health. The WHO Regional Office for the Western Pacific would continue to promote, as far as possible, mainstreaming of climate change into existing health programmes, and facilitate full provision of safe drinking water in health-care facilities by 2023. These WHO initiatives were warmly welcomed by the Member States. It was noted that further consultations on the issues raised could take place during the session of the WHO Regional Committee for the Western Pacific and other forums, as appropriate.

Concluding the session, UNEP presented the significant progress made on mainstreaming environment and health in the Region and globally. The active partnership between WHO and UNEP in the Region was encouraged to continue.

B. Break-out meeting of MoH and MoE delegates from the South-East Asia Region

Ms Lesley Onyon led this session. It included discussions on SDG-related targets and the Manila Declaration, planned activities in relation to the SEA Regional Plan of Implementation on Health, Environment and Climate Change, the Malé Declaration on Building Resilience to Climate Change and UNEP planned activities. The session concluded with a roundtable discussion on joint health and environment activities in South-East Asia Region (SEAR) countries and how they linked with the work of the Regional Forum.

The group noted several opportunities for tracking health and environment-related SDG indicators through national systems and through compilation and assessments such as the WHO SEA Regional Plan of Implementation on Health, Environment and Climate Change, UNEP's report *"Towards a Pollution Free Planet"* and the 25 policy actions outlined in the UNEP report *"Air Pollution in Asia and the Pacific: Science-based Solutions"*. Events such as the Clean Air Week, SAICM and the BreatheLife Initiative also provided opportunities for stronger engagement and taking stock. Work on emerging issues such as microplastics and antimicrobial resistance provided opportunities for deepening the interaction between health and environment at a regional level and through the work of TWGs.

The Chulaborn Research Institute, Thailand, presented a pilot collaborative project on air quality assessments, undertaken with support from UNEP, in which it had been

attempted to link air quality data with health outcome data from tertiary hospitals. Strong commitment and engagement of data owners — in this case the Ministry of Public Health and the Pollution Control Department — had been the hallmark of the initiative. The pilot had calculated a significant economic benefit that could accrue from improvements in air pollution. Some of the challenges and opportunities identified in the pilot included communicating the methodology behind the pilot to policy-makers and the public. Thailand also provided an additional written update on national progress with wastewater and plastic waste management and air pollution which was circulated to participants.

11. Confirmation of next Regional Forum Chair and planning for the Fifth Ministerial Meeting of the Regional Forum

The meeting recalled the interest expressed by the Government of Indonesia to become the Chair of the Forum for the next five-year period (2020–2024) and invited Dr Kirana Pritasari, Director-General of Public Health, Indonesia, to present a short concept note outlining their proposal.

Dr Pritasari suggested that the theme for the next five years of the Regional Forum could be *“The role of strategic health and environment on national development to achieve the SDGs”* along with several sub-themes and activities continuing to link with the SDGs. Sub-themes identified included climate change and health; environment, healthy and smart cities; environment and efforts to reduce mortality and morbidity; environment and interventions to reduce stunting; and environment and tuberculosis.

Dr Pritasari proposed that the Fifth Meeting of the Regional Ministerial Forum be held in 2021 and be preceded by an HLOM. She proposed that an advisory board involving past and incoming Chairs could help guide the further development of the workplan. Scientific conferences were proposed to be held in 2020 and 2022. The meeting welcomed these proposed initiatives from Indonesia and congratulated it on becoming the Chair of the Regional Forum for the next five-year period.

12. The way forward

The Chair outlined the key ways forward and follow-up action from the Tenth HLOM, including the following actions for the Secretariat: (i) preparation of the meeting report; (ii) preparing a roster from the Member States for utilization in the establishment of a scientific panel; and (iii) preparing terms of reference for the reformed TWGs to cover a five-year period, which would also be aligned with and contribute to the new workplan of the Regional Forum.

A number of countries requested the Tenth HLOM to give greater priority to activities to address transboundary air pollution, including through the relevant TWG, in the coming period.

13. Closing remarks

Closing the two-day meeting, Engr. Vizminda A. Osorio, Assistant Director, Environment Management Bureau, Department of Environment and Natural Resources, Philippines, thanked all the high-level officials from the ministries of health and environment for their active participation.

She also thanked the Philippine Department of Health for their collegial support throughout the intersessional period and for co-hosting the present meeting. She noted that many of the discussions over the two-day meeting had highlighted the need to carefully manage resources and environmental protection during the region's rapid economic development. The opportunities that had been discussed and the conclusions and recommendations reached would help lay the foundation for a concerted and effective response to address concerns of environment and health of the region.

Following the customary exchange of thanks and tributes to the host Government, the meeting was declared closed.

Annex 1

List of participants

A. Country representatives

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Ms Yunyoung Jang
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Co-Chair

Thailand
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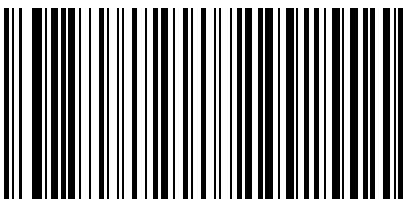
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