IMPLEMENTATION OF THE LIBREVILLE DECLARATION ON HEALTH AND ENVIRONMENT IN AFRICA LUANDA COMMITMENT

Luanda, 26 November 2010







IMPLEMENTATION OF THE LIBREVILLE DECLARATION ON HEALTH AND ENVIRONMENT IN AFRICA LUANDA COMMITMENT

Luanda, 26 November 2010





AFRO Library Cataloguing-in-Publication Data

Implementation of the Libreville Declaration on health and environment in Africa: Luanda Commitment, Luanda, 26 November 2010

- 1. Environmental Health
- 2. Environmental Monitoring
- 3. Socioeconomic Factors
- 4. Health Plan Implementation
- I. World Health Organization. Regional Office for Africa

ISBN 978 929 023 1806 (NLM Classification: WA 670)

© WHO Regional Office for Africa, 2011

Publications of the World Health Organization enjoy copyright protection in accordance with the provisions of Protocol 2 of the Universal Copyright Convention. All rights reserved. Copies of this publication may be obtained from the Library, WHO Regional Office for Africa, P.O. Box 6, Brazzaville, Republic of Congo (Tel: +47 241 39100; Fax: +47 241 39507; E-mail: afrobooks@afro.who.int). Requests for permission to reproduce or translate this publication – whether for sale or for non-commercial distribution – should be sent to the same address.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either express or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization or its Regional Office for Africa be liable for damages arising from its use.

Printed in India

IMPLEMENTATION OF THE LIBREVILLE DECLARATION ON HEALTH AND ENVIRONMENT IN AFRICA LUANDA COMMITMENT

Luanda, 26 November 2010

We African Ministers responsible for health and the environment, meeting in Luanda, Angola, from 25 to 26 November 2010;

- 1. Recalling the 2008 Libreville Declaration on Health and Environment in Africa;
- 2. Cognizant that in Africa, about 28% of the disease burden is attributable to the environment (reaching 36% in children under the age of 14 years) and that substantial health and environmental improvements and their co-benefits, especially in regard to the achievement of the Millennium Development Goals could be obtained through multisectoral actions on health and environment linkages;
- 3. Welcoming the outcomes of the first meeting of Partners held in Windhoek, Namibia, from 25 to 27 February 2009 and of the Second meeting of Partners for the Implementation of the Libreville Declaration on Health and Environment in Africa, held in Nairobi, Kenya, from 14 to 15 April 2010;
- 4. Appreciating the progress made by countries to complete their situation analyses and needs assessments and prepare their national plans of joint action;
- 5. Welcoming the report entitled "Environmental Determinants and Management Systems for Human Health and Ecosystem Integrity in Africa: First Synthesis Report" that sets out, for the first time, a situation analysis of environmental risk factors and management systems for human health and ecosystem integrity in a number of African countries, upon which evidence-based regional priorities and needs for action have been agreed;
- Concerned that Africa is already experiencing the effects of climate change that are already being felt and are likely to be more and more severe and that may exacerbate the effects of traditional and emerging environmental risk factors on human health and thereby hamper Africa's efforts to attain the Millennium Development Goals;
- 7. Noting the Bamako Declaration on the Environment for Sustainable Development and recognizing that climate change is a serious threat to poverty reduction and could jeopardize decades of development gains;

- 8. Concerned also about the adverse effects on human health and the environment from the use, disposal of and exposure to hazardous chemicals and wastes which pose a major challenge for many African governments;
- Greatly appreciating the efforts of WHO and UNEP in resource mobilization activities and the contributions made by partners including France, Germany, Spain and the Rockefeller Foundation as well as the Quick Start Programme of the Strategic Approach to International Chemicals Management;
- 10. Therefore commit ourselves:
 - (a) To accelerate the implementation of the Libreville Declaration so that enhanced intersectoral actions and co-benefits for human health and the environment are integrated into national and regional development policies, strategies and plans in order to contribute to the achievement of Millennium Development Goals, especially goals 4, 5, 6 and 7, respectively related to child health, maternal health, communicable diseases and environmental sustainability;
 - (b) To address the following as Africa's health and environment top priorities for the years to come:
 - (i) Provision of safe drinking water;
 - (ii) Provision of sanitation and hygiene services;
 - (iii) Management of environmental and health risks related to climate variability and change including rise in sea level particularly affecting Small Island Developing States;
 - (iv) Sustainable management of forests and wetlands;
 - (v) Management of water, soil and air pollution, and biodiversity conservation;
 - (vi) Vector control and management of chemicals (particularly pesticides) and wastes (including biomedical, electronic and electrical wastes);
 - (vii) Food safety and food security including the management of genetically modified organisms in food production;
 - (viii) Environmental health of children and women;
 - (ix) Health in the workplace; and

- (x) Management of natural and human-induced disasters;
- (c) To acquire or strengthen by 2014:
 - (i) National core capacities to forecast and prevent communicable and noncommunicable diseases to the extent possible and in a way that contributes significantly to a reduction of their incidence and their related morbidity and mortality especially in children and vulnerable populations;
 - (ii) National core capacities to ensure continued delivery of ecosystems goods and services in support of human health and well-being, taking into account climate change.
- (d) To undertake the following actions:
 - (i) Completing Situation Analyses and Needs Assessments in all African countries and the preparation of National Plans of Joint Action by end of 2012;
 - (ii) Strengthening and ensuring the continued functioning of the health and environment strategic alliance;
 - (iii) Establishing integrated national environment and health surveillance systems;
 - (iv) Strengthening national laboratory services to support research on health and environment linkages;
 - (v) Requiring, implementing and monitoring more systematically environmental and health impact assessments of public policies, plans, programmes and development projects, including major private sector projects;
 - (vi) Mobilizing the resources available within government budgets, and the private sector;
 - (vii) Articulating health messages within environmental advocacy frameworks and including environmental and related healthy-settings considerations in health education programmes;
 - (viii)Developing capacity building programmes for the assessment, planning, implementation, monitoring and evaluation of environmental determinants of human health and ecosystem integrity;

- (ix) Empowering local communities to understand the effects of climate change and support them in developing local adaptation strategies and capacities;
- (e) To advocate for and monitor the allocation of 15% of government budgets to the health sector as pledged by Heads of State in the Abuja Declaration of 2001;
- (f) To advocate for a substantial increase in the allocations of government budgets to the environment sector and collaborate with ministers of finance to propose a minimum percentage level for consideration by Heads of State;
- (g) To report on our achievements at the Third Inter-Ministerial Conference on Health and Environment in Africa to take place in 2012;
- 11. We request the Government of the Republic of Angola, in accordance with the existing mechanism, to work with the Prime Minister of Ethiopia in order to present the African Ministers of Health and Environment Joint Statement on Climate Change and Health at the 16th Session of the Conference of the Parties to the UNFCCC in Cancun, Mexico, in December 2010;
- 12. We request The World Health Organization and the United Nations Environment Programme:
 - (a) To increase their support for the implementation of the Libreville Declaration and strengthen their Joint Task Team to serve alongside countries as the Secretariat for the Health and Environment Strategic Alliance at the international level;
 - (b) To broaden the participation of other relevant intergovernmental organizations, development banks and regional economic communities in the Health and Environment Strategic Alliance as formal members;
 - To establish a mechanism to facilitate access by countries to existing financial resources for health, environment, and sustainable development, especially climate change funds;
 - (d) To present the experience obtained in Africa through implementation of the Libreville Declaration to other regions and relevant international forums.