

Public Health, Environmental and Social Determinants of Health (PHE)

HEALTHY ENVIRONMENTS, HEALTHY PEOPLE

PUBLISHED BY THE WHO DEPARTMENT OF PUBLIC HEALTH, ENVIRONMENTAL AND SOCIAL DETERMINANTS OF HEALTH (PHE)

Worldwide,
13 million deaths
could be prevented
every year by
making our
environments
healthier

WHO Executive Board updates: health and environment

Air pollution is one of the main avoidable causes of disease and death globally, and the recent WHO Executive Board (EB) meeting considered a report on [Addressing the health impact of air pollution](#). The report describes the links between air pollution and health and outlines strategies for prevention and control, including coordinated action between health and other sectors. The EB was invited to note the report and unanimously agreed to it. In addition, the Executive Board discussed a draft resolution on the health impact of air pollution, which received strong support from numerous countries. Further consultations will take place in order to develop a resolution that can be adopted at the World Health Assembly in May 2015.

The WHO conference on **health and climate** (August 2014) was part of the Organization's response to World Health Assembly resolution WHA 61.19. The recent WHO EB meeting reviewed the [outcomes of the conference and revised the WHO work plan on climate change and health](#). The main changes proposed to the work plan are: (i) Establishment of a partnership 'platform' to respond to the increasing number of activities and actors engaged in this field; (ii) Greater emphasis on actions that can improve health while also mitigating the extent of climate change; and, (iii) Promoting the need, and providing tools, for more systematic collection of country-specific information and monitoring of progress. EB Members unanimously agreed to these proposals and expressed strong commitment.

Among many [other topics discussed by the EB](#), a special session reviewed the current status of the WHO **Ebola** response, and made recommendations on further steps, as well as on the strengthening of WHO capacity to respond to future large-scale, sustained outbreaks and emergencies.

The 136th session of the EB was held from 26 January to 3 February in Geneva.

Sustainable development and social determinants of health

A recent workshop finalized case studies on factors influencing universal health coverage, and proposed a related country-tracking template. The workshop used the [EQUity-oriented Analysis of Linkages between health and other sectors](#) (the 'EQUAL' framework), a matrix of pathways that affect equity in health. The five-day workshop was held in Santiago, Chile in January 2015.

Country profiles and analyses from Bangladesh, Brazil, South Africa and Viet Nam will be published in a special supplement of the journal *Global Health Action* in mid-2015. It will also include practical experiences from a number of countries, including England, Mexico and Uruguay, as well as guidance on monitoring of regional action plans, such as the Pan American Health Organization (PAHO) *Regional framework for monitoring health in all policies*.

This area of work responds to World Health Assembly resolutions on socioeconomic development and health equity, calling on WHO to support Member States as they track social determinants and disparities in health. It contributes to a routine monitoring report that WHO and partners will publish in 2017 on trends and impacts of health determinants on equity, and related actions by the health sector.



UPCOMING EVENTS 2015

> 4 February

World Cancer Day

> 22 March

World Water Day

Capacity building for strengthening equity in Indonesia's Neonatal and Maternal Health Action Plans

With WHO support, Indonesia is piloting a methodology to help national health programmes improve results, meet population needs more effectively, and ensure no people or communities are missed. As part of this work, a recent event aimed to strengthen the focus on equity in Indonesia's Neonatal and Maternal Health Action Plans, drawing from the fields of social determinants, gender and human rights. The training and review workshop, held in Bali, Indonesia in December 2014, used a five-step review process to assess the nature and source of inequities, and to identify potential solutions. About 50 representatives of the Ministry of Health, other national and provincial health authorities, universities, research institutes, civil society organizations and multilateral agencies took part. A final report and recommendations will be available in March 2015.

Chrysotile asbestos publication to assist policy-makers

At least 107 000 people die each year as a result of asbestos-related diseases. Many countries have taken national actions to prohibit the use of all forms of asbestos in order to limit exposure, and to control, prevent and ultimately eliminate such diseases. But for a range of reasons, some countries have yet to act in this area. A new WHO publication assists government officials to make informed decisions about related health risks. Specifically aimed at policy-makers, [Chrysotile asbestos](#) addresses questions commonly raised in policy discussions. An updated information brief for decision-makers on elimination of asbestos-related diseases also includes a technical summary of the health effects of chrysotile, and summarizes the most recent authoritative WHO evaluations undertaken by the International Agency for Research on Cancer and the International Programme on Chemical Safety. [Click here for French, Spanish, Russian, Chinese and Arabic.](#)

Environmental Health Criteria Dermal Exposure

Dermal exposure – or contact through the skin – has been identified as an important exposure route for a variety of substances, chemicals and products. Dermal exposure can be a complex process of contact, and may take place over a period of time. A new [Environmental Health Criteria \(EHC\) publication addresses dermal exposure to chemicals](#). It describes sources and pathways of dermal exposure, estimation models and tools, and methods for reducing or preventing exposure. It also describes skin diseases associated with dermal exposure. This EHC is aimed at national regulatory authorities, assisting them to conduct health risk assessments and manage risks associated with dermal exposure to chemicals.

Facts and Figures

What are social determinants of health?

- Social determinants of health can be grouped into intermediate and structural determinants. The intermediate determinants are the life circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are shaped by a wider set of forces or structural determinants: economics, social policies and politics.

What are health inequities or inequalities?

- Health inequities are avoidable (unfair) inequalities in health between groups of people within countries and between countries. These inequities are determined by social and economic conditions.

Click [here to read](#) a full set of definitions .

SELECTED HEALTH TOPICS FROM WHO'S PUBLIC HEALTH AND ENVIRONMENT WEB SITES

[Air pollution and health](#)

[Chemical safety](#)

[Social determinants of health](#)

REGIONAL PUBLIC HEALTH AND ENVIRONMENT LINKS

[WHO Regional Office for Africa](#)

[WHO Regional Office for South-East Asia](#)

[WHO Regional Office for the Western Pacific](#)

[WHO Regional Office for the Americas](#)

[WHO Regional Office for the Eastern Mediterranean](#)

[WHO Regional Office for Europe](#)

NEW PUBLICATIONS/VIDEOS

[Watch a Swiss TV documentary on:](#)

[Endocrine-disrupting chemicals and child health \(French only\)](#)

[Fact file on Children's Environmental Health](#)



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