

# HEALTH AND ENVIRONMENT MINISTERS OF THE AMERICAS (HEMA)

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# **Background Paper for Session #1**

# BUILDING BRIDGES BETWEEN HEALTH AND ENVIRONMENT SECTORS AND SETTING FUTURE DIRECTIONS

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#### 1.0 INTRODUCTION

Human health, environment and development are unquestionably interrelated. A healthy environment is a pre-condition for good human health and successful human development. Indeed, the United Nations Economic and Social Council has recently stated that "population health cannot be maintained without ecological sustainable development".

In many countries of the Americas, as in other regions, environment departments had their origins in health departments. As responsibilities for the environment and natural resource management expanded, the evolution of environmental institutions followed an independent path and, as a result, linkages between health and environment institutions at the local, national and international levels weakened.

An increasing awareness of both the direct and indirect environment roots of health problems, as well as the perceived need for stronger health foundations for setting environmental policies and actions, is requiring a new relationship between the health and environment sectors.

This paper is an historical examination of where environment-health linkages have been made across the Americas; it also proposes a collaborative path forward. New relationships must extend not only to addressing environmental threats to human health within the spheres of influence of health and environment

### TIMELINE OF KEY EVENTS

- ⇒ UN Conference on Human Development (Stockholm -1972)
- ⇒ Forum of Ministers of the Environment of Latin America and the Caribbean begins (1982)
- ⇒ UNCED (Rio de Janeiro 1992)
- ⇒ ECOSAL I (El Salvador -1992)
- ⇒ ECOSAL II (Honduras 1993)
- ⇒ ECOSAL III (Nicaragua 1994)
- ⇒ UN SIDS (Barbados 1994)
- ⇒ First Summit of the Americas (Miami 1994)
- ⇒ Pan American Conference on Health and Environment in Sustainable Human Development (Washington D.C. 1995)
- ⇒ Summit on Sustainable Development (Santa Cruz 1996)
- ⇒ Annual G8 Ministers of Environment begins (Frankfurt 1996)
- ⇒ XII RESSCA Meeting of the Health Sector in Central America (1996)
- ⇒ Second Summit of the Americas (Santiago 1998)
- ⇒ Meeting of Env't Ministers of the Americas (Montreal 2001)
- ⇒ Third Summit of the Americas (Quebec City 2001)
- ⇒ Health and Environment Ministers of the Americas (Ottawa -2002)

departments, but also in addressing the root causes of environmental health problems with other departments and institutions.

#### 2.0 BUILDING BRIDGES

## 2.1 United Nations Conference on Environment and Development

In 1992, World Leaders met in Rio at the United Nations Conference on Environment and Development and agreed to Agenda 21 - a global plan of action to achieve sustainable

development. The Conference brought to the table discussions of the concept and challenges of sustainability; it called for sustainable development and more specifically, for sustainable human development. The Conference showed that health and development are not conflicting aspirations. To the contrary, human health is a basic ingredient of socioeconomic development. The key contribution of UNCED was to make sustainable development a global issue by committing over 150 countries to the concept and to a plan of action. Although nearly every chapter of Agenda 21 is related to human health and well-being, Chapter 6 - Protection and Promotion of Human Health is the centrepiece of the document; it reaffirms the importance of maintaining and improving human health.

# 2.2 Pan American Charter on Health and Environment in Sustainable Human Development

In October 1995, the Pan American Health Organization (PAHO), the Organization of American States (OAS), the United Nations Development Program (UNDP), the United Nations Environment

#### Some Facts on the Health - Environment Link

#### in the Americas

- Drinking water, contaminated with feces, continues to be among the most significant killers.
- Every year more than 250 000 children less than 5 years of age die from preventable causes mostly related to environmental conditions.
- Almost 1 million new causes of malaria are reported every year.
- The cholera epidemic, which started in 1991, has caused, thus far, 1.3 million victims of which more than 11 000 have been fatal. A study for PAHO calculated that because of the cholera epidemic, Peru suffered an economical loss of US\$ 490M during 1991.
- Now endemic on the continent, cholera is a
  potential threat to the US\$ 12B Caribbean tourist
  industry, which could be affected from the fear of
  cholera associated with algal blooms.
- 11% of the health burden (expressed in DALYs) in LAC are directly associated with environmental factors like poor water supply and sanitation, urban air pollution, agro-industrial waste and indoor air pollution. Unless action is taken, the health burden to be caused by air pollution in LAC will amount to 140 000 premature deaths and 4 million DALYs over the next 20 years. <sup>2</sup>
- At present it is estimated that in Latin America between 250 000 and 300 000 people live from what they can find in the garbage and frequently live in garbage dumps.
- PAHO estimates the total damage of Hurricane Mitch in Central America amounts to more than US\$ 6.5B. 9,000 people died, 74,000 dwellings were destroyed and over 2,000 water and sewer systems were affected.

<sup>2</sup> Lvovsky, K. "Health and Environment" Environment Strategy Paper No.1, Environment Department, World Bank, Washington DC, 2001

<sup>&</sup>lt;sup>1</sup> Petrera, Margarita & Montoya, Maibi, "Impacto Economico de la Epidemia del Colera – Peru 1991", Serie Informes Tecnicos No. 22-A, OPS, Division de Salud y Desarrollo Humano, Washington DC, 1993

Programme (UNEP), the Inter-American

Development Bank (IDB) and the World Bank (WB) convened the "Pan American Conference on Health and Environment in Sustainable Human Development". It was the first regional multisectoral meeting following UNCED, summoning Ministers of Health, Environment, Development, and Finance/Economy as well as representatives of governments, academia, unions and non-government organizations, and community-based organizations. The purpose of the Conference was to contribute to a better understanding of the interrelationships between health and environment across the Americas. During the preparatory phase of the Conference, countries in the Americas organized national processes to discuss the conceptual and practical aspects of incorporating of health and environmental goals/considerations into national plans and programs for development. These discussions led to the preparation of national documents serving as input for the discussions of the Conference and for the Regional Plan of Action. Plans prepared by the countries became vital input for the Regional Plan of Action. On the first day of the Conference, 11 countries in the region already had prepared their plans.

Preparations for the Pan American Conference also drew inspiration from the positive results previously obtained in Central America with the First Central American Conference on Ecology and Health (ECOSAL I) followed by ECOSAL II and III.

During the Conference, participants generated three documents which were recommended as guidelines for future actions in and among the countries of the Americas:

- 1. The Pan American Charter on Health and Environment in Sustainable Human

  Development is a joint declaration expressing the desire to pursue sustainable human development by putting health and environment concerns at the centre of national development plans. The Charter is recommended as a guideline for action in and among countries of the Americas, proposing a set of common priorities and shared responsibilities. Among the priorities common to all the countries are:
  - Updating and sharing national and local strategies for implementing commitments from UNCED and other health and environment related fora;
  - Establishing or improving cross-sectoral monitoring/surveillance mechanisms; and,
  - Extending and disseminating scientific and technical knowledge.
- 2. The <u>Regional Plan of Action</u> is a reference guide for how the principles and values of the Pan American Charter could be applied. The goals of the Regional Plan are:
  - To foster a shared perspective on health-environment-development interactions;
  - To stimulate and support vigorous action for the planning and implementation of sustainable development in every country;
  - To advance the understanding of country interdependencies and to stimulate cooperation among countries; and,
  - To develop agreements and suitable mechanisms for institutionalizing collaboration, information exchange and resource-sharing.

3. <u>Americas in Harmony: An opportunity for change and a call for action</u> is an abridged version of the discussions, conclusions and recommendations of the Conference. This report makes important contributions on how to integrate health and environment into national development policies.

# 2.2.1 The Implementation and Use of the Pan American Charter on Health and Environment in Sustainable Human Development

In some countries, the intersectoral working groups remained assembled with the purpose of disseminating the conclusions and products of the Pan American Conference. The products of the Pan American Conference were distributed widely throughout the Americas and to countries of other regions. The Charter was officially endorsed by countries at the Santa Cruz Summit on Sustainable Development in 1996.

Immediately after the Conference, participating countries made serious efforts to move forward on health and environment related activities. The first step for many countries was to convene a multisectoral working group entrusted with the responsibility to seek political support for the preparation of a national action plan for health and environment in sustainable human development. Once support was obtained at the Ministerial level, the groups proceeded to prepare a first draft of an action plan. These draft action plans were then submitted to an inclusive review process, whereby most segments of the society had the opportunity to participate.

# 2.2.2 Regional Activities

Since 1995, PAHO has been promoting activities in countries which have adopted the Pan American Charter and the Regional Plan of Action. Relevant instruments from the World Health Organization (WHO) and other WHO Regional Offices have also played important roles in bridging gaps between health and the environment within member countries, specifically "Health, Environment and Development – Approaches to drafting Country-level strategies for Human Well-Being under Agenda 21" (WHO/EHE/93.1).

PAHO, and more specifically, its Division of Health and Environment, made considerable adjustments to their strategic orientation and programs in order to respond to the mandates from UNCED, the Summit of the Americas meetings, the Pan American Conference on Health and Environment in Sustainable Development, and other demands from member countries.

Assessments have demonstrated that there is evidence of institutional and technical limitations in many Ministries of Health in relation to the capabilities necessary to adequately manage various aspects of environmental health, particularly aspects of environmental impact assessment, environmental epidemiology and toxicology, risk assessment and communication.

For this reason, PAHO has been implementing a regional program for strengthening the environmental health units of the Ministries of Health. This program, presently active in most Latin American countries, includes among its strategies, addressing primary environmental care and children's environmental health. Furthermore, PAHO and WHO

have intensified their efforts to promote more integrated approaches to childhood diseases by incorporating a water and sanitation component as a key measure for reducing child mortality and morbidity.

UNEP has been very dedicated to implementing its mandate from UNCED. Among other important activities, UNEP/ROLAC is collaborating with member countries in preparing and maintaining National Environmental Strategies and Action Plans; maintaining regional environmental assessment processes (GEO – LAC); promoting projects such as Environmental Assessment and Early Warning, Environmental Management, Citizen Participation, Integral Management of Water Resources, Climate Change, Clean Air in Cities, as well as Education and Training and Enhancement of Cleaner Production Practices and Technologies.

## 2.2.3 Sub-regional Activities

In 1996, Ministers of Health and Heads of Social Security in Central America invited their colleagues, the Ministers of Environment and the Heads of the Water Companies, to join them at the XII RESSCA (Spanish acronym for the Meeting of the Health Sector in Central America). Discussions and conclusions of this meeting led to the preparation of the Central American Action Plan – "Environmental Health in Central America: A Vision of the Future Within an Integrating Framework". This Plan is presently being implemented in all Central American countries.

Other sub-regional health and environment focused activities are being developed by MERCOSUR (sub-groups 6 and 11), SICA- the Central American Integrating System and its Environment and Development Commission – CCAD; and the Caribbean Cooperation on Health Initiative of CARICOM.

Equally important are the NAFTA-related mechanisms and organizations such as the North American Commission for Environmental Cooperation (NACEC), the Border Environmental Commission and the Border XXI Program.

### 2.2.4 National Activities

National activities across the region vary widely. Some countries are making significant progress in the area of environmental health under the guidance of the Charter and the Regional Plan of Actions. Other countries are still trying to overcome challenges and difficulties, and seeking political support. Nevertheless, a collection of successes has been accumulated in the six years since the Pan American Conference. Every country in the region has undertaken some activities to improve the relationship between the environment and health, as recommended in Agenda 21 and by the Pan American Conference on Health and Environment in Sustainable Human Development.

#### 2.3 Lessons Learned

A detailed regional evaluation of the implementation and achievements of the Charter and the regional Plan of Action has not yet been carried out. Nevertheless, close to seven years after the Pan American Conference, some important conclusions can be drawn and lessons can be learned.

#### 2.3.1 Intersectoral Cooperation

In most countries, activities were promoted and carried out by one, rather than several, sectors jointly. The benefits of intersectoral cooperation are still very much unknown or

questioned. Real partnership for efforts related to environmental and human health is still not a common approach in most of the countries. This is not only true for governments but also for non-government organizations. They also tend to have a singular view of the scope of their work, rather than promoting more holistic and integrated views and actions in relation to environment and human health.

There is an inherent perception of loss of visibility or ownership when more than one actor, (i.e., sectors, ministries, agencies or NGOs), carries out projects and activities. In spite of the positive results already obtained in some countries, there is still a great need to generate and disseminate data and information about the benefits of multisectoral policies and actions to improve environment and human health.

Nevertheless, it is important to point out that environmental health emergencies are typically dealt with using a multisectoral approach. A challenge that remains is the use of the multisectoral approach on a business as usual basis.

#### 2.3.2 Commitment

Efforts around the Pan American Conference have produced a substantial number of excellent documents (i.e., declarations, national plans, policy statements, norms, and regulations). These documents are essential to the promotion of sustainable human development.

Nevertheless, it is felt that six years after the Regional Conference, the time has come to inject new energy in, and obtain renewed commitment for, the regional and the national processes. This is not unlike what is happening, to a large extent, with Agenda 21 and other commitments made by many countries in international events.

It is expected that the World Summit on Sustainable Development (WSSD) being held in Johannesburg, South Africa this year will help to renew and strengthen these commitments toward Agenda 21. The active participation of the national health and environment sectors in the Johannesburg meeting is thus critical.

After Johannesburg, considerations could be given to holding national events in each country to revisit the Pan American Charter and the Regional Plan, with the objective of adjusting national action plans for health and environment.

#### 2.3.3 Community Participation

Activities related to the decision-making process are predominantly centred at the national level of government. During the preparation of national health and environment action plans, there were only a few instances where local levels of government and communities were involved in decisions being made on priorities and strategies.

The non-participation of communities and grassroots organizations left many plans and proposals without political sustainability, and therefore vulnerable to changes according to specific interests. The full involvement of decentralized political mechanisms and grassroots organizations is mandatory for the successful development of national and local plans of action. Increased community participation will also contribute to the generation of political commitments at national decision-making levels.

## 2.3.4. Technological Resources

The availability of technological resources has not been a significant barrier for the execution of national plans of action. Notwithstanding the need to continuously develop new technologies and improve existing ones, it is apparent that for most programs, projects and activities proposed in the national plans, there is an adequate level of technological knowledge and experience in the Western Hemisphere.

Nevertheless, channels and mechanisms for sharing technologies must be improved and systematized. Fortunately, the active participation of organizations like UNEP, UNDP, OAS, PAHO/WHO, and many bilateral agencies, has facilitated the transfer and exchange of technologies. Regional and global projects and programs are also important.

Projects and mechanisms such as the International Forum on Chemical Safety (IFCS), the Environment and Health Project for the Central American Isthmus (MASICA), and UNEP's Assessment and Early Warning in the Caribbean have been instrumental in sharing technology among countries. However, there could be an even greater awareness of products and services available to the environment and health sectors.

### 2.3.5. Financial Resources

The lack of financial resources is one of the main limitations on the implementation of health and environment national action plans. Because national action plans constitute a holistic approach for planning actions to improve environmental health, it is unreasonable to expect them to be funded by a lump sum or by one single source.

Health and environment issues continue to be absent from most national development policies and plans. Nevertheless, much can be done with the resources already assigned to each sector. Two things are required: the political will to combine resources, and a solid integrating instrument such as a specific national, departmental or local plan of action for health and environment.

At the national level, the formulation of shared agendas, common strategies and integrated policies will need relatively few financial resources. Joint (health and environment sectors) political efforts must be made in order to convert local demands for financial resources into a political demand so that they will be considered when plans for development and their respective budgets are formulated.

### 2.3.6. Follow up

The Pan American Conference, the Charter, and the Plan of Action have each generated significant momentum in national environment and health development plans. The two years following the Conference were particularly productive in developing documents and plans of action.

The 1997 PAHO progress report showed that most countries had national health and environment plans and were implementing activities. Starting in 1998, this momentum began to lose strength and political support in most of the countries. The intersectoral working groups slowed or stopped functioning.

It has become evident that there is a need for permanent stimulus and support for the implementation of actions recommended in the Pan American Charter and the Regional

Plan of Action. There is also a need for a systematic meeting of countries to exchange experiences and provide mutual support.

Lessons learned and shared experiences are important ingredients in this collective continental effort of generating and maintaining health-promoting environments. For example, the NACEC; the Central American Integration System (SICA) with CCAD, RESSCA and MASICA; and some efforts by CARICOM and MERCOSUR, reveal the important synergetic effects that can be obtained.

In spite of important achievements by some countries, a collective hemispheric approach is mostly absent. There is an urgent need to establish a hemispheric mechanism for follow up and follow through with Charter and Plan of Action proposals and recommendations.

#### 3.0 SETTING FUTURE DIRECTIONS

#### 3.1 Intersectoral Actions for Health and Environment

Nearly 10 years after UNCED and 7 years after the Pan American Conference, it is clear that much more must be done in terms of incorporating health and environmental issues into national planning for sustainable human development. There is evidence that if two sectors work together, better results can be obtained.

As discussed in the Pan American Conference (and stated in the Pan American Charter and Regional Plan of Action), there is a need for an overall hemispheric health and environment strategy, together with national and local strategies.

The formulation of such integrated policies is made possible by a set of principles shared between the two sectors. The Pan American Charter also suggests a number of common priorities, which shared among the Health and the Environment Sectors, could serve as common ground for joint actions:

- Update and strengthen national and local strategies for implementing commitments, concerning environment, health and development;
- Establish or improve cross-sectoral monitoring/surveillance mechanisms able to identify and assess existing hazards to humans and the environment;
- Initiate early and effective action to control environmental conditions with adverse health effects on many communities, and in particular, provide adequate and safe water supplies and effective domestic and municipal sanitation systems for the large number of rural and urban dwellers currently deprived of basic needs;
- Extend and disseminate scientific and technical knowledge, by establishing linkages and networks for research and communication, and by eliminating barriers to technology transfer within and among countries;
- Develop conceptual frameworks, action models, information systems, and human resources able to deal with development issues systematically, across disciplines and sectors, and at every level of social organization;

- Define and implement arrangements for increased participation and grassroots action and control in socioeconomic development processes; and,
- Redefine needs for international cooperation and support, in light of national and local priorities in their sustainable development strategies.

# 3.2 Proposal for a Follow up Mechanism

To be effective and following from the lessons learned in the six years following the Pan American Conference, it is essential that there are at least two instances for planning and monitoring the execution of health-environment actions: the National level and the Regional level.

# 3.2.1 National Level Follow-up

In most of the countries of the hemisphere the implementation of health and environment activities are losing, or have lost, momentum. One of the reasons identified is that in most of the countries there is no clear definition of responsibility for formulating policies, strategies and plans of action for joint efforts of health and environment. It has been observed that unless there is one body with this responsibility, efforts will likely be isolated and ineffective.

There are several alternative solutions to this problem. In Europe, for example, some countries have given shared responsibility

#### The European Experience

In 1989, the WHO Regional Office for Europe initiated a series of ministerial conferences on environment and health, creating a forum where ministers meet to discuss issues of mutual concern. The First Ministerial Conference on Environment and Health (Frankfurt) was held in 1989 where the European Charter on Environment and Health was adopted.

The Charter established the WHO European Center for Environment and Health to carry out its programs, and ministers agreed to meet every 5 years to review progress made and to set future directions.

At the Second Ministerial Conference on Environment and Health (Helsinki) in 1994, a comprehensive assessment of the state of health and the environment in Europe entitled "Concern for Europe's Tomorrow " propelled ministers to adopt the Environmental Health Action Plan for Europe and to commit their countries to develop national environment and health action plans (NEHAPs). It also propelled them to establish the European Environment and Health Committee (EEHC).

The Third Ministerial Conference on Environment and Health (London) took place in 1999. Ministers agreed to the continuation of an expanded EEHC with the inclusion of NGOs and other major groups.

The Fourth Ministerial Conference on Environment and Health will take place in 2004 and the overall theme is "A Sustainable Future for Our Children". To date, 44 of 51 European countries have developed NEHAPs and are currently implementing them.

The (EEHC) presently functions with eight country representatives, 12 representatives of intergovernmental bodies and six representatives of major groups. The Committee meets semi-annually. WHO/EURO provides the Secretariat to the Committee. Its annual operational budget is US\$70,000 (currently provided by Italy \$50 000 and Ireland \$20 000). WHO/EURO covers the salaries for staff members who serve on the Secretariat for EEHC.

to either the Ministry of Health or to the Ministry of Environment. Others have preferred to constitute a special Intersectoral Commission.

Since the beginning of the effort to incorporate health and environment into the national development plans in the Americas, there has been a preference of constituting Intersectoral Committees or Commissions. Many of these are no longer active or have lost a significant part of their political influence. Revitalizing these mechanisms is fundamental to making progress in the area of health and the environment.

For this reason, it is proposed that the both sectors in each country make a joint effort to constitute or reconstitute a National Health and Environment Commission or Committee.

# 3.2.2 Regional Level Follow-up

Cooperation among countries is a major requirement of a hemispheric effort to improve environmental health conditions. Collaboration, expressed in terms of sharing experiences and resources, providing mutual support and joint work, requires an effective mechanism for follow-up. As mentioned earlier, the absence of such a mechanism for following up on the Pan American Charter and follow-through with the commitments of the Plan of Action have caused a slowing of activities and a loss of the vision of the interdependency of health and environment.

The next section describes a proposed follow up mechanism for HEMA. This proposal is greatly influenced by the successful European Health and Environment Committee's mechanism.

## 4.0 Health and Environmental Ministers of the Americas Follow Up Mechanism

The proposed mechanism consists of four components.

# Component 1: Meetings of Health and Environment Ministers every four years prior to the Summit of the Americas

During these meetings Ministers would discuss and agree upon actions and future directions for the advancement of the environmental health agenda in the region, monitor progress and prepare messages for Summit Leaders.

# Component 2: Ministerial Steering Committee

This committee would be composed of Health and Environment co-chairs from one country and 6 or 8 ministers (ideally half Environment, half Health) to represent the 5 major regions in the hemisphere. Observers from other international organizations such as the Inter-American Development Bank, World Bank, Economic Commission for Latin America and the Caribbean, North American Commission for Environmental Cooperation, and Organization of American States would be invited to attend the Ministerial Steering Committee meetings as appropriate, as would non-governmental organizations. The role of the Ministerial Steering Committee would be to sustain momentum and provide guidance to the Senior Officials Committee on behalf of the Hemispheric Ministers. The Ministerial Steering Committee would meet intersessionally, on an "as needed" basis.

### Component 3: Senior Officials Committee

This would be composed of senior officials of the representatives of the Ministerial Steering Committee. The Senior Officials Committee would meet/correspond regularly to advance the work endorsed by Ministers.

# Component 4: Interagency Secretariat (PAHO/UNEP)

The Pan American Health Organization and the Regional Offices of UNEP - Latin America and the Caribbean (ROLAC) and North America (RONA) would support the HEMA follow up mechanism by acting as the Secretariat for the Ministerial Meetings, Ministerial Steering Committee and the Senior Officials Committee.

All components of the follow-up mechanism would utilise existing regional and subregional mechanisms and institutions for specialised collaboration and advice as appropriate.

Two general questions for consideration during Session 1 of the Health and Environment Ministers of the Americas Meeting are as follows:

- 1. How can we ensure that the partnership between the health and environment sectors in the Americas is maintained and strengthened?
- 2. Would the mechanism proposed above meet our needs for follow-up? Are there additional elements to consider?

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The Pan American Charter on Health and Environment in Sustainable Human Development The Regional Plan of Action for Health and Environment in Sustainable Human Development