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Progress report on the regional plan of action for implementation of the roadmap for an enhanced global response to the adverse health effects of air pollution

Introduction

1. In May 2015 the Sixty-eighth World Health Assembly adopted resolution WHA68.8, in which the Director-General was requested, inter alia, to propose to the Sixty-ninth World Health Assembly a road map for an enhanced global response to the adverse effects of air pollution. The road map, which was adopted by the Health Assembly in May 2016, is intended as a tool to enable the health sector to take a leading role in raising awareness both of the impacts of air pollution on health and of opportunities for public health.

2. Air pollution is one of the major avoidable causes of disease and death globally and in the Eastern Mediterranean Region. WHO estimated in 2016 that 36% of deaths from lung cancer; 35% of deaths from chronic obstructive pulmonary disease; 34% of deaths from stroke and 27% of deaths from heart disease are attributable to air pollution. This translates into more than 250 000 deaths annually due to exposure to ambient (outdoor) air pollution; about 200 000 deaths annually due to exposure to household (indoor) air pollution; and about 43 000 annual deaths due to exposure to the second-hand tobacco smoke.

3. Both indoor and outdoor air pollution levels are quite high in many countries of the Region. The WHO global urban ambient air pollution database (2016 update) shows that levels of air pollution with particulate matter in the Region were the highest in the world during the period 2008–2015. The limited studies available indicate that at least half of air pollution in the Region occurs naturally from pollutants such as sand, dust and sea salt, and the rest is generated from human activities including transport and industry.

4. Reliance on unclean fuels, such as solid fuels and kerosene, for cooking, heating and lighting is a major source of indoor air pollution in some countries. Regional data on the indoor use of fuels such as kerosene are limited. More than one third of individuals in the Region are exposed to second-hand tobacco smoke, another major source of indoor air pollution.

5. In October 2016, the WHO Regional Committee for the Eastern Mediterranean issued resolution EM/RC63/R.1 in which it requested WHO to submit to the 64th session of the Regional Committee an evidence-based plan of action for the regional implementation of the global road map to address the health impacts of indoor and outdoor air pollution.

6. The regional plan of action for implementation of the road map for an enhanced global health response to the adverse effects of air pollution is presented in Annex 1.

Overview of the regional plan of action

7. The regional plan of action for the implementation of the road map was developed by the WHO Centre for Environmental Health Action in collaboration with partners. It was discussed and finalized during a consultation in Amman, Jordan, on 24–25 May 2017 involving international and regional experts from the health and environment sectors. The plan of action takes into consideration the regional context including climate and local air pollutants, availability of monitoring data and the status of national surveillance systems and policies for controlling air pollution. Like the road map, the plan is linked to relevant targets of the Sustainable Development Goals and also considers developments that offer opportunities for synergies and efficiencies at global and regional levels, such as the Paris Agreement on climate change (2015), Marrakech Declaration on Health, Environment and Climate Change (2016) and Arab Strategy on Health and Environment 2017–2030.

Annex 1

Plan of action for the regional implementation of the roadmap to enhance the global response to the adverse health effects of air pollution 2017–2021

Global output	Regional strategic intervention	Action by countries	WHO support	Indicator	Baseline (2017)	Target (2021)
1. Evidence is enhanced and widely accessible on health impacts of air pollution, health risks and benefits of specific sector policies, and on the effectiveness of interventions. Institutional capacity exists at the national and subnational levels to conduct such analysis and communicate results	Development of regional and national public health communication tools to disseminate relevant information to stakeholders and the public	Disseminate evidence-based information on health impacts of air pollution and mitigation interventions to all at the national and subnational levels	Disseminate up-to-date knowledge and evidence on health impacts of air pollution and mitigation interventions to all countries of the Region	Number of countries disseminating information on health impacts of air pollution and mitigation interventions	3	15
	Development of evidence on health impacts of natural air pollution (dust and sea salt particulate matter) and on relevant mitigation interventions, for use in the development of WHO air quality guidelines	Conduct time series, chemical apportionment and other relevant apportionment studies on health impacts of air pollution in dusty environments	Review systematically all published information on natural air pollution and its control measures, reflect findings in updated WHO air quality guidelines and provide technical support to conduct these studies on the national level	Number of countries with studies on health impacts of air pollution in dusty environments conducted	1	5
	Building capacity to conduct health risk assessment of indoor and outdoor air pollution in order to advocate actions by related sectors	Assess health impact of air pollution and/or its mitigation policies using AirQ+ or other similar tools	Train experts from health and other sectors to conduct health risk assessment of air pollution, and the use of relevant tools	Number of countries with completed assessment of health risk of air pollution and/or air quality management policies	1	10
				Number of countries that received training on health risk of air pollution and/or air quality management policies	1	22
	Conducting research to bridge regional and national gaps in knowledge	Conduct research to bridge national gaps of knowledge, such as : partial toxicity of air pollution; relation between outdoor and indoor air pollution;	Provide technical support and assist in designing research protocols; support sharing of findings with all relevant stakeholders	Number of countries with new research studies addressing gaps in knowledge related to air quality and health	0	10

		source apportionment ; etc.				
2. Global, regional, country and local monitoring and reporting are enhanced on health trends associated with exposure to air pollution and its sources, including in the context of the post-2015 Agenda for Sustainable Development and contribution to reporting of related indicators (e.g. SDGs for health, energy and cities). This is informed by national and subnational (e.g. city-level) monitoring efforts	Improving regional and national capacities for harmonization of country level monitoring, data collection and analysis on outdoor and indoor air quality and health	Collect harmonized and updated health and environment data for health risk assessment of air pollution using standardized tools and protocols	Establish a regional network to support monitoring and reporting on health risks of air pollution, and adopt and promote framework and supporting tools for harmonizing country, and regional data collection and monitoring activities	Number of countries collecting indoor and outdoor air quality and health data	16	22
	Improving existing global databases and monitoring and reporting systems with updated regional and national data, e.g. on urban air quality and on household fuels, heating/cooking technologies and indoor air pollution	Collect national and subnational data relevant to population exposure to indoor and outdoor air pollution (SDG indicators 7.1.2. and 11.6.2)[1] and report them to the regional and global WHO database on air quality	Collect data on indoor and outdoor air pollution from countries and cities of the region and store them in the relevant global databases	Number of cities for which harmonized health and environment data related to air pollution are collected and reported to the WHO databases	81	120
				Number of countries for which data on solid fuel used are available	21	22
	Reporting and disseminating regional and national estimates of burden of disease attributed to air pollution	Conduct national studies on burden of disease attributable to air pollution and share results with all	Support strengthening of national capacities of the health and environment sector for assessment of burden of disease	Number of countries reporting SDG indicator 3.9.1	0	10

[1] 7.1.2: Percentage of the population relying on clean fuels and technologies for cooking; 11.6.2: Annual mean levels of fine particulate matter ($PM_{2.5}$) in cities

		stakeholders (SDG indicator 3.9.1)[2]	attributable to air pollution			
				Number of countries completing national studies on the burden of disease attributable to air pollution	0	22
3. Stakeholders at global, regional and country levels engaged in coordinated action, to prevent diseases caused by air pollution and to obtain the full range of health benefits from mitigation activities	Development of a comprehensive strategy to tackle health impacts of air pollution in the Region	Develop and coordinate national and subnational plans of action on air quality management for health protection including an update of national air quality standards, response to local issues (e.g. dust storms, conflict and war related pressures) and exposure management; assure efficient communication between governmental bodies, private sector and nongovernmental organizations implementing the actions	Document and promote good practice examples of policy processes in various sectors addressing health aspects of air pollution (e.g. in cities, in household energy)	Number of countries establishing comprehensive air quality and health action plans	3	12
	Developing strong communication strategies to raise awareness and stimulate demand for policies to tackle air pollution, prevent diseases and improve well-being at regional, country and local levels	Establish a national media system for communicating public health information, advice and awareness raising on air pollution and health involving relevant stakeholders and nongovernmental organizations	Provide technical support to help in establishing national communication systems for dissemination of health-relevant messages on air pollution	Number of countries with a national system for communicating public health messages and advice during air pollution episodes	0	10

[2] 3.9.1. Mortality rate attributed to household and ambient air pollution;

	Identifying actions to address air pollution and health in other relevant regional processes related to health, environment and sustainable development	Integrate air pollution considerations into national strategies on: health and environment, climate change, sustainable development, and healthy cities	Provide technical support and advocacy tools for integrating air quality improvement in other policy processes	Number of countries integrating air quality considerations in policies of various sectors	1	7
	Inclusion of air pollution reduction in regional and national public health programmes and strategies, e.g. to prevent communicable and noncommunicable diseases	Integrate air pollution and health into national strategies on health, in particular in a strategy on noncommunicable diseases	Provide technical support and advocacy tools for integrating air quality management in other health policy processes	Number of countries integrating air quality considerations in national health strategy	12	18
4. Health sector capacity for addressing adverse effects of air pollution on health enhanced at the global, regional and country levels, including in the context of other sector policy processes, including at WHO. National and/or subnational strategies developed to support such action.	Developing tools and guidance to support implementation of WHO air quality guidelines as relevant, and for the promulgation of national and subnational action plans on air pollution and health. Tools are being piloted in a few countries and cities and updated accordingly	Update national air quality standards in line with the WHO air quality guidelines and local conditions	Provide technical support and advocacy tools facilitating establishment of national air quality standards in line with WHO air quality guidelines	Number of countries with national standards on air pollution developed in line with WHO guidelines	0	4
	Strengthening institutional capacity and programmes at the regional and global levels, including within WHO; ensuring coordination of actions of various international organizations	Strengthen the capacity of the health sector to implement, in collaboration with other relevant sectors (including nongovernmental organizations and academia), actions reducing adverse health impacts of air pollution	Develop training materials and provide technical support to build health sector capacity for leading intersectoral actions at national and subnational levels addressing the health aspects of air pollution	Number of countries with institutions appointed to address health aspects of air quality on the policy level	0	5