Environmental determinants of health in Africa

Continental challenges and change

1. Advocacy
The SANA reports show that advocacy is needed to positively influence both policy makers and the public.

- **Funding**
  - National advocacy is needed to increase, integrate and rationalise funding for environment and health.

- **Policies**
  - Currently, no country in Africa has an integrated health and environment policy, which is essential.

- **Integration**
  - Joint advocacy is required to establish a national collaborative framework integrating environment and health.

- **Implementation**
  - Policy makers need to be supported in implementing international conventions.

Policy makers → Public

- Audience-specific information for key groups, such as youth, women, urban communities, will impact society through...
  - **Raising awareness**
    - The public needs to be made aware of the services ecosystems provide to human health and the importance of international conventions.
  - **Education**
    - More programmes should be developed to educate the public, such as Green school, Clean school in Guinea.
  - **Risk reduction**
    - Public advocacy is needed to help prevent environment-related disease. For example, South Africa’s National Environmental Health Policy is under development to promote preventative behaviour.

2. Policy
In order to ensure sustainable development, health and environment policies must be integrated. This includes breaking down silos and implementing new structures and processes.

- **What is pushing health and environment apart?**
  - State bodies work within sectoral mandates.
  - Integrated or collaborative policies are scarce.
  - A political paradigm shift is required that bridges sectoral divides.
  - Where Multilateral Environmental Agreements are signed or ratified they are often not implemented.
  - Poverty Reduction Strategy Papers (PRSPs) and other poverty alleviation structures do not factor in linkage for environment and health.

- **Environmental policies**
  - In too many countries, environmental policy and programming still occur in a context that is separate from health.

- **Health policies**
  - Currently, environment-related health is only a peripheral issue in many countries’ health policies.
  - Health factors due to climate change are also poorly covered.

---

**Policy makers**

Auditing parliamentarians, local government authorities, (education) ministries and the private sector will require...

---

**Audience-specific information for key groups, such as youth, women, urban communities, will impact society through**

- **Raising awareness**
  - The public needs to be made aware of the services ecosystems provide to human health and the importance of international conventions.

- **Education**
  - More programmes should be developed to educate the public, such as Green school, Clean school in Guinea.

- **Risk reduction**
  - Public advocacy is needed to help prevent environment-related disease. For example, South Africa’s National Environmental Health Policy is under development to promote preventative behaviour.

---

**What is pushing health and environment apart?**

- State bodies work within sectoral mandates.
- Integrated or collaborative policies are scarce.
- A political paradigm shift is required that bridges sectoral divides.
- Where Multilateral Environmental Agreements are signed or ratified they are often not implemented.
- Poverty Reduction Strategy Papers (PRSPs) and other poverty alleviation structures do not factor in linkage for environment and health.

---

**Environmental policies**

- In too many countries, environmental policy and programming still occur in a context that is separate from health.

---

**Health policies**

- Currently, environment-related health is only a peripheral issue in many countries’ health policies.
- Health factors due to climate change are also poorly covered.
3. Regulations and legislation

Many countries have been slow to develop and enforce local environment-related health regulations. International conventions may be signed, but are often not fully implemented.

<table>
<thead>
<tr>
<th>International conventions and implementation</th>
<th>Countries ratified</th>
<th>Countries with National Implementation Plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>1973 CITES (endangered species trade)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1989 Basel Convention (hazardous waste movement)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1991 Bamako Convention (hazardous waste movement in Africa)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1992 UNFCCC (United Nations Framework Convention on Climate Change)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1997 Kyoto Protocol (climate change)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. Regulations and legislation

Many countries have been slow to develop and enforce local environment-related health regulations. International conventions may be signed, but are often not fully implemented.

Why is coordination a problem?
- There is no integrated monitoring and evaluation for health and environment programmes.
- There is no coordinating mechanism for surveillance and research.
- National poverty reduction plans do not feature health and environment goals.
- Institutional arrangements for the coordination of poverty, environment and health programmes are lacking.

What needs to happen next?
- Establish overarching national coordination mechanisms.
- Set up research coordination systems and databases.
- Establish environment and health task teams.
- Improve dialogue between sectors.

4. Intersectoral coordination

In all African countries, strategic alliances between environment and health structures are weak or non-existent. Strengthening intersectoral coordination is key.

5. Institution building

To practically address the challenges of environment and health, countries in Africa need to establish numerous new structures and systems.

What needs to be strengthened and built?
- Observatories for monitoring and surveillance
- Skilled and educated staff
- Integrated surveillance and research
- Resource centres and libraries
- Intersectoral coordination mechanisms
- Operational systems working across all levels
- Clear strategies
6. Human resources

Responding to environmental health threats calls for skilled, motivated people who are able to work across disciplines and between diverse agencies.

How did countries prioritise human resources for the 11 Libreville action points?

High priority

Low priority

7. Financial resources

For all developments, increased funding and improved resource allocation is essential. Some countries report being unclear on precise spending and that, in some areas, there is duplication of efforts.

How did countries prioritise financial resources for the 11 Libreville action points?

High priority

Low priority

8. Research

For Africa to make progress in addressing and integrating environment and health, solid and systematic research is required.

The ideal research process:

Research agenda
- All countries lack an integrated research agenda. This is needed for addressing the threats to health from environmental sources.

Continuous data
- Many countries report gaps in data collection. A continuous system for data collection is needed.

Quality data
- Poor data is reported as a challenge. This could be improved with better data management and enhanced analysis.

Systematic analysis
- Analysis of information on environment and health is undertaken separately. A combined analysis where the issues intersect is rarely undertaken, but sorely needed.

Sharing
- Most countries lack the resources to produce and share an annual State of the Environment Report or a regular National Health Report. No countries disseminate a regular environmental health report.

Knowledge in action
- Research is often used only for academic purposes. Various countries say it should be gathered and used as evidence for knowledge formulation.

South Africa SANA report: “We need high-quality and continuous data to support an integrated monitoring and evaluation system.”

Swaziland SANA report: “The research findings should be translated into policies and actions.”

Ethiopia SANA report: “Research is scattered and does not follow a unified agenda.”

Gabon SANA report: “We need regular publication and dissemination of research results.”

Guinea SANA report: “We need to equip research institutions with suitable resources and train and recruit researchers.”

Funding is currently siloed, but joint funds for environment and health are required.

Many countries report a lack of funding, especially for the environment branch. In Tanzania, the Ministry of Health’s environmental protection unit is fully donor-dependent. A change in fund allocation is therefore required.

Knowledge institutions are in need of more funding to ensure quality surveillance and risk assessment, as well as continuous data collection.