NGO Report back
Newscaster Script

Genon: Good Afternoon and welcome to RPG News. I’m Genon Jensen,

Sascha: and I’m Sascha Gabizon

Genon: And we’re coming to you live and direct from the Vienna Inter-ministerial Conference on Health and Environment.

Sascha: Today we have a special segment prepared for you: “Beyond Budapest,” Where we will be taking a look at progress made on the children’s environment and health action plan. We plan to ask the critical questions: where have we come from, what are we doing, and where are we going?

Genon: But first, let’s start from what we know. We have four special reporters standing by ready to give news from the field, presenting some of the challenges facing children across Europe. Challenges like respiratory diseases, asthma, obesity, diarrhea, developmental disorders and childhood cancer. They will be able to give some solutions and ideas for future action.

Sascha: Now, let’s go to our Country Reporter in the Field, Diana Iskreva in Bulgaria.

Diana speaks

Slide 1: no wonder that safe water and sanitation is the Regional Priority Goal number 1. There are still 40 million people in Europe living without access to safe drinking water and 85 million people living in Europe that do not have access to safe sanitation.

Slide 2: In the European region, the burden of diarrhoeal disease attributable to poor water, sanitation and hygiene, in children aged 0-14 years is estimated at more than 13 500 (or 5.3% of all deaths).

Slide 3: read
Slide 4: While at global level the % of population supplied with safe water and sanitation is constantly growing, this % is constantly dropping down in the rural areas of the Eastern Part of Europe (in the countries of transition). As we are seating with you here, some more people in the villages of Eastern part of Europe are loosing accesss to safe water and sanitation facilities that they used to have! Here is an example from the rural part of the Kyrgyz republic.

Slide 5: As we are witnessing the reality on this picture, we should not be surprised that, 75% of kids with waterborne diseases, in the eastern part of the continent, got exposed to contamination, while being in their kindergartens and schools, vs 6% in Western Europe.

Slide 6:
These are the problems. Are they being addressed?
In 2003, the NGO Brussels Statement called on governments to finally ratify the Water & Health Protocol

The Good news is that the protocol is in force and has an excellent workplan, concrete steps, tasks divided

The Bad news is that many countries still have to ratify it and there is a lack of funding for the adequate implementation of the workplan.

Slide 7: what we believe should be the governments first priority, is to improve school sanitation immediately! Only the government has both the authority and the responsibility to eradicate these problems! Highest urgency exists for schools in rural areas. The kids there urgently need clean and safe toilets but also hand-washing facilities and access to safe drinking water. We have seen cases where the authorities closed the drinking water well of the school, and did not provide an alternative. We believe, all schools MUST have safe water and sanitation facilities!

Slide 8:
So what can your ministers of health and environment do? They should make sure that
safe school sanitation is at the top of their government agenda, they should legislate that schools without safe sanitation get funding. Your ministers should do this in collaboration with local governments, Ministers of Education and Public Works.

Also, your ministers should make sure that the EU structural funds and developing funds are being spent to improve also the environmental and health conditions in kindergartens and schools, guaranteeing safe water and adequate sanitation for the children. In this way saving 13 500 children lives in Europe each year!

Currently hardly any funds are targeted at the most needy, the school children in rural communities without safe water supply and sanitation.

Slide 9: For the rural communities we need to look at other technologies than the expensive centralized sewage treatment systems. Focus should be on small size water supply systems and On-site ecological sanitation systems like wetlands and dry urine diverting toilets.

These small systems can create local employment.

Slide 10: Currently, these new systems encounter many legislative and institutional barriers. We believe that governments should Transpose into national legislation the WHO Guidelines for safe re-use of human excreta and grey water in agriculture.

And we believe they should enforce effective Water source protection legislation to contain also pesticides, latrines, animal waste, solid waste.

Slide 11: This is what we ask governments to do. We, the NGOs of WECF network, have committed additionally by 2009, that we will Improve the health of 10.000 school children and provide 25 schools with low cost, dry urine diverting toilets; to protect groundwater from infiltration of faecal bacteria and nitrates Demonstrate benefits of reuse of wastewater and nutrients in agriculture.
And we are working on bringing down the price of our demonstration toilets to reach the same cost as a VIP latrine.

Slide 12: this is an example, illustrating how we are working, above you see the old pit latrine of a village cultural center in Bulgaria, and below the new ecosan system, with hygienic urine diverting toilets and grey water treatment facility.

Slide 13: we hope that governments will support ours and other citizen’s initiatives of this kind, to immediately help improve our children’s health.

I now, while we enjoy a few images from the Danube Delta Teens water protection project in Romania entitled Waste in Water Hurts Our Health, I hand back to our studio in Vienna.

Sascha: Thank you for that insightful report. That picture of a school latrine was quite shocking, I can’t imagine my 6 year old daughter having to use such a latrine.

Genon: (nod in agreement). Now let’s go to our International Safety Expert, Joanne Vincenten. Unfortunately our correspondent on built environments, physical exercise and obesity is off ill and won’t be able to report on this segment, today. We will bring the news at a later date. Over to you Joanne.

SLIDE TWO: What’s the problem?
- In Europe, more children die of injuries than all other childhood diseases.
- It has greatest environmental burden of children compared to outdoor/indoor contaminants, water, sanitation and hygiène issues, with great inequities in Central and Eastern Europe.
- An estimated 10 billion Euros was spent treating injuries to children in 1999 in the EU alone.
- If what we know about effective prevention strategies was applied by member states today researchers estimate that 90% of injuries could be prevented.

QUESTION FROM GENON: Well has there been any progress since Budapest in 2004?  
Yes there has been progress

SLIDE THREE: Progress since Budapest 2004
- 1st-More political commitment to action by Member States  
  O WHO Resolutions on Injury Prevention and Child & Adolescent Health  
  O EU Communication & Recommendation on injury  
  O UNICEF hosted a regional consultation to add injury as one of their priorities  
  O More countries are working on child safety action plans

- 2nd- Multi-sectoral action growing  
  O As evidenced by the many report backs by working on CEHAPe  
  O 1st UN Global Road Safety Week and  
  O National educational campaigning for child home safety is underway in many countries

-3rd- Increasing capacity to address child injury prevention  
  O 1st European Conference on Injury Prevention & Safety Promotion, June 2006  
  O WHO Focal points for injury prevention named by most Ministers of Health in the Europe region.  
  O 29 Member States are participanting in joint work to address child injury prevention as part of a European network composed of NGO’s Member State governments, academics, researchers, and practitioners.

QUESTION FROM GENON: That sounds great so are we almost there?  
Well there is still more work to do.

SLIDE FOUR: Challenges to further progress
- 1st- Current commitment and resources are not commiserate with the size
of the problem.
O To do a good job a core group of people and funding needs to be
dedicated to the issue.
O In particular support of families in low income environments

- 2nd- More strategies need to go beyond educational campaigns alone.
O While education is an important and essential part of a
comprehensive approach to injury prevention, the most effective
approach is a combination of education, environmental or product
modification and enforcement through legislative measures and that
these are done in a way to meet the needs of low income populations.

- 3rd. Surprisingly no country in the European region has
implemented all of the recommended good practice strategies to
reduce child injury.
O For example there is a national law requiring child resistant
packaging of medications and chemicals in Germany and the UK to
reduce childhood poisoning, but not all other member states are
following this lead.
O Also only France has national laws requiring pool fencing for
private pools proven to reduce childhood drowning and controlled
temperatures for tap water to prevent scalds.
O The Czech Republic and Sweden have recently adopted legislation
for use of bicycle helmets, yet many other countries have not taken
up and enforced this proven good practice.

QUESTION FROM GENON: So what is needed to overcome the
challenges?

SLIDE FIVE: Key recommendations for 2009
Honour the commitment to promote safe, secure and supportive
human settlements for all children in Europe by:
- Investing in child injury prevention, especially in low income
countries and families living in poverty to reduce inequalities.
- Developing national child safety action plans that are incorporated
into broader national policies.
- Adopting, implementing and enforcing what works. The evidence
exists, it just needs to be done.
- Enhancing capacity to develop, implement and evaluate effective injury prevention strategies

In closing the timing is right with the World report on child injuries to be released in 2008 and the 5th Ministerial Conference on Environment and Health in 2009 all of Europe will be watching and waiting to see the results of a safer Europe for children.

Thank you Joanne – it is good to hear we’re making progress on RPG II, and that the roadmap for action is clear for the next ministerial.

Sascha: Let’s turn now to our Brussels Political Correspondent, Christian Farrar-Hockley. Christian, can you hear us?

Christian Speaks

Welcome to Brussels,

Please excuse me for the respiratory infection that I have contracted that unfortunately has been exasperated by fine particulate matter.

Let me take you back: Budapest 2004 both our Environment and Health Ministers committed to reduce respiratory disease in children. The Irish Minister for Health at the time had just announced the success of Ireland’s smoke-free policy, and encouraged other ministers across the Region to do the same.

Since Budapest, many more countries have implemented smoke free public and work places such as Italy, Norway, Spain and Belgium, and the UK will do so in three weeks. This is one area where countries have made significant progress but we want to ask ministers today in this process to actively work towards a European Region of smoke free places for our children.

How much did we achieve since Budapest on Outdoor air.

Unfortunately this is an area where we have lost the most Important fights for children’s health.
In the EU, governments will fail to adopt EU Air Quality standards based on WHO health guidelines. Last week patients groups, clinicians, scientists signed a declaration with key European Parliamentarians saying ‘The EU and national governments must liaise with other agencies to understand and reduce the impact of environmental factors on asthma such as smoking, air pollution, hazards in schools, day care, the work place and home, as well as other environmental triggers.’ A clear message that many of our politicians have now woken up the emerging crisis of respiratory disease related to air pollution.

Speaking Yesterday to one of our leading respiratory health researchers and an excellent pediatrician, he stated on top of these increasing rates he was really worried about increasing rates of COPD (chronic obstructive pulmonary disease) because he said “I don’t know how to help COPD sufferers.”

The International Society for Environmental Epidemiology (including Europe’s leading scientists) and The European Respiratory Society (made up of over 17,000 respiratory doctors) have called for standards to be based on WHO Guidelines. The European Respiratory Journal stated that in conclusion, the proposed air quality directive does not adequately reflect the best scientific evidence.

As an example of this a breakthrough Dutch study traced the health of 4,146 youngsters before birth to the age of four. They tested the children’s blood and found that children living close to busy roads, showed increased likelihood of asthma, wheezing, ear, nose and throat infections, colds and flu.

An internal source in the European Commission reported that Commissioner Dimas responsible for EU’s environment is making good progress from his emergency eye operation in New York, we at RPG News wish him a quick recovery. He has done a marvellous job in explaining that with a little push you (member states) will be able to substantially improve the air our children breathe.

INDOOR AIR QUALITY
Is it true that indoor air pollution is a major problem for air pollution in eastern Europe?

Yes Sascha the situation of the majority of the poor in EECCA countries have to chose either to be poisoned from indoor waste burning for heating or to freeze in winter. I will give you the example of Armenia: in Armenia about half the population live in poverty. They have to burn either waste, diesel, kerosene or tar to heat their houses and schools.

The health-damaging pollutants such as particles carbon monoxide, sulphur oxides, Benzo Perene and dioxins. Many of these are heavy toxicants even carcinogenic. There unfortunately is a complete lack of control of air quality in spaces these children occupy.

Like Armenia many EECCA countries face the same problems. With the increase of energy prices more and more families are being cut off from gas supplies. Urgent measures have to be taken by Governments to switch clean energy sources and provide access to these for the most vulnerable.

A report just in the technical people doing economic costings (IIASA) headlining a report ‘Joined up air policies “Could Save Lives”’ Combining air and climate policies could bring the cost of complying with air quality regulation estimated at €7.1Bn annually down to 0. – better public health for free.

To sum up: Keep Moving East on controlling tobacco, ask your car manufacturer for the strictest air quality standards, we need immediate support for children in poor families in eastern Europe to reduce respiratory diseases in Europe.

Finally, please contact you’re member of parliament and ask them to protect your childs health, if they do not set the example who will.

This is Christian Farrar-Hockley Perspective from Brussels. Back to Genon and Sascha in our Vienna studio.

Sascha: Thanks Chris! I hope your cold is getting better soon.
Genon: Thank you for that insightful report. We have to move quickly now to our Parenting and Health Expert from Munich, Sonja Haider.

Sonja Haider and Genon converse.

We are privileged to have our health expert SONJA HAIDER in the studio. She has just come back from the NGO Conference to prepare for this meeting. One session focused specifically on Hazardous chemicals.

Tell me Sonja I heard that a brand new EU chemicals legislation called REACH has just entered into force at the beginning of last week. Will this really help improve children’s health as many governments are saying?

SONJA; Well, REACH in our opinion is a first step but we think it is too early to celebrate.

We need the help of the governments to ensure a strong implementation. They need to make sure that it takes care of the special vulnerabilities of children such as their developing brains.

We also hope that companies will use the safer chemicals than outside of the European Union and don’t apply a double standard.

To save the intelligence of our children, OECD is currently creating new tests and governments should adopt these tests as soon as they are available.

GENON: So this is an action for the governments to prioritizing finalizing these OECD tests.

My next question to you Sonja is what are the problems with pesticides, another issue which falls under RPGIV?

SONJA; Well, We’ve heard from our colleagues in the Eastern part of the Region that cleaning up the obsolete stockpiles of pesticides and
other Persistant organic Pollutants is very important. So parents and children have to know about the health dangers of these sites and parents should not allow their children to come close.

In the western part, NGOs are concerned about whether the new pesticides legislation will take on board what scientist recently published in the Faroer Island statement. Since Budapest we have this new evidence of the health effects of pesticides on children and particularly on the development of their brains. 1 in every 6 children has developmental disabilities. So it's time to act now!

GENON;
Imagine your child being less intelligent due to this? We need to think how we can encourage more organic production, this is already being pursued in many countries.

And what about chemicals used in consumer products? Can we replace the most hazardous?

SONJA: The good news is YES. There are many safer alternatives and many countries in the Nordic region and leading companies are already promoting them, particularly for products aimed at children. For example it's unnecessary to use PVC in children's rain gear.

Another good news is, that GREEN CHEMISTRY is also taking off. This is something that we hope the chemical industry will invest in as an innovative and competitive avenue for the future! Maybe this is something that the World Business Council for Sustainable Development can report on in Italy - 2009.

GENON; What about nanotechnology, I've heard a lot about it, particularly that we don’t know enough about the long term health implications.

SONJA
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Well the EU scientific committee has recently said that there is evidence that nano particles can affect your lungs and we don’t know
yet what the long term effects are. My question is == do we really need it in our products such as sunscreen for children?

GENON
OK we are running out of time. My last question for you is about what the NGOs will be doing in the next year?

SONJA:
I want to mention two concrete projects. We will bring the results of these to the Ministerial in Italy.

The Nesting project has been developed by WECF Women in Europe for a common Future and its member organizations. It aims to help parents create a healthy and safe environment for their newborns to improve children’s health right from the beginning.

Another project is the CHEMICAL HEALTH MONITOR carried out by HEAL, the Health and Environment Alliance to get hazardous chemicals out of consumer products by providing information on the health effects and the science behind it.

I only have time to mention these two, but many more exist.

Wrap:
Sascha:. (speaking to Genon). Wow, that was an impressive account on the Budapest progress situation. I think are a number of recurring themes in the reports we should come back to and draw some conclusions.

Genon: Yes, clearly one of the main issues is access to resources, and quite frankly environmental injustice. The poor are clearly the most adversely affected and suffer a disproportionate exposure to environmental harms, and as with other, and as many of our viewers will know, it is the children who suffer the most. They are more likely to lack access to safe and clean water, more likely to have air-polluted indoor environments at home and at school, and more likely to suffer the various effects of chemical pollution, or suffer from an accident.
Sascha: I agree, Genon, but although poverty reduction and inequalities is contained in the CEHAPE as an overarching goal, not much progress has been made in addressing this issue, or at least we have not heard about it. NGOs are saying much more should be done by governments and civil society before they meet again in Italy in 2009. Maybe we can have a report on measures how to address environmental inequalities and the burden of disease, ready for 2009.

Genon: In the Pan-European region, and even within the EU, there are clearly inequalities in people’s access to environmental benefits, and exposures to environmental hazards. For instance, we heard that it is often poor children that live next to busy roads. Not only suffering from higher rates of asthma, but also more likely to get hit by a car. We need legislation that simultaneously addresses environmental protection and human rights, not just for today, but for future generations.

Sascha: Yes, I fully agree, and when we think about integrating multiple aspects it’s important to note that environmental health involves more than just environment and health. Better inter-ministerial and inter-sectoral cooperation would really benefit the process. And speaking of benefits, as we heard from RPG III, the EU alone would save about 161 billion Euros yearly if they could just reduce air-pollution deaths.

Genon: It’s clear that environmental health aspects must be taken into account from the start when developing policy. Dialogue between the energy, transport, industry, agriculture, planning, education and most importantly the finance ministries is needed. As we increasingly talk about sustainable development, the environment and health process offers a wonderful example, particularly as the one we are working on focuses on children. Sustainable development becomes tangible, ...

Sascha: I agree. I would like to make final point, we need to focus on the physical vulnerability of children, particularly in prenatal stage. Since Budapest, we have come a long way in our scientific understanding of how low levels of exposure to certain chemicals in the womb can contribute to diseases that only occur later in life.
Back then, we already thought we needed to move faster, but now we know it! It’s clearly TIME to ACT. I was shocked to hear that probably millions of children have reduced intelligence, not only from lead and mercury, which we know about, but potentially from as many as 200 other very commonly used chemicals. Governments should use REACH implementation to prioritize substituting known endocrine disruptors like pthtalates, bishpenol-A and brominated-flame retardants with safer alternatives.

Genon: Now what I’m worried about is that we have this excellent process, Future of our Children, with its Children’s Environmental Health Action Plan Europe….which can give us the tools to implement fast action to improve children’s health.

For this process to continue, we need each actor here, to prioritize it. It would be good if WHO could put it higher on its own agenda. This can only done, if member states clearly ask WHO to do so. The EU’s mid-term review has recognized the value of working on environment and health, and as we have seen in the media coverage already, this is a topic that appeals to the public.

Sascha: Governments need to think creatively have to give this process the highest priority and much more funding. And legally binding options should be considered, alongside opportunities for 25 of the EU countries, to put children’s health protection in legislation.

**Credits**
Genon: Well, that concludes our special segment, “Beyond Budapest.” You can find the written transcript on the Healthy Environments for Children website. This report has been made possible by the NGOs in the field daily, the WHO, and all the governments in this room. Without your support none of this would’ve been possible, and we need your continuing commitment (and ours) so that this process will save the lives of many many children.

Sascha: That’s all from RPG News. I’m Sascha Gabizon

Genon: And I’m Genon Jensen
Together: And this is RPG News!