

## **Manila Declaration on Health and Environment**

- 1) Considering the long history of global commitments to sustainable development, united by the common goal of attainment of healthy lives through healthy environments from the 1992 United Nations Conference on Environment and Development on Agenda 21 to the 2015 United Nations resolution, Transforming our world: the 2030 Agenda for Sustainable Development, and the Paris Agreement on climate change;
- 2) Recognizing that at no other point in human existence has there been a rate of environmental change that so profoundly threatens the health of people and the planet, and that degradation of our environment and destabilization of our climate compromise our access to the most fundamental requisites for human existence: potable water, clean air, safe food and shelter;
- 3) Acknowledging that despite extraordinary gains made toward the Millennium Development Goals (MDGs), universal sustainable access to safe water and basic sanitation has not been fully achieved; communities, schools, health-care facilities and workplaces still lack resilience to climate-related disasters, and poor air quality has become the largest single environmental health threat; as such, it is no surprise that in the Asia-Pacific region, an alarmingly high 7.3 million deaths annually are due to environmental conditions<sup>1</sup>, a quarter of the entire burden of disease;
- 4) Recognizing the dire need for the environment and health sectors to collaborate more closely than ever, that the time for business as usual is over, that global warming of 2 °C means nothing less than the demise of low-lying island nations from sea-level rise and climate-related disasters, and that environment and health sectors need convergence and synergy to prevent further damage and to mitigate, adapt and respond to our changing environment;
- 5) Aware that the Sustainable Development Goals (SDGs) provide us with a renewed opportunity to work on common goals and targets to reverse the deterioration and degradation of our environment and restore development to a sustainable path, understanding that biodiversity gives rise to benefits for human health, demanding resolution of environmental issues to achieve health targets;
- 6) We, the Ministers of Health, Ministers of Environment and Heads of Delegation participating in the Asia-Pacific Regional Forum on Health and Environment call on our governments, the international development community, civil society organizations and other key players including the private sector to enhance the way we work to achieve tangible progress on realistic and measurable targets in environmental health areas within the SDG framework and consistent with other agreements including RCM recommendations and commitments;
- 7) In particular, we will endeavour to:
  - a. Take urgent action to combat climate change and its impacts (SDG 13), and to orient development and public health systems to become more climate-resilient;
  - b. Take urgent action to improve outdoor air quality to reduce the number of deaths and illnesses from the adverse effects of air pollution, and to realize the health benefits of mitigation actions by ensuring clean air for health and well-being, including prevention of

---

<sup>1</sup> WHO (2016). Preventing disease through healthy environments: a global assessment of the burden of disease from environmental risks.

**Asia-Pacific Regional Forum on Health and Environment**  
**6–8 October 2016, Manila, Philippines**

the recurrence of transboundary haze through the promotion of sustainable management of forests and the prevention of land degradation and biodiversity losses (SDG 15);

c. Ensure availability and sustainable management of water and sanitation for all. This includes universal access to safely managed water and sanitation services, and hygiene, especially for women and girls, wastewater management and integrated water resource management (SDG 6);

d. Substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water, and soil pollution and contamination (SDG 3.9), through environmentally sound management of chemicals and all wastes throughout their life-cycle (SDG 12.4) and substantial reduction of waste through prevention, reduction, recycling, and reuse (SDG 12.5);

e. Reduce the adverse per capita environmental impact of cities by adopting sustainable urban design principles that promote healthy lifestyles and sound environmental management including access to safe walking and cycling, efficient public transport, safe waste management, reduced carbon emissions, renewable energy sources, and safe and healthy workplaces (SDG 11.6) as well as vector-borne diseases such as dengue and malaria;

8) We commit ourselves to support the work of the WHO, UNEP and other international agencies and partners to address the following emerging policy priorities relevant to the SDGs:

- a. Transboundary air pollution, including short-lived climate pollutants<sup>2</sup>, in consideration of the World Health Assembly Resolution on the health impact of air pollution<sup>3</sup> and its roadmap for implementation, and the United Nations Environment Assembly resolution on air quality<sup>4</sup> (SDGs 3, 11, 12);
- b. Illegal transboundary shipment and dumping of waste (SDGs 3, 11, 12);
- c. Destruction of coral reefs and marine pollution, which threaten marine biodiversity, in consideration of the United Nations Convention on the Law of the Sea (SDG 14);
- d. Antimicrobial resistance, stemming among others from unsafe management of health-care wastes and wastewater in general requiring collaboration with the agriculture sector among others and by reducing the incidence of infection through effective sanitation, hygiene and infection prevention measures (SDGs 3, 6) with reference to the World Health Assembly Resolution on Antimicrobial Resistance<sup>5</sup>;
- e. Promotion of environment and health impact assessment as one of the tools for achieving more sustainable and equitable development, including valuation of economic costs of health and environmental impacts due to pollution;

---

<sup>2</sup> Climate and Clean Air Coalition – <http://www.ccacoalition.org>; and [http://www.who.int/phe/health\\_topics/outdoorair/climate-reducing-health-risks-faq/en/](http://www.who.int/phe/health_topics/outdoorair/climate-reducing-health-risks-faq/en/)

<sup>3</sup> WHA68.8 – [http://apps.who.int/gb/ebwha/pdf\\_files/WHA68/A68\\_R8-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA68/A68_R8-en.pdf)

<sup>4</sup> UNEP/EA.1/7 – [http://www.unep.org/unea1/UNEA\\_Resolutions.asp](http://www.unep.org/unea1/UNEA_Resolutions.asp)

<sup>5</sup> WHA67.25 – [http://apps.who.int/gb/ebwha/pdf\\_files/WHA67/A67\\_R25-en.pdf?ua=1&ua=1](http://apps.who.int/gb/ebwha/pdf_files/WHA67/A67_R25-en.pdf?ua=1&ua=1) and updated in summary report on progress made in implementing resolution WHA68.20.

**Asia-Pacific Regional Forum on Health and Environment**  
**6–8 October 2016, Manila, Philippines**

- f. Enhancing WHO's access to key resources such as the Global Environment Fund and Green Climate Fund, given its unique knowledge of the health sector and its convening power on health issues including environmental health;
- 9) We believe that through dialogue, sharing of information and collaboration both at national and regional levels, we can transform our lives, our health, and our environment to ensure the well-being of current generations and protect future generations from disasters; and
- 10) We thank the people and the Government of the Republic of the Philippines for hosting and supporting the Asia-Pacific Regional Forum on Health and Environment.