

Energy Activities of WHO

(SUMMARY)

Contact: Y von Schirnding, Focal Point: Agenda 21; WHO

Energy, being key to sustainable development and its impact on the environment and on poverty alleviation, has great importance and relevance to WHO as the lead agency on health. Energy considerations, broadly defined, form an important component of many differing activities and programmes of WHO. Several key policy and strategy documents have guided, and continue to guide, the work of the World Health Organisation in regard to energy-related activities. These include the renewed Health-for-All policy (HFA in the 21st Century), Agenda 21 (Chapter 6, for which WHO is task manager), and other policies and strategies relevant to WHO, especially its cluster on Sustainable Development and Healthy Environments. These establish a range of differing objectives which are directly or indirectly related to energy activities. WHO's work is conducted in collaboration with other agencies in the UN system, regional and international organisations, collaborating centres, research and academic institutions, NGOs and others.

The following are examples of activities that have constituted part of WHO's programmes related to energy development and use, some indirectly through broad planning initiatives concerned with health in sustainable development and poverty reduction:

- * Assessing impacts on health of development policies and projects, including energy-related aspects, promoting and supporting research and capacity-building in health impact assessment, for example in relation to dams/reservoirs for hydropower generation;
- * Contributing to health risk assessment of different energy sources, technologies and systems;
- * Monitoring and assessing linkages between development, health and environment impacts, incorporating an energy dimension; this includes also the development of indicators and methodologies;
- * Promoting and conducting assessments of health impacts and intervention strategies related to various forms of household energy (emphasis on biomass burning), as well as capacity-building, awareness-raising and policy development (A strategic initiative on household energy, fuel poverty and the indoor environment has been promoted at WHO - case studies on policies and strategies to address the problem have been initiated);
- * Strengthening capacity at national and sub-national levels in policy and planning for health in relation to sustainable development and poverty reduction, through mechanisms such as A21, HFA, Healthy Cities, PRSPs, national planning and related initiatives. This involves many sectors, including energy;
- * Conducting activities in the area of radiation protection, including health risk assessment, follow-up on the health effects of Chernobyl, developing preparedness and response mechanisms in radiological emergencies through a radiation emergency medical preparedness and assistance network of collaborating centers;
- * Conducting activities in the area of EMF, including health risk assessment, identification of research needs, development of criteria and standards, studies of risk perception and communication, and support and advice to national authorities;
- * Assessing air quality and health implications in urban areas, relating to emissions from motor vehicles, industries and energy sources; providing monitoring data and information;

- * Promoting the assessment of health benefits (near- and long-term) in relation to various energy-related sectors which derive from changes in energy efficiency and energy use;
- * Supporting climate-related activities in terms of international frameworks and conventions, and initiatives such as IPCC and the Climate Agenda process, incorporating a health and development perspective;
- * Supporting programmes to protect the health of workers and communities by promoting clean energy and clean technologies in various sectors, including the informal sector;
- * Promoting the use of alternative technologies in the rural health sector, focussing on the provision of vaccine refrigerators for the EPI cold chain; and
- * Assessing health impacts on end-users of services provided by energy, such as of cooking, heating, lighting, provision of water and sanitation.