

Health Care Without Harm Europe



With a fascinating insight into their global advocacy agenda, **Anja Leetz**, Executive Director of HCWH Europe illuminates two fundamental human rights – the right of access to healthcare and the right to a healthy environment

Could you begin by telling us how the Health Care Without Harm (HCWH) Europe organisation was established?

HCWH was originally founded in the US in 1996. In 2001, several environmental activists working on medical waste, occupational health and healthcare construction projects in 13 different European countries met to discuss how to address national challenges in a European context. At that time, the EU was preparing for the accession of 10 new Member States in 2004, which meant that eight central and eastern European and two Mediterranean countries were transposing EU laws into national laws and standards. This presented both a challenge and an opportunity for the health sector, and enabled the pioneers of HCWH to offer training and information in those regions. By 2003, the European part of HCWH was officially founded and registered as a non-profit organisation in The Netherlands with an office in Prague. By 2009, HCWH Europe had moved the principal office to Brussels, the European capital, reflecting its renewed engagement with old and new members on policy development as well as implementation across Europe.



Promotion of the Global Green and Healthy Hospital Agenda in Malmö at CleanMed Europe 2012. Left to right: Dr Shu-Ti Chiu, Director General, Bureau of Health Promotion, Department of Health, Taiwan, Gary Cohen, Founder and President of Health Care Without Harm, USA; Sonia Roschnik, Operational Director, NHS SDU, UK; Anja Leetz, Executive Director, Health Care Without Harm Europe, Belgium.

© Svensk Fotostudio AB

Who makes up the HCWH consortium, and what does each member bring to the table?

Our membership is diverse, and includes over 514 organisations in 53 countries globally. We have over 70 members in Europe. Members are hospitals and healthcare organisations, local and regional councils that provide healthcare, medical and nursing professionals, community groups, health-affected constituencies, labour unions, and environment and health organisations. Each member group is unique and may offer a different approach in their daily practice, but we come together in sharing the goal of healthcare that is free of harm. We see our role very much as a facilitator and enabler for sharing best practice and we encourage networking across national borders to learn from different approaches.

What is the mission and vision of HCWH?

In a world that is facing an unprecedented global environmental and social crisis, healthcare needs to change to play a role not only in healing individual patients, but also in helping to heal the environment and the communities that are served by healthcare delivery systems. Additionally, healthcare itself is a major industrial enterprise and suffers accordingly from all the contradictions of a system powered by fossil fuels and toxic chemicals – it is a major source of pollution and related public health impacts.

HCWH's mission is to transform this disequilibrium in profound ways. First, we educate the healthcare sector to understand the importance of the environment in the onset of disease in the broader world community. Second, we work with the sector to clean up its own house, based on the environmental agenda that HCWH has created over the last 16 years. Third, we press healthcare leaders and professionals to advocate for broader societal policies and changes that are more protective of everyone on the planet and which will help prevent diseases in the broader global society. Fourth, we push the enormous purchasing power of healthcare to drive markets and stimulate innovation for safer products across a wide array of sectors.

We recognise that the science linking environmental factors with a broad array of diseases and health conditions is continuing to unfold, and given that this is a rapidly expanding field, research is crucial in helping us through a looming period of profound global environmental, social and economic change. During this next period, it will become more and more challenging to support healthy people on a sick planet.

As we realise that the prospects of living a healthy life are limited by climate change impacts, toxic chemical proliferation and other environmental factors beyond the control of individuals and even nation states, addressing these challenges will increasingly merge with global advocacy for the right of every individual on the planet to have access to basic, affordable and appropriate-scale healthcare services. HCWH sits at the intersection of these two fundamental human rights – the right of access to healthcare and the right to a healthy environment.

One of the greatest tasks of humanity in the next couple of decades is to heal the relationship between industrial civilisation and the environment which sustains us, by creating economies that are in alignment with natural systems. Given that healthcare provision will be one of the core functions of the global community and remains a core component of industrial civilisation as it attempts to 'green' itself, its status as a model sector will only gain in prominence. Healthcare can be catalytic in linking health issues with the move to a low carbon economy. No other sector has the same standing to accomplish this linkage. HCWH is positioning itself at the epicentre of this transformation and will help steer the sector toward environmental sustainability in service of a disease prevention agenda.

How are you working with the healthcare industry to solve issues that are harmful to health?

We offer guidance documents and briefings on specific subjects, which include lessons and best practice examples from our members. For example, we have translated the City of Vienna's 'EcoBuy' guidelines because we believe their way of addressing public procurement in the city is worth spreading. We often find innovative but localised solutions that we would like to put forward to achieve the systemic change that the sector and the environment need. Providing European policy makers with data and examples from leaders in the field is beneficial for the policy debate, demonstrating that change is possible and indeed that it already exists. Our publications are often presented at various stakeholder groups and meetings. In 2011, HCWH released a pragmatic 10-goal guide, the 'Global Green and Healthy Hospitals Agenda', a comprehensive environmental health framework for hospitals and health systems around the world. The agenda is designed to share and disseminate best practices, tools and resources, and measure progress. It is now supported by over 4,000 hospitals and systems globally. This has great potential to be the change-maker we need for current global problems.

Do the HCWH's arms in the US and Europe often work together to implement sustainable healthcare practices? Could you provide examples of where this has happened most recently?

HCWH has an international council that comprises not only the offices in the US and Europe, but also those in Latin America and Asia. At the council we discuss the latest developments in our regions and share research, reports, results and impacts, and agree jointly on positions relevant to our global work. Although we are a number of legally independent entities, we strive to work as one organisation to promote the vision and mission globally. Other nations' healthcare systems differ from those in the US, and it is very beneficial for all regions to inform each other and reflect on their own work.

One of our longest campaigns has been the phase-out of mercury-based products (thermometers, blood pressure devices) in healthcare globally. While the US has used a market-based approach, in Europe we used a legislative approach, so although we share the same goals, the strategies and tactics to achieve these may vary. The World Health Organization (WHO)-HCWH global initiative to substitute mercury-based medical devices in healthcare is a key example of successful collaboration. The goal is to achieve virtual elimination of mercury-based thermometers and sphygmomanometers over the next decade, substituting them with accurate, economically viable alternatives.

What more can be done to educate the public about sustainable healthcare practices?

While we engage with the health sector because we believe it has a moral obligation to be a leader for change, we also think it is important to advance the debate on prevention and public health. The best hospital is the one that does not need to be built, saving resources, materials and energy. We need to move beyond the acute care system and involve the general public far more in health education, accordingly enabling individuals to take responsibility for their own health, changing lifestyles

Speaking at CleanMed Europe
2012 in Malmö copyright
Svensk Fotostudio AB

and patterns. Modern tools like the internet and apps are one way of active engagement which can educate the public about health and share the concept of environmental health. We need to discuss today what life may look like in a low carbon and resource-constrained society and how health systems will have to change to reflect this. The UK National Health Service (NHS) Sustainable Development Unit has created pioneering visioning scenarios that are worth exploring and discussing.

Are there any events in the organisation's calendar that are of particular importance this year?

CleanMed will be held in Boston in April and in Oxford in September this year and are the world's leading conferences focusing on sustainable healthcare. CleanMed provides attendees with a holistic view on the impact of healthcare on society – at both global and local levels – and shares best practice case studies. It is a good meeting point and motivator for innovative solutions for both hospitals and industries that provide goods for the sector.

Finally, where are you hoping to focus your efforts in the near future?

There is mounting evidence that pharmaceutical residues in the ground, water and air are a challenge that will need addressing urgently, especially if we face a water shortage beyond our imagination in the coming years. Having access to clean drinking water is an essential need for humans. While we recognise the challenges for drug development – such as changing the drug formulae to improve body uptake, gene-related medicine and upgrade of water treatment plants – there are a lot of very practical solutions which would not cost society extra but which could be very effective in addressing current issues. Available solutions are procurement and prescribing practices using the 'wise list' of pharmaceuticals from our member Stockholm County Council, reducing the quantities of drugs prescribed and take-back schemes that ensure safe collection and destruction of unused medication. We clearly see the need to highlight best practice and to encourage sharing of European data. Pollutants are often world travellers which do not respect borders, so it is in the interest of all to address the challenges speedily.

The best vision for HCWH would be to become obsolete in the near future. We will have learned from many good examples, changed policies and practices accordingly, then moved towards prevention, and ultimately enabled people to take charge of their own health. In comparison to now, only a small number of people will need acute care. We will be treading softly on Earth, having reduced our impact and thus allowing ourselves to focus on new challenges. But until we have realised this vision we will continue working for people and planet.

www.noharm.org/europe

