Who We Are

Health Care Without Harm (HCWH) is an international coalition of 484 organisations in more than 53 countries. HCWH has offices in the United States (Washington DC, Boston and San Francisco), the European Union (Brussels), South America (Buenos Aires), and South East Asia (Manila). HCWH also has close programmatic partnerships with organisations working in the African Region (in Durban, South Africa, in Dar es Salaam, Tanzania) and in the South Asian Region (in Delhi, India).

The Mission of HCWH

To transform the healthcare sector worldwide, without compromising patient safety or care, so that it is ecologically sustainable and no longer a source of harm to public health and the environment.

The Eight Goals of HCWH

1. Create markets and policies for safer products, materials and chemicals in healthcare. Promote safer substitutes, including products that avoid mercury, polyvinyl chloride (PVC) plastic and brominated flame retardants.
2. Eliminate incineration of medical waste, minimise the amount and toxicity of all waste generated and promote safer waste treatment practices.
3. Transform the design, construction and operations of healthcare facilities to minimise environmental impacts and foster healthy, healing environments.
4. Encourage food purchasing systems that support sustainable food production and distribution, and provide healthy food on-site at healthcare facilities.
5. Secure a safe and healthy workplace for all healthcare workers.
6. Ensure patients, workers and communities have full access to information about chemicals used in healthcare and can participate in decisions about exposures to chemicals.
7. Promote human rights and environmental justice for communities impacted by the healthcare sector, while assuring that problems are not displaced from one community or country to another.
8. Address climate change by improving energy practices and reducing the overall climate footprint of the healthcare sector.
In 2009, climate change became a major issue on the global political agenda, with the UN governmental meeting in Copenhagen in December at the peak of interest. Climate change poses not only environmental threats, but also major pressure to human health. This is already evident in impoverished communities with limited resources to cope and can be seen with the increasing incidence of severe events like heat waves, floods and droughts that all pose an immediate threat to health and life.

HCWH Europe worked with European members and other HCWH regions and partner organisations such as the Health and Environmental Alliance (HEAL) and the Climate and Health Council (CHC) to build consciousness and gather the health community in support for strong measures to tackle climate change. This was manifested most prominently through the “Prescription for a Healthy Planet”, signed by over 100 organisations and many medical professionals and experts. Although the Copenhagen summit fell well short of the necessary ambition, many participants could be convinced that putting health issues high on the climate change agenda might help to overcome the deadlock. So in spite of general disappointment we can still hope.

HCWH’s continuous work to eliminate one of the most significant health threats in healthcare - the use of mercury-containing equipment - continued during 2009. We provided evidence to EU politicians that mercury-free alternatives are available and in widespread use in hospitals. EU legislation must close the remaining loopholes and eliminate mercury-based technology. At the core of Health Care Without Harm are our member organisations - setting good examples and continuing to build achievements at local hospitals and nationally. The work ranges from waste reduction work, energy saving in hospitals, green procurement and much more.

HCWH Europe set up an office in Brussels in mid-2009 to serve as a central node for the organisation. The office also hosts PAN Europe, an NGO working on pesticide issues. The monthly Health & Environment Newsletter started in spring and provides a stream of news and in-depth articles relevant to the healthcare sector. The publication of the newsletter was taken over by one of the HCWH member organisations, CPES - UK, towards the end of the year.

Financially, 2009 provided continuous challenges, with traditional funders having their own troubles caused by the global financial crisis. HCWH is therefore consciously searching new sources of funding. The situation looks somewhat brighter in the wake of 2010 and we hope the situation will become more stable as we move along. The general interest and support for HCWH’s core issues is growing which makes me confident that the healthcare community will continue to grow as a strong force for a green and sustainable world.

After five years of service in the board of HCWH Europe, most of that time as chairman, Dr Gavin ten Tusscher resigned from the board in late 2009. The board members are very grateful for all the excellent work and expertise Gavin has provided during these years.

Letter from the Board

Per Rosander
Chair of the Board of Directors
2009 was the year of great hope and big disappointment in terms of achieving a political agreement on climate.

Our work on climate and energy aims to highlight the health impact and cost of climate change to society and encourages hospitals to share best practice on mitigation strategies. Our partnership with the WHO on climate explores the challenges for mitigation in a joint report: Healthy Hospitals, Healthy Planet, Healthy People. In 2009 we have presented HCWH concepts at various conferences and meetings. For example, at the clean energy conference in Freiburg, Germany, at the World Congress on Public Health in Istanbul, Turkey and at a Green Hospital Conference in London, UK, to name a few.

Together with other players in the field we mobilised the health community to advocate policies that contribute to limiting climate change. In support of this we launched ‘Prescription for a Healthy Planet’, which over 100 associations and many more individuals have signed in support so far. We launched the ‘Prescription’ in Brussels in Europe with the EU Commissioner for Health, Androulla Vassiliou, in October, and globally in Barcelona at the UN climate negotiations. We formed a delegation of 20 health people in Copenhagen for the UN COP 15 negotiations, held daily health briefings, spoke to other delegates, took part in an action with the International Federation of Medical Students’ Associations - and eventually learned that world leaders had failed our climate and people’s health.

The UN negotiations in December 2009 did not deliver the agreement so badly needed by the world. The Copenhagen Accord is a non-binding declaration without clear commitments from any government. It falls far short of a legally binding and ambitious roadmap for reducing emissions to protect the climate and people’s health. Our efforts have to be increased to achieve an agreement in Cancun in 2010.
Global Land - Ocean Temperature Index

2009: Second Warmest Year on Record; End of Warmest Decade

2009 was tied for the second warmest year in the modern record, a new NASA analysis of global surface temperature shows. The past year was only a fraction of a degree cooler than 2005, the warmest year on record, and tied with a cluster of other years — 1998, 2002, 2003, 2006 and 2007 — as the second warmest year since recordkeeping began.
Safer Materials in Medical Devices

The EU agreed a Mercury Strategy in 2005 aiming to reduce both levels in the environment and human exposure to mercury, especially from methylmercury in fish. The strategy proposed 20 actions in order to reduce emissions and protect against exposure - by reducing supply and demand for mercury, by improving understanding of the mercury problem and solutions, and by supporting and promoting international action on mercury.

A European phase out of mercury-based thermometers is already in place, but the use of sphygmomanometers is still being discussed under the EU chemicals legislation, REACH. In April 2009, HCWH presented our opinion at a Commission workshop in Brussels. Together with the European Environmental Bureau (EEB) we commissioned research and have found that mercury-based sphygmomanometers are still used in hospitals in some EU countries. In June we held a conference in Brussels - “EU mercury phase out in measuring and control equipment” - and produced a conference report. HCWH believes that Member States can do more to speed up the phase out of mercury-based instruments. Health and environmental risks are still present if instruments are kept needlessly. Encouragement should be given to hospitals and other health institutions to collect and replace mercury-based instruments.

Our US colleagues have contributed to the debate by looking into the accuracy of alternatives to mercury sphygmomanometers and produced a report in Oct 2009.

Bisphenol A (BPA)
Bisphenol A is an endocrine disrupting chemical, and included in the candidate list of such chemicals established by the European Commission, DG Environment. While a European ban is not in place, some countries have a national ban (Denmark) or ban the use of BPA in baby bottles (France). We continue to monitor the use of BPA and recommend safer alternatives in medical products and products marketed for children.

Diethylhexylphthalate (DEHP)
DEHP has been included in the European Chemical Agency’s list of seven substances of very high concern in June 2009. The agency is recommending the chemicals only be used with special dispensation. Unfortunately there is an exemption for medical devices using DEHP, so it is up to hospitals to take the lead by requesting alternatives.

Nanosilver
HCWH Europe contributed to a report on nanosilver by Friends of the Earth Australia and US. We are concerned about potential health risks of nanosilver and recommend a precautionary approach.
Press Coverage and Communication

The Guardian, 26 May 2009  „Josh Karliner, international coordinator for Health Care Without Harm, and another of the report’s authors, also praised the work of the NHS: ‘The NHS is a world leader in this effort to reduce emissions and the only national health care system to have a comprehensive strategy for this. More needs to be done, however, in terms of making hospitals carbon neutral, and focusing more on disease prevention.’“

Euractiv, 29 May 2009  „A draft report by the WHO and Health Care Without Harm, an NGO, says hospitals have a major role to play and can reduce their environmental impact by using alternative energy sources, designing ‘greener’ buildings, and being more efficient in their use of water, transport and food.”

Ehospital, Dec 2009  „The pressure to reduce environmental impact is being felt all the way through healthcare operations, in purchasing, waste management, water and energy use, energy generation, transport, food service and building design…” said Paul Whaley, Communications Coordinator, HCWH Europe

CNN, 3 Jun 2009  „With fast food establishments, hospitals are sending a message that food is not important to health,” said Jamie Harvey, a food coordinator of Health Care Without Harm, … „But we know that’s wrong. We’re starting to see in a sweeping way that food is essential to health. Hospitals are adapting to that message.”

ENDS Europe, 6 Oct 2009  „Experts consider global warming to be potentially the biggest health threat in the 21st century, yet the health arguments are not taken on board and acted upon,” said Anja Leetz, Executive Director of Health Care Without Harm (HCWH) Europe.

Irish Times, 5 Nov 2009  „As shown by some 10,000 premature deaths in France alone during a heatwave in 2003, ‘all of the known or predicted impacts of climate change are going to lead to severe health impacts’, according to Josh Karliner, of the Health Care Without Harm network.”

Communication 2009 saw the relaunch of our entire website for all regions with a huge online library for reports and resources. The website also describes activities and encourages involvement by health professionals. We have created a new newsletter, ‘Health & Environment’, with special focus on chemicals and research. The newsletter has 3,500 subscribers.
Selected Member Activities in Europe

Green Nephrology Programme in the UK
The Campaign for Greener Healthcare (CGH) in the UK started a Green Nephrology Programme in 2009, which is pioneering change in kidney care. A Green Nephrology Fellowship (sponsored by NHS Kidney Care) was created, seconding a renal trainee to work full time on the programme within CGH. Case studies have been used to share examples of good practice, leading to uptake in other units.

Trees as a symbol for health and environment
Another major project which CGH has launched is the “NHS Forest”. CGH, with the National Health Service (NHS), aims to plant 1.3 million trees – one for every employee of the NHS – on NHS sites throughout the UK. This not only greens outdoor spaces, but encourages people to link their health with their immediate environment at healthcare sites.

Sustainability in the French health sector
In 2009 our French member c2ds has published a guide on best practice in sustainable development for the French health sector. The guide looks at building construction, the use of energy, transport, chemicals used in medical devices, recycling, etc.

Waste training for hospitals in France
HCWH Europe’s small grant support enabled our French member CNIID to offer training workshops on medical waste for hospitals in France. CNIID is now an officially recognised training institution and aims to increase recycling rates in French hospitals through this programme.

On incineration
In 2009, the British Society for Ecological Medicine published a response to the UK Health Protection Authority’s rejection of potential harm from incinerators. It provides a good summary of the health risks still posed by incineration and the inadequacy of the data behind claims of safety.
Sörmland County Council has started measuring pharmaceutical compounds in sewage water and in streams. The result shows that ethinylestradiol (most commonly used in contraceptive pills) can reach levels in streams where the concentration reduces egg fertilization in fish. In order to reduce concentrations, doctors receive information about the environmental impact of pharmaceuticals and the County Council informs patients to return unused medications to pharmacies.

Biocides and silver use in Swedish healthcare
Uppsala University organised an educational workshop for staff and experts on biocides such as silver, disinfectants and antibacterial medical devices. The latest research, procurement policies and alternatives in use by different Swedish institutions were presented.

Swedish hospitals are major users of renewable energy
In 2008, 43% of Sweden’s energy came from renewable sources. From spring 2009, all nine hospitals in the Skåne region of southern Sweden have been using renewable electricity. Further north, in Stockholm County, hospitals are committed to sourcing their heating, cooling and electricity solely from renewable energy sources without harmful emissions. Buildings will require very little energy because of energy-efficient measures and advanced technology. Stockholm County’s programme aims, by 2011, to ensure that total energy consumption will not have increased compared with 2000.

Stockholm slashes chemical use
In 2007, Stockholm County Council quantified the chemicals and chemical products it uses which may harm human health and the environment. By 2011, a quarter of these substances will have been phased out. Encouragingly, the Council has publicised its chemical phase-out list and has given directions on the issue to all the hospitals and other health bodies it runs.

All the products and chemical substances used in the Council’s hospitals are logged in a database called KLARA. The County’s public dental services are carrying out a similar exercise. KLARA is used to run an annual inventory of hazardous chemicals, with locations and quantities. Since the system records all purchases, the consumption of chemicals can also be calculated.

Regarding pharmaceutical products, the Council has pledged not to release any eco-toxic waste to land or into water or the air, and by 2011 to reduce the presence of the most environmentally-damaging drugs in discharges from water treatment works and in surface water to below 2005 levels. The County will also cut nitrous oxide emissions by three-quarters compared with 2002.

Pharmaceuticals
Sörmland County Council has started measuring pharmaceutical compounds in sewage water and in streams. The result shows that ethinylestradiol (most commonly used in contraceptive pills) can reach levels in streams where the concentration reduces egg fertilization in fish. In order to reduce concentrations, doctors receive information about the environmental impact of pharmaceuticals and the County Council informs patients to return unused medications to pharmacies.

Stockholm County’s programme aims, by 2011, to ensure that total energy consumption will not have increased compared with 2000.
ISDE and climate
Climate change and its impact on health inspired ISDE affiliates around Europe, such as Austria, Belgium, Denmark, Germany, Ireland, Italy, the Netherlands, Sweden, Switzerland and the UK, to focus on climate change issues. Globally ISDE has consultative status with the World Health Organization (WHO), the UN Economic and Social Council (ECOSOC), and the UN Environment Program (UNEP) and has participated in their meetings, discussions and panels, submitted formal statements and spoken to government representatives on issues of children’s health, chemicals and mercury.
Selected Member Activities in Europe
List of European Members

New Members
This year we are pleased to have the Foundation TEM (SE), University Hospital Virgin of Arrixaca (ES) and Waste Watch (UK) in HCWH Europe, taking the total number of organisations who have joined the European network to 67.

Armenia
* Armenian Women for Health and a Healthy Environment (AWHHE)
* Women for Green Way for Generations

Austria
* ETA Environment Management (ETA Umweltmanagement GmbH)
* Otto Wagner Hospital Centre of Social Medicine (Sozialmedizinisches Zentrum Otto-Wagner-Spital und Pflegezentrum)
* The Institute for Sustainable Healthcare (INGES - Institut für Nachhaltigkeit im Gesundheitswesen)
* Vienna Health Care Institutions Association (KAV - Wiener Krankenanstaltenverbund)

Belgium
* Belgian Platform Environment and Health (Vlaams Platform - Milieu en Gezondheid)

Czech Republic
* Arnika Association (Sdružení Arnika)

Denmark
* Ecological Council (Det Økologiske Råd)
* Endometriosis Foundation (Endometrioese Foreningen)
* Gentofte County Hospital (Amtssygehuset i Gentofte)
* Sønderborg Hospital (Sygehus Sønderjylland, Sønderborg)
* Nord Health Care Institutions, Nykøbing Thisted (Sygehus Nord, Nykøbing Thisted)
* The Health Care Institutions of Aarhus County (Aarhus Sygehus)

France
* Association of Independent Doctors for the Environment and Public Health (Association des Médecins indépendents pour l’environnement et la santé publique)
* C2DS - Committee for Sustainable Development in Healthcare (Comité Pour le Developpement Durable en Santé)

Belarus
* Foundation for Realisation of Ideas (Fond Realizaciaj Idey)
* IPA Ecosphere
List of European Members
List of European Members

* Committee for Environmental Health (OMESC-Comité Santé Environnement)
* National Centre for Independent Information on Waste (CNIID - Centre national d’information indépendante sur les déchets)

Germany
* Friends of the Earth Germany (BUND - Bund für Umwelt und Naturschutz Deutschland e.V.)
* European Institute for Transfer of Technology, Information Management and Communication (ETIK - Europäisches Institut für Technologietransfer, Informationsmanagement und Kommunikation)
* Institute for Environmental Medicine and Health Care, Freiburg University (Institut für Umweltmedizin und Krankenhaushygiene Freiburg Universität)

Ireland
* Irish Doctor’s Environmental Association (IDEA)
* Organisation for Ecologically Sustainable Waste Management

Italy
* ALERR (Agenzia Lucchese per l’Energia ed il Recupero della Risorse)

The Netherlands
* Waste and Environment Foundation (Stichting Afval & Milieu)
* EcoBaby Foundation
* Mother Earth Foundation (Stichting Huize Aarde)

Poland
* Waste Prevention Association 3R (Ogólnopolskie Towarzystwo Zagospodarowania Odpadów 3R)

Republic of Macedonia
* Macedonian Association of Doctors for the Environment (MADE - Združenie na Doktori za zivotna sredina)

Republic of Moldova
* Cleaner Production and Energy Efficiency Center (Producere Pura si Eficienta Energetica)

Romania
* Life Youth Foundation (Fundatia)

Russia
* Baikal Environmental Wave (Baikalskaya Ekologischeskaya Volna)
* Kaliningrad Children and Youth Invalids (NGO „Maria“)

Slovakia
* Friends of the Earth Slovakia (Priatelia Zeme - SPZ)

Slovenia
* Slovenian Clean Production and Right-To-Know Action Club (DEA Klub Ankaran)
List of European Members

Spain
* Children’s Health Care Unit, University Hospital La Fe (Hospital Infantil Universitario La Fe)
* Children’s Health Care Unit, University Hospital Virgin of Arrixaca

Sweden
* Kemi & Miljö (Chemistry & Environment, Consultants for Sustainable Development)
* County Council of Sörmland (Landstinget Sörmland)
* International Chemical Secretariat
* Jämtlands County Council (JLL - Jämtlands Läns Landsting)
* Jegrelius Research Centre (Jegrelius Forskningscenter)
* Karolinska University Health Care Institutions (Karolinska Universitetssjukhuset)
* Malmö University Health Care Institutions MAS (Universitetssjukhuset MAS i Malmö)
* Stockholm County Council (Stockholms Läns Landsting)
* Swedish Doctors for the Environment (Läkare för Miljöm)
* Foundation TEM (Stiftelsen TEM vid Lunds Universitet)
* Uppsala University Departments of Clinical Microbiology and Earth Sciences (Uppsala Universitet)

Switzerland
* International Council of Nurses
* International Society of Doctors for the Environment
* Physicians for the Environment Switzerland (AefU - Ärztinnen und Ärzte für Umweltschutz)

UK
* British Society for Ecological Medicine
* The Campaign for Greener Healthcare
* Cancer Prevention and Education Society
* Communities Against Toxics
* Communities Against Toxics Scotland
* Medact - ISDE UK
* Royal College of Nursing
* Soil Association
* Waste Watch

Ukraine
* International Society of Doctors for the Environment Ukraine
* MAMA-86-Kharkov
Dr. Gavin ten Tusscher, MD, PhD. Gavin is a consultant paediatrician at the Department of Paediatrics and Neonatology of the Westfriesgasthuis, Hoorn, the Netherlands. He works as a paediatrician in a 500-bed hospital with a large outpatient clinic. His PhD thesis (2002) was on the later childhood health effects of perinatal exposure to background levels of dioxins in the Netherlands. He continues to do research on paediatric environmental health issues and regularly lectures, publishes in peer-reviewed medical journals, and teaches and trains medical students and junior doctors.

Per Rosander has extensive experience in chemical related issues. He has worked with numerous NGOs, including Greenpeace and several public health care providers in Sweden. He also helped establish HCWH Europe in 2003. Per graduated in chemistry from Linköping University, Sweden, in 1987, before going on to research the role of monoclonal antibodies in cancer at the Swedish National Bacteriological Laboratories. He has also studied political science.

Hanns M. Moshammer, MD, is an Associate Professor at the Institute for Environmental Health at the Medical University Vienna in Austria. He serves as an expert for the Indoor Air Quality working group of the EU Commission. He also coordinates and participates in research projects in Austria and other European countries. Hanns serves as an expert when information on environmental health is needed for court cases. He is currently the president of the International Society Doctors for the Environment.

Polyxeni Nicolopoulou-Stamati, MD, PhD, is an Associate Professor of Pathology at the Medical School of the National and Kapodistrian University of Athens (NKUA), in Greece where she oversees the „Environment and Health: Capacity Building for Decision Making“ Masters degree program. She also teaches at Vrije Universiteit Brussels. Neni has published papers on environmental impacts of transport and mobility, fertility, endocrine disrupters, cancer, waste management, and congenital diseases. She is a member of International Physicians for the Prevention of Nuclear War.

**Staff**
- Anja Leetz: Executive Director
- Pendo Maro: Senior Climate and Energy Advisor
- Ruth Stringer: International Science & Policy Coordinator
- Paul Whaley: Communications Coordinator

**Members Council 2009-2010**
- Michaela Truppe: INGES, Austria
- Ralph Ryder: Communities Against Toxics, UK
- Eva Haxton: Uppsala University hospital, Sweden
- Rachel Stancliffe: The Campaign for Greener Healthcare, UK
- Lew Gerbilsky: ISDE Ukraine, Ukraine
- Veronique Molieres: C2DS, France
- Wiebke Winker: CNIID, France
- Anne Marie Vass: Karolinska University Hospital, Sweden
- Jamie Page: CPES, UK
Financial Information - Income & Expenditure HCWH Europe

„We have audited the balance sheet and income statement for the year ending December 31, 2009, prepared in accordance with the legal and regulatory requirements applicable in Belgium. In our opinion, the balance sheet and income statement for the year ended December 31, 2009 give a true and fair view of the organisations assets, liabilities, financial position and results of operations.” Antwerp, 11 August 2010, Clybouw Reviseurs d’entreprise scprl, represented by Karel Nijs.

Thank you!

Many thanks to HCWH US and WHO who have given generously to help make our work possible this year.

If you want to find out how to support our work, to participate or how to become a member, please contact Anja Leetz at anja.leetz@hcwh.org

<table>
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<tr>
<th>Income</th>
<th>Amount</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>HCWH USA</td>
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<td>WHO grant</td>
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<td>HEAL in kind contribution</td>
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<td>Reserves 2008</td>
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<td>TOTAL</td>
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<table>
<thead>
<tr>
<th>Expenditure</th>
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<tr>
<td>Personnel costs</td>
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<td>External servicers</td>
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<td>Travel &amp; subsistence costs</td>
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<tr>
<td>HEAL in kind participation</td>
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<td>Depreciation costs</td>
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<tr>
<td>Financial costs</td>
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<tr>
<td>TOTAL</td>
<td>313.435,30 €</td>
<td>100,00 %</td>
</tr>
</tbody>
</table>
Selected HCWH Activities Globally

HCWH US

Climate: The ‘Prescription’ was printed in the New York Times along with an open letter signed by numerous health organisations and hospital systems, including the American Public Health Association, the American Nurses’ Association, Physicians for Social Responsibility, Catholic Healthcare West, and Bon Secours Health System, Inc, to President Obama asking him to take a strong position during the climate treaty negotiations. Immediately before negotiations began the US Environmental Protection Agency issued an announcement that climate change negatively affects human health.

Balanced Menus: Health Care Without Harm announced the “Balanced Menus Challenge” a voluntary commitment by healthcare institutions to reduce their meat offerings in patient meals and hospital cafeterias by 20 percent in 12 months. Balanced Menus is a climate change reduction strategy that also protects the effectiveness of antibiotics and promotes good nutrition. Almost two dozen hospitals had taken the challenge by its official launch date.

Stimulus Funds for Hospitals: After intensive lobbying by Health Care Without Harm and its supporting hospitals, Congress allowed eligible hospitals to use stimulus funds to retrofit their buildings for energy use reduction and the incorporation of clean energy production.

Chemicals: Physicians for Social Responsibility in partnership with American Nurses Association and Health Care Without Harm released the “Hazardous Chemicals In Health Care” report, detailing the first investigation ever of chemicals found in the bodies of health care professionals. The inquiry found that all of the 20 participants had toxic chemicals associated with health care in their bodies. Each participant had at least 24 individual chemicals present, four of which are on the recently released Environmental Protection Agency list of priority chemicals for regulation. These chemicals are all associated with treatments for chronic illness and physical disorders.

Chicago Initiative: Health Care Without Harm has entered into an agreement with the Clinton Climate Initiative (CCI), a project of the William J. Clinton Foundation, to develop programmes to help hospitals and healthcare facilities reduce their environmental impact, particularly in the area of carbon reduction. HCWH will work with CCI to develop building energy efficiency retrofit projects and other carbon reduction strategies in healthcare facilities. According to U.S. EPA-based estimates, the healthcare industry’s energy use adds over $600 million per year in increased healthcare costs. Through the HCWH-CCI partnership, hospitals and healthcare institutions will receive technical assistance when implementing energy efficiency projects and become eligible for discounted energy efficiency products.

Research Collaborative: Health Care Without Harm established the Research Collaborative, an effort to develop a research agenda for sustainable health care and to identify scientists and funding to conduct this research. Findings will inform recommendations of strategies to achieve health care sustainability. The Research Agenda and two studies were conducted and published in 2009. See these reports and more at http://www.noharm.org/us_canada/reports/.
Selected HCWH Activities Globally

**HCWH South America**

**Argentina and mercury:** On 16th Feb 2009 the Argentine Ministry of Health issued an administrative decision prohibiting the production, import, sale or free transfer of mercury column blood pressure sphygmomanometers to be used by the general population, medical doctors or veterinarians. Imports will be halted immediately, and all sales will cease within six months. HCWH Latin America worked closely with doctors and nurses to achieve this phase out.

**Brazil:** In November 2009 the city of Sao Paolo became the first to eliminate the use of mercury-based devices from the public hospitals; this includes 34 hospitals and 85 primary health care centres.

**AGENDA, our partner in Africa**

**Tanzania and waste:** 2009 also saw the completion of one year’s monitoring of the Bagamoyo non-incineration medical waste treatment project. Working with a UNDP/GEF project, John Snow Inc, HCWH’s Tanzanian strategic partner, AGENDA, and the Tanzanian Ministry of Health and Social Welfare, we installed an autoclave and shredder to treat the infectious waste from the 100-bed Bagamoyo District Hospital. After the successful completion of the year’s monitoring, the Tanzanian government is considering placing similar systems in all of its district hospitals. Meanwhile, the UNDP/GEF project is working at the University of Dar es Salaam to design low cost, low maintenance autoclaves and related equipment specifically for treating medical waste in low income countries.

**HCWH Southeast Asia:** “Health Care Waste Assessment Project” is a report featuring the best practices in healthcare waste management of the city of Baguio (North of Manila) with seven participating hospitals. The project is part of HCWH Southeast Asia’s documentation on sampling waste management practices of hospitals in cities and soon in provinces.

**Toxics Link, our partner in India:** Toxics Link raised a question in the Indian Parliament on the use and contamination of the healthcare system with mercury. In reply, the Minister acknowledged that there is an exposure problem for hospital staff and that a survey will be conducted to assess mercury pollution in the Indian healthcare system.