



WHO MANIFESTO FOR A HEALTHY RECOVERY FROM COVID-19

Prescriptions and Actionables for a Healthy and Green Recovery



World Health
Organization



What we are learning from COVID-19

COVID-19 is the greatest global shock in decades. Hundreds of thousands of lives have been lost, and the world's economy likely faces the worst recession since the 1930s. The resulting loss of employment and income will cause further damage to livelihoods, health, and sustainable development.

Societies need to protect themselves, and to recover, as quickly as possible. But we cannot go back to the way we did things before. Increasing numbers of infectious diseases, including HIV/AIDS, SARS and Ebola, have made the jump from wildlife to humans - and all available evidence suggests that COVID-19 has followed the same route. Once human-to-human transmission of COVID-19 began, national and international surveillance and response systems were not strong or fast enough to completely halt transmission. And as infections spread, a lack of universal health coverage has left billions of people, including many in rich countries, without reliable and affordable access to medical treatment. Massive inequalities have meant that deaths and loss of livelihoods have been strongly driven by socioeconomic status, often compounded by gender and minority status.

Attempting to save money by neglecting environmental protection, emergency preparedness, health systems, and social safety nets, has proven to be a false economy - and the bill is now being paid many times over. The world cannot afford repeated disasters on the scale of COVID-19, whether they are triggered by the next pandemic, or from mounting environmental damage and climate change. Going back to "normal" is not good enough.



What we are learning from COVID-19 (*cont.*)

In adversity, the crisis has also brought out some of the best in our societies, from solidarity among neighbours, to the bravery of health and other key workers in facing down risks to their own health to serve their communities, to countries working together to provide emergency relief or to research treatments and vaccines. The “lockdown” measures that have been necessary to control the spread of COVID-19 have slowed economic activity, and disrupted lives – but have also given some glimpses of a possible brighter future. In some places, pollution levels have dropped to such an extent that people have breathed clean air, or have seen blue skies and clear waters, or have been able to walk and cycle safely with their children – for the first times in their lives. The use of digital technology has accelerated new ways of working and connecting with each other, from reducing time spent commuting, to more flexible ways of studying, to carrying out medical consultations remotely, to spending more time with our families. Opinion polls from around the world show that people want to protect the environment, and preserve the positives that have emerged from the crisis, as we recover.

National governments are now committing trillions of dollars, in a matter of weeks, to maintain and eventually resuscitate economy activity. These investments are essential to safeguard people’s livelihoods, and therefore their health. But the allocation of these investments, and the policy decisions that will guide both short- and long-term recovery, have the potential to shape the way we live our lives, work and consume for years to come. Nowhere is this more important than in their effects on environmental degradation and pollution, and particularly on the greenhouse gas emissions that are driving global warming and the climate crisis.

Decisions made in the coming months can either “lock in” economic development patterns that will do permanent and escalating damage to the ecological systems that sustain all human health and livelihoods, or, if wisely taken, can promote a healthier, fairer, and greener world.



Prescriptions and Actionables for a healthy recovery from COVID-19

The following WHO prescriptions and accompanied actionables are practical steps for implementing the WHO Manifesto for a healthy recovery from COVID-19. They aim at creating a healthier, fairer and greener world while investing to maintain and resuscitate the economy hit by the effects of COVID-19.

Policy makers, national and local decision-makers and a wide array of other actors wishing to contribute to a healthy recovery can now take decisive steps by shaping the way we live, work and consume. Effects on environmental degradation and pollution and climate change will be wide ranging. WHO and partner organizations have since long been developing substantive guidance and provide support for building healthier environments for healthier populations.

Six WHO prescriptions, and a comprehensive set of key actionables, for achieving healthier environments is provided accordingly. Their prioritization will depend upon the local context and situation. New investments and reconsideration of priorities in the context of recovery from COVID-19 present unique opportunities for shaping healthier environments and scaling up actions accordingly.



Prescription 1. Protect and preserve the source of human health: Nature.

Economies are a product of healthy human societies, which in turn rely on the natural environment – the original source of all clean air, water, and food. Human pressures, from deforestation, to intensive and polluting agricultural practices, to unsafe management and consumption of wildlife, undermine these services. They also increase the risk of emerging infectious diseases in humans – over 60% of which originate from animals, mainly from wildlife. Overall plans for post-COVID-19 recovery, and specifically plans to reduce the risk of future epidemics, need to go further upstream than early detection and control of disease outbreaks. They also need to lessen our impact on the environment, so as to reduce the risk at source.



1. Protect and preserve the source of human health: Nature.

Actionables for WHO prescription 1

Biological diversity

- Implement and update National Biodiversity Strategies and Action Plans (NBSAPs) in line with the 2011-2020 Strategic Plan for Biodiversity and the 20 Aichi Biodiversity Targets [1].
- Incorporate biodiversity values, ecosystem protection and the 'value of nature' into national and regional policies, strategies and programmes, including in public health policies and in national accounting and reporting systems [1].
- Eliminate or reform incentives, including subsidies that are harmful to biodiversity, including those that promote monoculture production systems [2, 3].
- Avoid ecosystem loss and degradation and promote ecosystem integrity and resilience and protection of species [1].
- Limit or control human-wildlife contact to reduce the risk of infectious diseases, including zoonotic and vector-borne diseases [1].
- Promote agrobiodiversity and the use of integrated pest management to reduce the need for chemical pesticides and herbicides [2].

More Information:

[1] WHO, Secretariat of the Convention on Biological Diversity, and UNEP, *Connecting global priorities: biodiversity and human health: a state of knowledge review*. 2015, WHO: Geneva.

[2] WHO, *Guidance on Mainstreaming Biodiversity for Nutrition and Health*. Expected in 2020.

[3] Convention on Biodiversity and UNEP, *Strategic plan for biodiversity 2011-2020, including Aichi Biodiversity Targets*. 2010, UNEP: Montreal.



1. Protect and preserve the source of human health: Nature.

Climate change

- Mitigate climate change by reducing greenhouse gas emissions and other climate changing pollutants like black carbon for example through better energy-use choices, agricultural practices, transport, food, city compactness and industrial technology use and practices [4, 5].
- Implement sustainable infrastructure development and spatial planning to avoid locking societies into greenhouse gas-intensive emission pathways that may be difficult or very costly to change [5]
- Establish and enforce air quality standards, in line with WHO's Air Quality Guidelines [6].
- Adopt very low energy building codes for new buildings and retrofit established buildings [5].
- Improve the efficiency of material use, recycling and re-use of materials and products and increase overall reduction in product demand [5].
- Provide climate resilient health and sustainable infrastructure, technologies and services. These may include water and sanitation services, energy supply and waste management technologies [7].
- Reduce deforestation and implement afforestation and sustainable forest management [5].
- Ensure and promote enabling environments for behaviour change related to choices of energy use, transport, living, and food, waste generation and general consumption [5].

More Information:

[4] WHO, *Climate change and health. Key facts*. 2018: Geneva.

[5] IPCC, *Climate Change 2014. Mitigation of Climate Change. Working Group III Contribution to the Fifth Assessment Report of the Intergovernmental Panel on Climate Change*. 2014, Cambridge, New York: IPCC.

[6] WHO, *WHO guidelines for indoor air quality - selected pollutants*. 2010:WHO.

[7] WHO, *Operational framework for building climate resilient health systems*. 2015, Geneva: WHO.



1. Protect and preserve the source of human health: Nature.

Sanitation

- Develop and implement multi-sectoral sanitation policies which include sanitation safety planning, treatment of faecal sludge and wastewater, and reuse in agriculture [8, 9].

Air pollution

- Develop coherent multi-sectoral policies and actions across transport, industry, power generation, waste and wastewater management, agriculture, housing and land use sectors for preventing air pollution [10]. Also develop and implement policies to ensure clean fuels and technologies for cooking, heating and lighting in households [11].

More Information:

[8] WHO, *Guidelines on sanitation and health*. 2018, Geneva: WHO.

[9] WHO, *Sanitation safety planning. Manual for safe use and disposal of wastewater, greywater and excreta*. 2015, WHO: Geneva.

[10] WHO. *Ambient air pollution: Interventions & tools*. 2019.

[11] WHO, *WHO guidelines for indoor air quality: Household fuel combustion*. 2014, WHO: Geneva.



1. Protect and preserve the source of human health: Nature.

Chemicals

- Implement the WHO Chemicals Road Map to enhance health sector engagement in the sound management of chemicals [12].
- Implement the chemicals and waste-related multilateral environmental agreements, particularly their health protective aspects, e.g.:
 - Minamata Convention on Mercury [13].
 - Basel Convention on trans-boundary movements of hazardous wastes and their disposal [14].
 - Rotterdam Convention on the prior informed consent procedure for certain hazardous chemicals and pesticides in international trade [15].
 - Stockholm Convention on persistent organic pollutants (POPs) [16].
- Implement the International Health Regulations (2005), a legally binding agreement providing a framework to better prevent, prepare for and respond to public health events and emergencies of potential international concern, including chemical events [17].

More Information:

[12] WHO, *Chemicals road map and workbook*. 2017, Geneva: WHO.

[13] WHO, *Strategic planning for implementation of the health-related articles of the Minamata Convention on Mercury*. 2019, Geneva: WHO.

[14] UNEP. *Basel Convention on the Control of Transboundary Movements of Hazardous Wastes and their Disposal*. 1989

[15] UNEP. *Rotterdam Convention on the Prior Informed Consent Procedure for Certain Hazardous Chemicals and Pesticides in International Trade*.

[16] United Nations Environment Programme. *Stockholm Convention on persistent organic pollutants (POPs) 2017*.

[17] WHO, *International Health Regulations (2005) and chemical events*. 2015.



Prescription 2.

**Invest in essential services,
from water and sanitation to
clean energy in healthcare facilities.**

Around the world, billions of people lack access to the most basic services that are required to protect their health, whether from COVID-19, or any other risk. Handwashing facilities are essential for the prevention of infectious disease transmission, but are lacking in 40 % of households. Antimicrobial-resistant pathogens are widespread in water and waste and their sound management is needed to prevent the spread back to humans. In particular it is essential that health care facilities be equipped with water and sanitation services, including the soap and water that constitutes the most basic intervention to cut transmission of SARS-CoV-2 and other infections, access to reliable energy that is necessary to safely carry out most medical procedures, and occupational protection for health workers.

Overall, avoidable environmental and occupational risks cause about one quarter of all deaths in the world. Investment in healthier environments for health protection, environmental regulation, and ensuring that health systems are climate resilient, is both an essential guardrail against future disaster, and offers some of the best returns for society. For example, every dollar that was invested in strengthening the US Clean Air Act has paid back 30 dollars in benefit to US citizens, through improved air quality and better health.



2. Invest in essential services, from water and sanitation to clean energy in healthcare facilities.

Actionables for WHO prescription 2

Water

- Provide and promote the use of safe drinking water in communities, schools, health care facilities, workplaces and public places [18–21].
- Ensure implementation of drinking-water quality regulations and standards [22, 23].
- Protect drinking-water supplies using Water Safety Plans (WSPs) [24].
- Include safe and sustainable drinking water, sanitation and hygiene in relevant health policies, strategies and programmes [18].

More Information:

[18] WHO, *Water, sanitation, hygiene and health. A primer for health professionals*. 2019, Geneva: WHO.

[19] WHO, *Safely managed drinking-water. Thematic report on drinking-water 2017*. 2017, Geneva: WHO.

[20] WHO, *Water, sanitation and hygiene standards for schools in low-cost settings*. 2009, Geneva: WHO.

[21] WHO, *Essential environmental health standards in health care*. 2008, Geneva: WHO.

[22] WHO, *Guidelines for drinking-water quality: fourth edition incorporating the first addendum*. 2017, Geneva: WHO.

[23] WHO, *Developing drinking-water quality regulations and standards*. 2018, Geneva: WHO.

[24] WHO and International Water Association, *Protecting groundwater for health: Managing the quality of drinking-water sources*. 2006, United Kingdom: IWA.



2. Invest in essential services, from water and sanitation to clean energy in healthcare facilities.

Sanitation

- Implement sanitation safety planning [9].
- Support households to incrementally improve their sanitation facilities to meet minimum safety requirements [25, 26].
- Promote access to safe toilets in schools [20], health care facilities [21], workplaces and public places.
- Avoid open defecation and adopt safe sanitation facilities [8]

Hygiene

- Promote and support the installation of handwashing facilities in homes and institutions such as schools, workplaces and health care facilities [8, 27].
- Enforce handwashing facilities in public places, food establishments and markets, and include them in routine inspection and monitoring schemes [8].
- Make soap and water available to households, institutions and public places. Handwashing facilities with soap and water should be available close to (usually within 5 m) sanitation facilities [8, 20].
- Promote washing hands with soap at critical times, such as after defecation, after child cleaning and before preparing food [8, 28].

More Information:

[25] WHO. *Sanitary inspections for sanitation systems*. 2020

[26] WHO. *Sanitation system fact sheets 2020*

[27] WHO, *Recommendations to Member States to improve hand hygiene practices to help prevent the transmission of the COVID-19 virus*. 2020, WHO: Geneva.

[28] WHO, *Five keys to safer food manual*. 2006, Geneva: WHO.



2. Invest in essential services, from water and sanitation to clean energy in healthcare facilities.

Clean Energy

- Provide and use clean and safe cooking, heating and lighting solutions [11, 29, 30].
- Replace traditional household solid fuel stoves with lower-emission cookstoves that are as clean as possible [10, 11, 31].
- Improve energy efficiency of household appliances, buildings, lighting, heating and cooling [30].
- Encourage electrification using renewable sources such as solar-, hydro- and wind-based electricity [29, 30].

Healthy, safe and resilient workplaces for all

- Implement national policies and action plans on occupational safety and health [32-34].
- Scale up coverage with essential interventions and basic occupational health services of all workers for primary prevention of occupational and work-related diseases and injuries and promote healthier and safer workplaces, including for migrant and contractual workers and those in the informal economy [34, 35].
- Build workplace resilience to public health emergencies and outbreaks of infectious diseases in all economic sectors [35].

More Information:

[29] WHO. *Household air pollution: Interventions & tools*. 2019.

[30] UN Environment and C.C.A. Coalition, *Air pollution in Asia and the Pacific: Science-based solutions*. 2019, Bangkok: UNEP.

[31] WHO, C.C.A. Coalition, and UN Environment. *Breathelife campaign*. 2018.

[32] ILO, C155 - *Occupational Safety and Health Convention (No. 155)*. 1981, ILO: Geneva.

[33] ILO, C187 - *Promotional Framework for Occupational Safety and Health Convention (No. 187)*. 2006, ILO: Geneva.

[34] WHO, *Workers' health: global plan of action*. 2007.

[35] United Nations, *Political declaration of the high-level political forum on sustainable development convened under the auspices of the General Assembly, in A/RES/74/4*. 2019, United Nations: New York.



2. Invest in essential services, from water and sanitation to clean energy in healthcare facilities.

Additional Actions specific to health care facilities

- Implement or strengthen Infection Prevention and Control (IPC) in health care facilities through a range of occupational health and patient safety measures [36].
- Ensure availability of sufficient and safe water at all times for drinking, food preparation, personal hygiene, medical activities, cleaning and laundry [21].
- Ensure safety of water for drinking, cooking, personal hygiene, medical activities, cleaning and laundry for the purpose intended [21].
- Provide sufficient water-collection points and water-use facilities in the health care setting to allow convenient access to, and use of, water for medical activities, drinking, personal hygiene, food preparation, laundry and cleaning [21].
- Provide adequate, accessible and appropriate toilets for patients, staff and carers [21].
- Ensure rapid and safe wastewater disposal [21, 37].

More Information:

[36] WHO, *Guidelines on core components of infection prevention and control programmes at the national and acute health care facility level*. 2016, Geneva: WHO.

[37] WHO *Safe management of wastes from health-care activities: A summary*. 2017, Geneva: WHO.



2. Invest in essential services, from water and sanitation to clean energy in healthcare facilities.

Additional Actions specific to health care facilities (cont.)

- Ensure safe segregation, collection, transportation, storage, treatment and disposal of health care waste [21, 37].
- Promote correct use of water, sanitation and waste facilities [21].
- Develop national programmes and healthcare facility policies on occupational health for health workers [38].
- Build capacities to ensure occupational safety and health and work improvements of health workers and other workers, including in public health emergencies [38-40].
- Build and renovate healthcare facilities in an environmentally responsible, climate resilient and sustainable way.[41, 42]
- Consider as much as possible options for waste minimization, environmentally preferable purchasing and green procurement, and safe reuse, recycling and recovery.[43]

More Information:

[38] WHO and ILO, *WHO-ILO Global Framework for National Occupational Health Programmes for Health Workers*. 2020, WHO: Geneva.

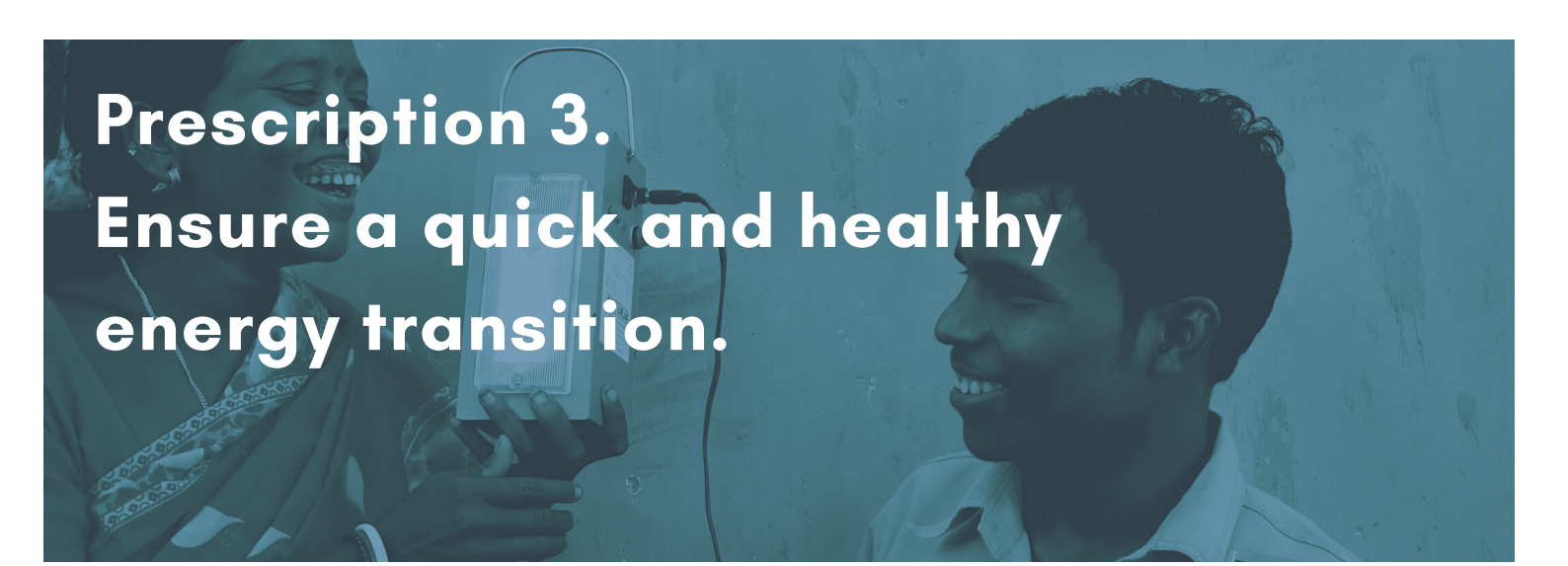
[39] WHO, *Occupational safety and health in public health emergencies: a manual for protecting health workers and responders*. 2018, Geneva: WHO.

[40] ILO, *HealthWISE - Work Improvement in Health Services*. 2014, ILO: Geneva.

[41] Pan American Health Organization, *Smart hospitals toolkit*. 2017, Washington: PAHO.

[42] WHO, *Policy brief 10. Health and energy linkages - maximising health benefits from the sustainable energy transition*. 2018: United Nations.

[43] WHO, *Safe management of wastes from health-care activities*. 2nd ed. 2014, Geneva: WHO.




Prescription 3. Ensure a quick and healthy energy transition.

Currently, over seven million people a year die from exposure to air pollution – 1 in 8 of all deaths. Over 90% of people breathe outdoor air with pollution levels exceeding WHO air quality guideline values. Two-thirds of this exposure to outdoor pollution results from the burning of the same fossil fuels that are driving climate change.

At the same time, renewable energy sources and storage continue to drop in price, increase in reliability, and provide more numerous, safer and higher paid jobs. Energy infrastructure decisions taken now will be locked in for decades to come. Factoring in the full economic and social consequences, and taking decisions in the public health interest, will tend to favour renewable energy sources, leading to cleaner environments and healthier people.

Several of the countries that were earliest and hardest hit by COVID-19, such as Italy and Spain, and those that were most successful in controlling the disease, such as South Korea and New Zealand, have put green development alongside health at the heart of their COVID-19 recovery strategies. A rapid global transition to clean energy would not only meet the Paris climate agreement goal of keeping warming below 2C, but would also improve air quality to such an extent that the resulting health gains would repay the cost of the investment twice over.

A photograph of a woman on the left and a man on the right, both smiling. The woman is holding a white, rectangular solar panel device with a curved top and a cable. The background is a plain, light-colored wall. The entire image is overlaid with a semi-transparent blue filter.

3. Ensure a quick and healthy energy transition.

Actionables for WHO prescription 3

- Rapidly transition away from fossil fuel combustion (oil, coal, fossil gas) for large-scale energy production, and diesel generators for small-scale production [10].
- Increase the use of, and financial support for, low-emission fuels and energy sources, and renewable combustion-free power sources (like solar or wind); use incentives [10, 30].
- Increase reliance on the co-generation of heat and power, and distributed energy generation (e.g. mini-grids and rooftop solar power generation) [10].
- Provide support to employees, communities and industries in transitioning from a carbon-intensive to a zero-carbon economy in the form of inclusive participatory decision-making, training programmes, social security schemes, long-term transition plans and financial support [44].

More Information:

[44] *ILO, Guidelines for a just transition towards environmentally sustainable economies and societies for all*. 2015, Geneva: ILO.



Prescription 4. Promote healthy, sustainable food systems.

Diseases caused by either lack of access to food, or consumption of unhealthy, high calorie diets, are now the single largest cause of global ill health. They also increase vulnerability to other risks – conditions such as obesity and diabetes are among the largest risk factors for illness and death from COVID-19.

Agriculture, particularly clearing of land to rear livestock, contributes about ¼ of global greenhouse gas emissions, and land use change is the single biggest environmental driver of new disease outbreaks. There is a need for a rapid transition to healthy, nutritious and sustainable diets. If the world were able to meet WHO's dietary guidelines, this would save millions of lives, reduce disease risks, and bring major reductions in global greenhouse gas emissions.



4. Promote healthy, sustainable food systems.

Actionables for WHO prescription 4

- Develop or update national food-based dietary guidelines through the full integration of environmental sustainability elements in each of the guideline's recommendations, according to national contexts [45].
- Strengthen local food production and processing, especially by smallholder and family farmers, where appropriate [46].
- Promote diets which are based on a variety of unprocessed or minimally processed foods, include wholegrains, legumes, nuts and an abundance and variety of fruits and vegetables and which can include moderate amounts of eggs, dairy, poultry and fish, and small amounts of red meat [45].
- Promote the diversification of crops including underutilized traditional crops, applying sustainable food production and natural resource management practices [46].

More Information:

[45] *FAO and WHO, Sustainable healthy diets - Guiding principles. 2019, Rome: FAO.*

[46] *FAO, Second International Conference on Nutrition. Rome, 19-21 November 2014. Conference Outcome Document: Framework for Action. 2014, FAO: Rome.*



4. Promote healthy, sustainable food systems.

Actionables for WHO prescription 4 (*cont.*)

- Consider use of trade policy, including instruments such as tariffs and quotas, to improve sustainable food supply.
- Implement policies and actions to create healthy, safe and sustainable food environments (such as strengthening of food control systems, restricting marketing of foods contributing to unhealthy unsustainable diets, nutrition labelling policies, fiscal policies, public food procurement policies, reformulation to gradually reduce saturated fat, sugars and salt/sodium and trans-fat from foods and beverages) [46].
- Improve storage, preservation, transport, and distribution technologies and infrastructure to reduce seasonal food insecurity, food and nutrient loss and waste [5, 47].
- Preserve fish habitats and promote sustainable fisheries [2].

More Information:

[47] IPCC, *Special report on climate change and land: an IPCC special report on climate change, desertification, land degradation, sustainable land management, food security, and greenhouse gas fluxes in terrestrial ecosystems 2019*, Geneva: IPCC.



Prescription 5. Build healthy, liveable cities.

Over half of the world's population now lives in cities, and they are responsible for over 60% of both economic activity and greenhouse gas emissions. As cities have relatively high population densities and are traffic-saturated, many trips can be taken more efficiently by public transport, walking and cycling, than by private cars. This also brings major health benefits through reducing air pollution, road traffic injuries – and the over three million annual deaths from physical inactivity.

Many of the largest and most dynamic cities in the world, such as Milan, Paris, and London, have reacted to the COVID-19 crisis by pedestrianizing streets and massively expanding cycle lanes – enabling “physically distant” transport during the crisis, and enhancing economic activity and quality of life afterwards.

5. Build healthy, liveable cities.



Actionables for WHO prescription 5

City Design

- Integrate health into urban planning policies to deliver highly connected, mixed-use and compact neighbourhoods that are economically and socially viable and that promote active living, sustainable mobility, energy efficiency, healthy diets and access to essential services [48-51].
- Prioritize active and sustainable mobility as preferred mode of travel in relevant transport, spatial and urban planning policies [48].
- Improve walking and cycling infrastructure for people of all ages and abilities [48] and create citywide access to safer walking, biking, nature, public spaces and public transport to support mobility, physical activity, recreation, access to services and social interactions, and to reduce the use of energy and resources [2, 45, 48].
- Improve access to good-quality public and green open spaces for people of all ages and abilities including accessible and safe play areas and recreational spaces for children and young people [48].
- Plan places that are more resilient to climate change and natural disasters [49].

More Information:

[48] WHO, *Global action plan on physical activity 2018-2030: more active people for a healthier world*. 2018, WHO: Geneva.

[49] UN Habitat and WHO, *Integrating health in urban and territorial planning: sourcebook for urban leaders, health and planning professionals*. 2020, Geneva: UN Habitat, WHO.

[50] WHO, *The power of cities: tackling noncommunicable diseases and road safety*. 2019 Geneva.

[51] WHO, *Health as the pulse of the new urban agenda. United Nations Conference on Housing and Sustainable Urban Development*. 2016.



5. Build healthy, liveable cities.

Social inclusiveness and cohesion

- Create more socially inclusive places and spaces through a variety in spatial planning, such as in land parcel size, forms of land tenure, and size of housing [49, 51].
- Develop a common vision for social cohesion and health equity by adopting a people-centred “right to health” framework that includes the right to access, use and transform urban environments [49, 51, 52].

Clean air

- Ensure cleaner air through implementing interventions in polluting sectors, such as in transport and industry, and through access to cleaner fuels and technologies for cooking, heating and lighting, adequate housing equipment and infrastructure development [50].

Access to adequate water, sanitation, hygiene, waste management and food

- Provide well-managed water, sanitation and hygiene facilities, adequate waste management and access to safe and healthy food [51].

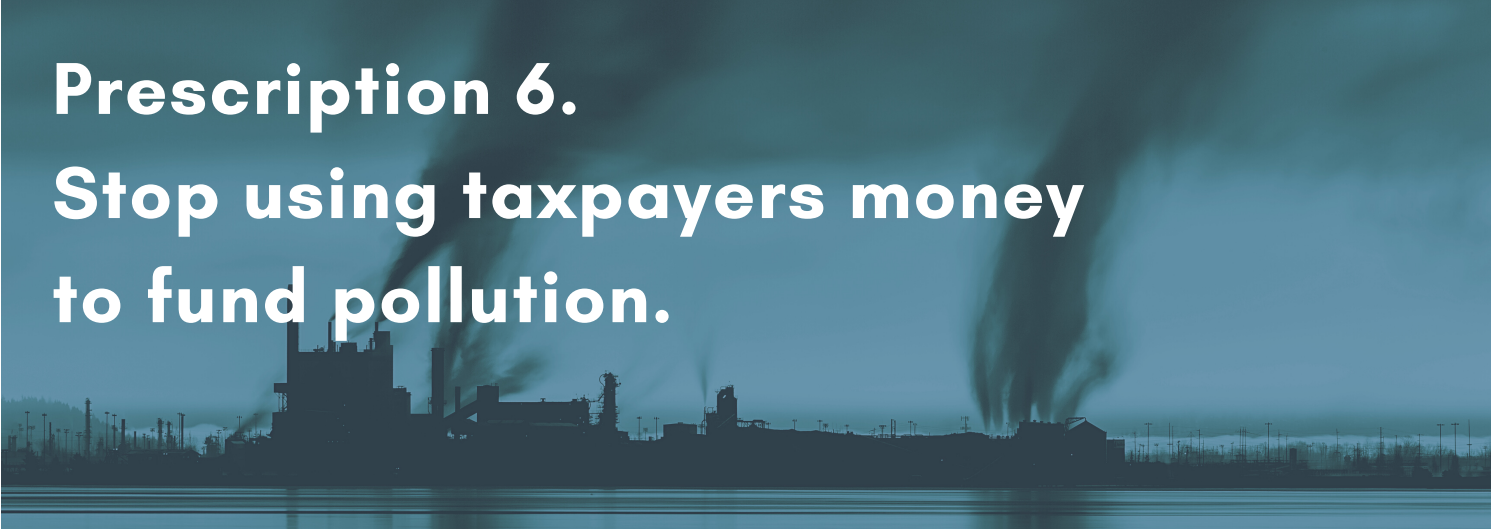
Housing

- Ensure access to affordable housing that is not crowded, where indoor temperatures and thermal insulation are adequate, that is equipped with safety devices, and where disease vectors are controlled [53].

More Information:

[52] *Commission of the Pan American Health Organization on Equity and Health Inequalities in the Americas, Just Societies: Health Equity and Dignified Lives. 2019, Washington, D.C.: PAHO.*

[53] *WHO, WHO Housing and health guidelines. 2018, Geneva: WHO.*



Prescription 6. Stop using taxpayers money to fund pollution.

The economic damage from COVID-19 and the necessary control measures, is very real, and will place huge pressure on Government finances. Financial reform will be unavoidable in recovering from COVID-19, and a good place to start is with fossil fuel subsidies.

Globally, about US\$400 billion every year of taxpayers money is spent directly subsidizing the fossil fuels that are driving climate change and causing air pollution. Furthermore, private and social costs generated by health and other impacts from such pollution are generally not built into the price of fuels and energy. Including the damage to health and the environment that they cause, brings the real value of the subsidy to over US\$5 trillion per year- more than all governments around the world spend on healthcare - and about 2,000 times the budget of WHO.

Placing a price on polluting fuels in line with the damage they cause would approximately halve outdoor air pollution deaths, cut greenhouse gas emissions by over a quarter, and raise about 4% of global GDP in revenue. We should stop paying the pollution bill, both through our pockets and our lungs.

6. Stop using taxpayers money to fund pollution.



Actionables for WHO prescription 6

- Stop subsidies on fossil fuels, such as for power generation and transport [5].
- Subsidize or exempt tax of clean energy and fuels such as solar-, hydro- and wind-based electricity [29].
- Embed environmental and health benchmarks in the financial recovery packages to COVID-19, e.g. by including 'do no harm' principles in the financial taxonomy of recovery packages and by actively investing in low-carbon and job-intensive sectors, including the health sector [54, 55].

More Information:

[54] UN, *International Mother Earth Day 2020. UN Secretary General's message.* . 2020, UN: New York.

[55] WHO, *WHO Manifesto for a healthy recovery from COVID-19.* 2020, WHO: Geneva.

Cross-cutting Actions



- Strengthen and support implementation of the Health in All Policies approach at the national and subnational level [56].
- Mainstream health and wellbeing, throughout all public service planning with specific consideration to people in vulnerable situations such as migrants, refugees, internally displaced people, people in informal settlements etc. [57, 58].
- Support the effective engagement and direct participation of communities in planning and policy development [56].
- Conduct health, economic and environmental impact assessments of future and existing policies and interventions [56].
- Collaborate across sectors for managing environmental determinants of health [56].
- Allocate resources across sectors to account for the expected health impacts of sector-based policies. Use fiscal and financial mechanisms to influence environmental determinants of health through investments in adequate housing, energy efficiency, cycling and pedestrian networks, and mass transit, as well as taxation of unhealthy products and practices [49, 51, 56].
- Monitor and track risks to health and wellbeing of different population groups; monitor the adoption and health impacts of policies and investments using timely data and targeted indicators; disaggregate by income, gender, age, race, ethnicity, migratory status, geographic location and other characteristics relevant in national contexts [49, 51, 56, 59].

More Information:

[56] WHO and F.M.o.S.A.a. Health., *Health in all policies: Helsinki statement. Framework for country action. 2014.*

[57] UN Habitat, *Urban-rural linkages: Guiding principles. 2019, Nairobi: UN Habitat.*

[58] UN, *A UN framework for the immediate socio-economic response to COVID-19. 2020, UN: New York.*

[59] UN, *Transforming our world: The 2030 Agenda for Sustainable Development. 2015, UN: New York*



A global movement for health and the environment

The COVID-19 crisis has shown that people will support even difficult policies if decision-making is transparent, evidence-based, and inclusive, and has the clear aim of protecting their health, their families and their livelihoods – rather than serving special interests.

This needs to be reflected in the way that policy is made. In most countries, Finance Ministries will take the lead in defining COVID-19 economic recovery packages. Given the integral connection between the environment, health and the economy, it is also important that health leaders, such as Chief Medical Officers, are directly involved in their design, report on the short- and long-term public health repercussions that they may have, and give their stamp of approval.

Most fundamentally, protecting lives, livelihoods and the environment depends on the support of the people. There is widespread public support for policies that do not seek only to maximize GDP, but to protect and enhance wellbeing, and for governments to combat climate change and environmental destruction with the same seriousness with which they are now fighting COVID-19. It is also shown by the millions of young people who have mobilized to demand action not only on climate and biodiversity – but also for the right to breathe clean air, and for their future on a liveable planet.

The health community is increasingly an ally in this goal. Healthworkers are the single most trusted profession in the world. Their skill, dedication, bravery and compassion has saved countless lives during the COVID-19 crisis – raising them to even higher levels of respect in their communities. Health professionals from around the world have shown that they are also strong supporters of action to protect the environment – and thereby the health of the populations that they serve. They are ready to be champions for the green, healthy and prosperous societies of the future, as evidenced in a recent open letter to G20 leaders, in which health professionals from around the world called for a healthy recovery from COVID-19.

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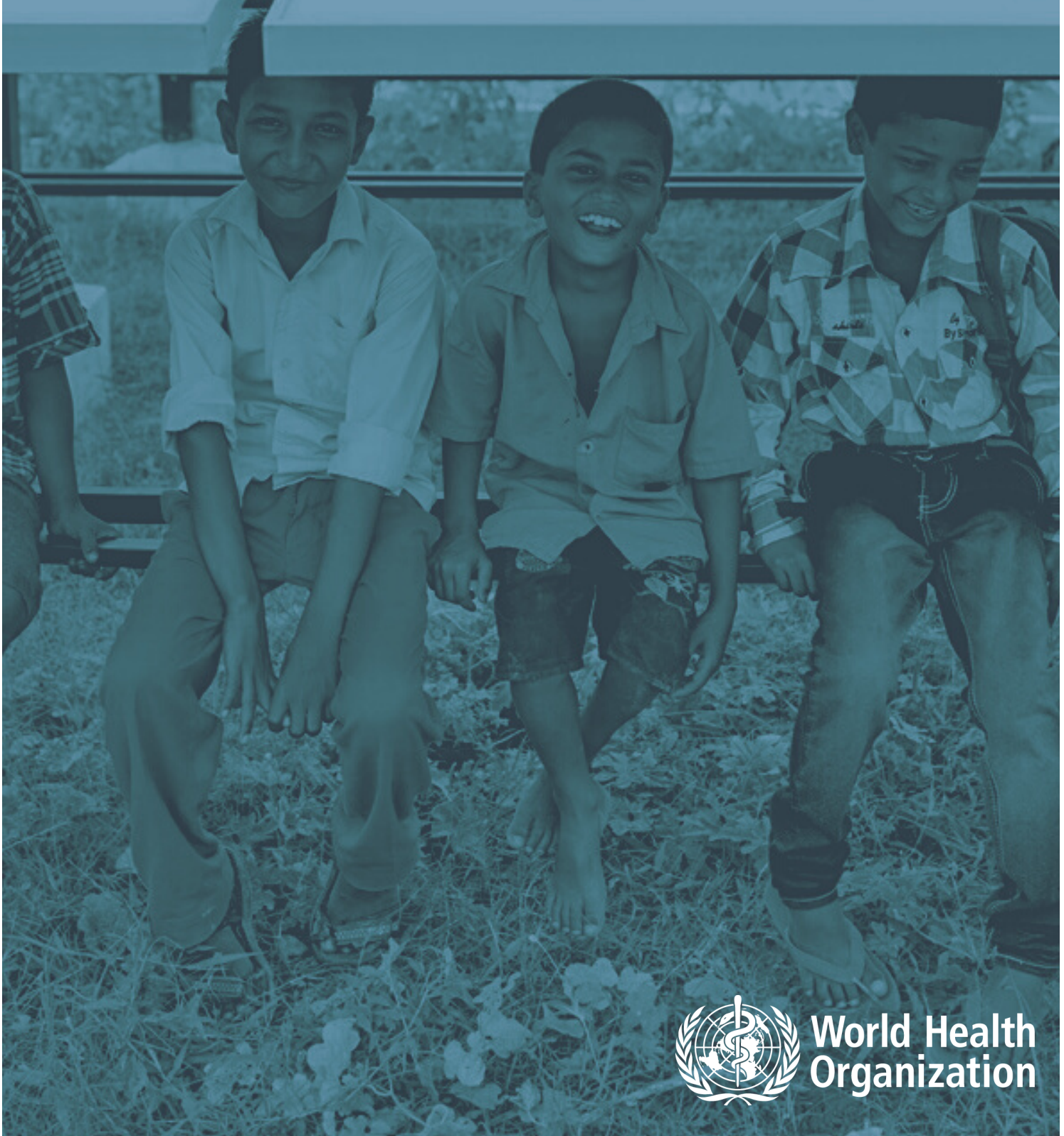
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WHO MANIFESTO FOR A HEALTHY RECOVERY FROM COVID-19



World Health
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