



Stockholm+50: what does it mean for global health?

As the Stockholm Declaration on the Human Environment turns 50, the role of the health stakeholder community in forward-looking environmental agendas is more important than ever.

Breathing air, drinking water, and eating food is a daily requirement for healthy human bodies. These basic needs inextricably link human health to the health of our environment. Hence, core elements of the global environmental movement were built on concern for the negative impact of pollution on human and ecosystem health. A recent agreement to establish a new global treaty on plastic pollution illustrates how global environmental policy instruments are used to design regulatory frameworks to influence health outcomes. This, like many other international environmental treaties, is a global health tool that would not have been possible without the 1972 Stockholm Declaration, whose 50th anniversary is in June, 2022.

The event commemorating this milestone is called Stockholm+50, a nod to the first United Nations (UN) Conference on the Human Environment which took place in Stockholm, Sweden. It is also a nod to one of the Conference's key outcomes, the establishment of the UN Environment Programme (UNEP), which was tasked with steering a global agenda that would incorporate environmental issues into economic decision-making. In many ways, the origin of the global health-environment nexus—and of planetary health—began in conversations surrounding this event.

As with the other UN treaties on chemicals and waste, the new treaty on plastics was not determined by, nor will it be housed under, a health organisation, but by the UN Environment Assembly (UNEA) and under UNEP, respectively. This architecture may be unexpected to some, but is further evidence that the success and future of sustainable

development relies on interdisciplinary and systems thinking.

Why health matters to environment and development leaders

According to Achim Steiner, Administrator of the UN Development Programme (UNDP), an institution whose mandate centres on addressing human poverty, “for far too long we have allowed two constituencies, two professional communities, to work side by side rather than with one another.”

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Furthermore, “Human health is in many ways synonymous with planetary health” says Inger Andersen, Executive Director of UNEP. She supports a role for the health stakeholder community in global environmental governance. “It is important that health stakeholders lean into and opine into the triple planetary crises of pollution, biodiversity loss, and climate change.”

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Both Steiner and Andersen describe how a landscape perspective and holistic metrics are key to joined-up agendas.

Interconnectivity is a focus at UNEP, but, from an environmental perspective, engagement of the health

sector in the triple crises is not yet a perfect Venn diagram. Andersen views biodiversity loss as furthest behind and least visible on the health sector radar, which she adds, “is odd given that 75% of emerging infectious diseases are zoonotic, and that 77% of land is modified by human activity”.

Steiner, former head of both UNEP and the International Union for Conservation of Nature (IUCN), suggests that the Planetary-pressures Adjusted Human Development Index (PHDI) might assist countries to take a cross-sectoral governance approach. The PHDI takes the standard Human Development Index (HDI)—typically measured as per capita income, years of education, and life expectancy—and incorporates “planetary pressures”, ie, national carbon emissions and material footprint. This enables a planetary health approach by allowing human development to be measured against both *intra*-generational equity as well as *inter*-generational equity.

At the time of UNEP's inception in 1972, integration was not as much of a priority as field-building. WHO, established 25 years earlier, had spent decades building out approaches, priorities and responses to global disease burden. The task of the newly minted UNEP was to build a comparably strong global environmental sector and coordinate environmental activities within the UN system.

To that end, global environmental efforts over the past 50 years since the Stockholm Conference have done much to build the framework for sound environmental decision-making, including through establishing multilateral environmental treaties (MEAs), and, to support them, inter-governmental knowledge repositories (known as science-policy bodies)

For more on the **treaty on plastic pollution** see <https://www.unep.org/news-and-stories/press-release/historic-day-campaign-beat-plastic-pollution-nations-commit-develop>

For more on the **Declaration** see <https://www.un.org/en/conferences/environment/stockholm1972>

For more on **Stockholm+50** see <https://www.stockholm50.global/>

For more on **UNEP** see <https://www.unep.org/about-un-environment>

For more on **UNEA** see <https://www.unep.org/environment-assembly/>

For more on **UNDP** see <https://www.undp.org/>

For more on **PHDI** see <https://hdr.undp.org/en/content/planetary-pressures%E2%80%93adjusted-human-development-index-phdi>

and funding mechanisms (like the Global Environment Facility). From this foundation grew a field of environmental negotiators, thematic experts, and supporting institutions, among many other elements. The architecture for environmental governance also paved the way to include the environment as a pillar of “sustainable development” in conceptual thinking. For instance, both the Millennium Development Goals (2000) and the Sustainable Development Goals (2015) elevated environmental issues into global economic and health perspectives.

Stockholm+50, whose interdisciplinary theme is “A Healthy Planet for the Prosperity of All,” will celebrate interconnectivity. Some view it as a launchpad for uniting global goals on human and non-human health and wellbeing. Steiner calls Stockholm+50 “a point of convergence” and an opportunity to see planetary health as a systemic challenge.

Fifty years ago, 113 governments acknowledged the bi-directional relationship between humans and their environment in the Stockholm Declaration. But in 2022 the global community is perhaps better equipped to practically address this nexus. Now two global forums with the power of full UN member state participation consider health-environment issues on their agendas: UNEA and the World Health Assembly (WHA).

Moving the dial on planetary health

The present challenge is not as much about expanding these siloed domains as it is about integrating and synergising their resources and outputs. Environmental leaders can provide valuable insight on the work needed to weld a united global architecture.

Andersen comments that nature as a determinant of health, for example to ensure good childhood brain development, and as a treatment, such as for elevated stress and associated

cardiovascular conditions, are still considered “horizon issues.” She suggests much more investment at early stages of education and in health curriculums on this interconnectivity.

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Government priorities also depend on context, meaning leaders need to spend time learning about each other’s health-environment nexuses. Andersen cites how some communities face the challenge of heat stress in ageing populations, while others may see greater priority in dealing with the open burning of unsorted garbage that can, among other consequences, release endocrine disrupting chemicals.

“...drinking water, sanitation and hygiene, for instance, rely on economic policies that ensure sound conservation of water ecosystems.”

Shifting the perspective of finance ministries on costs and benefits of environmentally focused action is a way to bring natural capital into risk analysis. It is a priority at UNDP. According to Steiner, this delivers the “right economic signals” to drive a greener economy and avoid damages, including to human health. It is important to “develop the thinking that this is not a zero-sum game”, he says. Deterioration of an ecosystem and its biodiversity is as critical to the economy as it is to human health. “Water does not come out of a tap but out of an ecosystem, and the hydrological cycle,” he says, meaning drinking water, sanitation and hygiene, for instance, rely on economic policies that ensure sound conservation of water ecosystems.

Both Andersen and Steiner emphasise the need for health professionals to put more attention on intersections, particularly between biodiversity and climate change. Andersen uses the food dimension as an example. “Food choices that we make on one hand impact our human health, our bodies, but on the other hand also impact planetary health.” She lists food waste, water loss, and chemical overuse—the latter of which pollutes land, terrestrial waterways, and, ultimately, marine ecosystems—as reasons why transformation of the food system is “absolutely core to the UNEP mandate”. Moreover, “if food loss and waste were a country, it would be the third largest emitter of CO₂”, she emphasises.

Forming a common response to planetary threats among UN members is a challenge. Steiner stresses the importance of the health community embracing environmental instruments, advocating for ambitious MEA outcomes, and bringing a health narrative to them. “Too often people underestimate how fundamental these [instruments] are.” Highlighting that this is a two-way street, Andersen underscores the responsibility of MEA experts to “take environmental issues to the door of the health stakeholder community”.

This bridge is critical, particularly for party-led processes in the UN system. “Governments at large are interested” in this health-environment nexus, Andersen notes, but “have yet to understand and fully internalise how to operationalize intersectionality”. “The way you manage nature is different than what is needed to manage human health. The core issue is about understanding the intersectionality and managing that.”

Stockholm+50 and future agendas

Taking a planetary health perspective is how we might manage risks from anticipated, but yet unknown, ecological shifts and

health burdens associated with 1.5°C of global warming. “We need to reshape national and global interactions on this, need to have science pick it up, need to identify financing gaps and transform it so that we will understand that looking deeper into the horizon is a way to secure human health”, says Andersen.

Stockholm+50 signals a new opportunity for health stakeholders in global debates - to provide and employ a cohesive and nimble expert voice on the human physical and mental health condition, and the relationship of that condition to climate change,

biodiversity loss, and pollution. Broad acceptance of the human right to a clean, healthy, and sustainable environment can fortify this voice. “There are some areas on the horizon that we need to tackle and [I] hope very much that Stockholm +50 will reflect back but also look into the future with that lens”, Andersen adds.

Many MEA negotiations will convene in 2022 to fast forward progress held up by the COVID-19 pandemic. Their environmental agendas hold key opportunities to utilise the health stakeholder voice, harmonise metrics, and shape

mutually-reinforcing global health and environmental instruments across forums.

Stockholm+50 offers an opportunistic pause in which to calibrate the tools and knowledge built over the past 50 years across two domains—health and environment—and to share, “For the Prosperity of All”, a planetary health vision of the way forward for the next half a century.

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For more on the 2021 UN Human Rights Council resolution 48/13 see <https://www.ohchr.org/en/hr-bodies/hrc/regular-sessions/session48/res-dec-stat>