The future we want is a healthy one. Better health contributes to sustainable development simply because healthy people are better able to learn, earn and contribute positively to their societies. This was well captured in the original Rio Declaration in 1992 where Principle 1 speaks of “human beings as the central concern of sustainable development...living a healthy and productive life in harmony with nature”. The role of health was reaffirmed at the Johannesburg summit ten years later and is even more vital today. I believe that in 2012 we need to make the case for health more strongly, and we have the evidence to do so.

We need to start thinking about the relationship between health and sustainable development in three complementary ways. Health as a contributor to the achievement of sustainability goals; health as a potential beneficiary of sustainable development; and health as a way of measuring progress across all three pillars of sustainable development policy.

Let’s start with the last point. Progress towards sustainable development requires metrics that integrate the economic, environmental and social dimensions of policy. Investment in health alone cannot solve the problems of sovereign debt, volatile food prices or the environmental impact of climate change. But for those of us that are concerned to promote a fairer, greener and more sustainable approach to globalisation, people’s health remains vitally important as a measure of the impact of policies in all these areas. Not only are health outcomes readily measurable, health concerns are immediate, personal and local. Measuring the impact of sustainable development on health can therefore generate public and political interest in a way that builds popular support for policies that have more diffuse or deferred outcomes (such as reducing CO₂ emissions).

“The links between health, sustainable development and economic growth become starkly clear when we realise that lack of access to health services impoverishes people because they cannot work, while using health services impoverishes people because they cannot pay.”

MARGARET CHAN
Director-General
World Health Organization

Healthy development

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A healthy environment is a prerequisite for good health. Reductions in air, water and chemical pollution can prevent up to one quarter of the overall burden of disease. Environmental change (through deforestation, air pollution, desertification, urbanisation and changing land use) have been causally linked to many pressing global health problems — including malaria, water-borne diseases, malnutrition, AIDS, TB, maternal health and non-communicable diseases (such as cancer, heart disease, chronic respiratory disease and diabetes). But while health can be a major beneficiary of economic and environmental development, this will not happen automatically. Twenty years after the first Rio Summit, decisions that guide urban planning, transport and housing development too often still create rather than reduce air pollution, noise and traffic injuries, and limit rather than promote physical activity. Agricultural and food policies too often make it harder, not easier to access to healthy and nutritious foods.

Evidence shows we can do things differently. WHO’s Health in the Green Economy series points to many examples. Studies of active transport systems show that cycling to work can reduce mortality by 30 per cent. Access to rapid transit systems also goes hand in hand with more equitable health outcomes because people are better able to access the services they need. The right mix of climate change mitigation policies for residential buildings can contribute to a reduction in health risks from extreme weather conditions. Energy policies that reduce air pollution could halve the number of childhood deaths from pneumonia and substantially reduce the one million deaths each year that occur from chronic lung disease. Cleaner cooking fuels are particularly important: current evidence suggests that replacing biomass or coal stoves with cleaner fuels can help improve the health of up to three billion people.

We often refer to the health co-benefits of environmental policies and the need to multiply the health dividends from sustainable development, but essentially what we are talking about is a need for policy coherence. As the world seeks to address the challenges posed by ageing populations, growing cities, increasingly mobile populations, competition for scarce natural resources, financial uncertainty, and the vagaries of a changing climate, it is no longer viable to think of solutions in terms of individual sectors. Similarly, there is little to be gained by policies (such as scaling up the use of diesel fuel) that reduce greenhouse gas emissions, but risk increasing levels of respiratory or cardiac disease as a result of air pollution. A green economy is one that maximises benefits, but with health and human well-being as the bottom line.

Lastly, there is the specific contribution that health policy can make to sustainable development. WHO estimates that 150 million people each year suffer severe financial hardship because they fall ill, use health services and have to pay for them on the spot. Many have to sell assets or go into debt to meet the payments. A hundred million people are pushed below the poverty line for these reasons. The links between health, sustainable development and economic growth become starkly clear when we realise that lack of access to health services impoverishes people because they cannot work, while using health services impoverishes people because they cannot pay.

Protecting people from catastrophic expenditure and ensuring access to essential services (including reproductive and sexual health services) through Universal Health Coverage is an essential element of any strategy to reduce poverty and build resilient societies. From this perspective, health is not just a desirable side effect or co-beneficiary of sustainable development. Rather, it needs to be seen as an essential pillar in its own right — with potential to increase economic growth, improve educational opportunities, limit the negative impact of population growth, reduce impoverishment and foster social cohesion.

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