

I.

## SUBMISSION FROM WHO (PART A)

Name of country (for Members of the committee)	N/A
Name of organization (for observers to the committee)	World Health Organization, including the Secretariat of the WHO Framework Convention on Tobacco Control, an entity hosted by WHO
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### Elements not discussed at INC-2

#### 1. Scope

*What is the proposed scope for the future instrument?*

*Which types of substances, materials, products and behaviors should be covered by the future instrument?*

#### **Proposed scope:**

A broad scope for the potential future instrument combining proposed elements (a) and (c) of UNEP/PP/INC.2/4 Annex 1 part C paragraph 4 would provide the most comprehensive approach to protecting health, as follows:

*(a) The legally binding instrument is expected to cover the whole life cycle of plastics, from extraction to their production and design to their use, consumption and disposal, and address all sources of plastic pollution, covering materials, products, chemicals, additives and microplastics, recognizing the risk of plastic pollution to human health.*

...

*(c) The instrument is a legally binding instrument that allows evolution and strengthening Overtime*

Option (a) specifically includes all stages of the plastics lifecycle, all types and components of plastics and methods of emission/release, recognizing the risk to human health. This would provide the broadest protection against health risks and harms which arise in plastic production, use, recycling, disposal and from plastic pollution in the air, water and soil.

A legally binding treaty as proposed in option (c) is more likely to be implemented universally or near-universally by Member States and to receive funding and resources than a non-binding, voluntary instrument. A treaty instrument that allows evolution and strengthening over time will be more flexible to change in line with scientific and technical developments.

The instrument should recognize (whether in the scope or elsewhere) linkages between plastic pollution and impacts on human health as well as links between human health, the environment and biodiversity, in line with OneHealth and health in all policies approaches, including:

- child health: protect children from plastic-related health risks to which they are particularly vulnerable;
- linkages between the health impacts of plastic pollution and other global health issues, including inequity and vulnerability, health of indigenous people, maternal and child health, environmental health, occupational health, antimicrobial resistance and the meaningful achievement of Universal Health Coverage; and
- interlinkages between the environment, biodiversity and health, which includes human, plant and animal health ie One Health.

**Explanatory Text:**

- (1) The full potential of the treaty may not be realized if its scope is confined solely to addressing plastic pollution, without also addressing risks to human health that arise throughout the lifecycle of plastics.
- (2) Children’s health: UNEP’s Technical Report on Chemicals in Plastics estimated that 90% of toys available on the market are made of plastic, which may contain chemicals of concern. Protection of children and other vulnerable groups should be adequately reflected in the zero draft of the treaty.
- (3) In Resolution WHA76.17 on the impact of chemicals, waste and pollution on human health, adopted by the World Health Assembly (WHA) on 30 May 2023 the WHA, amongst other things:
  - recognized the linkages between the health impacts of chemicals, waste and pollution and other priority global health issues including inequity and vulnerability, maternal and child health, antimicrobial resistance and the meaningful achievement of Universal Health Coverage, and that inaction on these linkages limits our collective capacity to strengthen our health systems, including in the context of health emergencies;
  - recalled the WHO Global strategy on health, environment and climate change: the transformation needed to improve lives and well-being sustainably through healthy environments, that builds on: scaling up primary prevention; acting on determinants of health in all policies and sectors; strengthening health sector leadership, governance and coordination; building mechanisms for governance, and political and social support; generating the evidence base on risks and solutions; and monitoring progress;
  - recognized the importance of the One Health approach, including the work of the One Health High-Level Expert Panel, as well as the importance of WHO’s role in this integrated, unifying approach in collaborating with the other Quadripartite Organizations (Food and Agriculture Organization of the United Nations (FAO), the United Nations Environment Programme (UNEP), the World Organisation for Animal Health (WOAH, founded as OIE) and their 2022–2026 One Health Joint Plan of Action; and

- welcomed the acknowledgement of the interlinkages between biodiversity and health and the three objectives of the Convention for Biological Diversity in the Kunming-Montreal Global Biodiversity Framework, agreeing that that framework is to be implemented by States Parties, with consideration of the One Health approach, among other holistic approaches that are based on science, mobilize multiple sectors, disciplines and communities to work together and aim to sustainably optimize the health of people, animals and plants and the equilibrium of ecosystems based on scientific evidence and on risk assessments developed by relevant international organizations, and recalling decision 14/4 of the Conference of the Parties of the Convention on Biological Diversity which requested the Executive Secretary and the World Health Organization, as well as other partners, to continue the development of a draft global action plan to mainstream biodiversity and health linkages into national policies, strategies, programmes and accounts.

## 2. Principles

*What principles could be set out in the future instrument to guide its implementation?*

### **Proposed principles:**

- (1) The importance of the **Rio Principles** in addressing the sound management of chemicals was reaffirmed in Resolution WHA76.17 on the impact of chemicals, waste and pollution on human health, which was adopted by the World Health Assembly on 30 May 2023.
- (2) The principle of **equity**, and the specific needs and special circumstances of developing and least developed countries, including small island developing States.

### **(3) Human rights approach**

#### Right to health

- The right of all people to the highest attainable standard of health is a fundamental human right under international law.
- The WHO Constitution (1946) Preamble states that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition. The WHO Constitution also states that the health of all peoples is fundamental to the attainment of peace and security and is dependent upon the fullest co-operation of individuals and States.  
<https://apps.who.int/gb/bd/PDF/bd47/EN/constitution-en.pdf?ua=1>
- The Universal Declaration of Human Rights (1948) states that 'Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care ...' (Art. 25).  
[https://www.un.org/en/udhrbook/pdf/udhr\\_booklet\\_en\\_web.pdf](https://www.un.org/en/udhrbook/pdf/udhr_booklet_en_web.pdf)
- The International Covenant on Economic, Social and Cultural Rights (1966) recognizes 'the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.' and provides that the steps to be taken by the States Parties to the ICESCR 'to achieve the full realization of this right shall include those necessary for: ... The improvement of all

aspects of environmental and industrial hygiene (Art. 12)

<https://www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-economic-social-and-cultural-rights>

**(4) Right to a clean and healthy environment**

- In Resolution WHA76.17 on the impact of chemicals, waste and pollution on human health, the World Health Assembly noted the adoption of Human Rights Council resolution 48/13 ( <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G21/289/50/PDF/G2128950.pdf?OpenElement> ) and General Assembly resolution 76/300 entitled “The human right to a clean, healthy and sustainable environment.” which:
    - recognizes the right to a clean, healthy and sustainable environment as a human right;
    - notes that the right to a clean, healthy and sustainable environment is related to other rights and existing international law; and
    - calls upon States, international organizations, business enterprises and other relevant stakeholders to adopt policies, to enhance international cooperation, strengthen capacity-building and continue to share good practices in order to scale up efforts to ensure a clean, healthy and sustainable environment for all. <https://daccess-ods.un.org/tmp/8649598.95610809.html>
- (5) **Strong political commitment** is necessary to develop and support, at the national, regional and international levels, comprehensive multisectoral measures and coordinated responses, including taking into consideration the need to take measures to promote the participation of indigenous individuals and communities in the process.
- (6) **International cooperation** to establish and implement effective treaty measures, taking into consideration local culture, as well as social, economic, political and legal factors, will be an important part of treaty implementation.
- (7) The participation of **civil society** is essential in achieving the objectives of the treaty.
- (8) **One Health approach**: The treaty should recognize the interconnectedness of human, animal and environmental health.
- (9) **Evaluation of potential risks to human health** should form part of all assessments of risk under the treaty, to ensure that the objective of protecting human health is met in implementation of the treaty.

**Explanatory Text:**

- (1) Resolution WHO 76.17 passed by the Seventy-sixth World health Assembly recognized the importance of the One-Health Approach in considering the impact of chemicals, waste and pollution on health. It requested the Director-General of WHO to publish a report, incorporating science and risk based-assessments and conclusions on the human health implications of chemicals, waste and pollution as well as reporting on existing data gaps,

including from a One Health approach. The discussions at the first two negotiating sessions did not sufficiently tackle the issue of harm inflicted upon biodiversity due to plastic pollution. This inadequacy may stem from the lack of acknowledgment regarding the intricate interrelationships between human, human, and environmental well-being.

### 3. Additional considerations

*Provide any other relevant inputs, proposals or priorities here that have not been discussed at INC-2 (e.g. preamble; institutional arrangements, including governing body, subsidiary bodies, scientific and technical cooperation and coordination, and secretariat; final provisions including dispute settlements; and if appropriate annexes).*

Proposed inputs:

Explanatory Text: