

OPTIONAL FORM 99 (7-90)

**FAX TRANSMITTAL**

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NSN 7540-01-317-7368 5089-101 GENERAL SERVICES ADMINISTRATION

## **1997 Declaration of the Environment Leaders of the Eight on Children's Environmental Health**

We acknowledge that, throughout the world, children face significant threats to health from an array of environmental hazards. The protection of human health remains a fundamental objective of environmental policies to achieve sustainable development. We increasingly understand that the health and well-being of our families depends upon a clean and healthy environment. Nowhere is this more true than in the case of children, who are particularly vulnerable to pollution. Evidence is growing that pollution at levels or concentrations below existing alert thresholds can cause or contribute to human health problems and our countries' present levels of protection may not, in some cases, provide children with adequate protection.

Among the most important environmental health threats to children worldwide are microbiological and chemical contaminants in drinking water, air pollution that exacerbates illness and death from respiratory problems, polluted waters, toxic substances, pesticides, and ultra-violet radiation. Most of these threats are aggravated for children living in poverty. While not a comprehensive list, we have chosen items for action, enumerated below, because they can benefit most from collective effort by the Eight.

We affirm that prevention of exposure is the single most effective means of protecting children against environmental threats. We seek to improve levels of protection for children, and we reaffirm the priority of children's environmental health in our own countries, as well as in bilateral and multilateral agendas. We agree to cooperate on environmental research, risk assessment, and standard-setting within the jurisdictions of each ministry. We agree to raise public awareness that would enable families to better protect their children's health. We urge our Leaders to make the protection of children's environmental health a high environmental priority and call for international financial institutions, the World Health Organization, the United Nations Environment Programme and other international bodies to continue ongoing activities and give further attention to children's environmental health, in particular the environmental, economic and social dimensions of children's health.

**Environmental Risk Assessments & Standard Setting:** Historically, due to a lack of comprehensive science, environmental protection programs, standards and testing protocols often have not adequately taken into account nor fully protected infants and children from environmental threats. While our countries have incorporated the precautionary principle or precautionary approaches and safety factors into environmental standard setting, it is important to employ more explicit scientific consideration of children's characteristics and behavior in this process.

We pledge to establish national policies that take into account the specific exposure pathways and dose-response characteristics of children when conducting environmental risk assessments and setting protective standards. We agree there is a need to upgrade testing guidelines to improve our ability to detect risks to children and to assess and evaluate the effects of both single and multiple exposures for children. We urge cooperation through the OECD on adopting revised, harmonized testing guidelines. We will promote research to understand the particular

exposures and sensitivities of infants and children to environmental hazards and exchange research results and information on regulatory decisions. Where there is insufficient information, we agree to pursue the precautionary principle or precautionary approaches to protecting children's health. We call for the consideration of children's environmental health, based on sound science, in the negotiation and implementation of future bilateral, regional and global agreements, such as the negotiations on persistent organic pollutants, long range transboundary air pollution, and trade in particularly dangerous pesticides, chemicals and hazardous wastes.

**Children's Exposure to Lead:** Lead poisoning is a major environmental hazard to children and our countries have taken many successful actions to reduce children's exposure to lead. Our countries continue to support the reduction in risks from exposure to lead.

We call for further actions that will result in reducing blood lead levels in children to below 10 micrograms per deciliter. Where this blood lead level is exceeded, further action is required. We acknowledge the importance to child health of maternal exposure to lead and agree to reduce maternal exposure.

We commit to fulfill and promote internationally the OECD Declaration on Lead Risk Reduction. We commit to a phase-out of the use of lead in gasoline, the elimination of exposure to lead in products intended for use by children, the phase-out of the use of lead in paint and rust-proofing agents, the restriction of lead in products that may result in ingestion in food and drinking water and to set schedules and develop strategies for elimination or reduction of lead from these sources. In addition, we agree to conduct public awareness campaigns on the risks to children from lead exposure and to develop scientific protocols and programs to monitor blood lead levels in children to track our progress in this important effort.

**Microbiologically Safe Drinking Water:** Worldwide, the greatest threat to childhood survival is lack of access to clean water, with more than four million children dying annually from diarrheal disease associated with contaminated water. In recent years, a number of countries have experienced serious waterborne disease outbreaks associated with microbial contaminants, such as cryptosporidium and bacterial and viral pathogens. All countries and relevant international organizations should better incorporate the existing knowledge bases into protecting children from microbiological contaminants in drinking water.

We agree to focus increased attention on drinking water disinfection, source water protection and sanitation, as major instruments of good drinking water quality in our national and regional programs, as well as through existing bilateral foreign assistance programs, international organizations and financial institutions. We will facilitate technology transfer to and capacity building in developing countries where micro biologically safe drinking water is a primary child survival concern.

We strongly support the initiative on sustainable use of freshwater for social and economic purposes, including, inter alia, safe drinking water and sanitation, proposed in the context of the preparations for UNGASS and consider that this initiative should make a major contribution to children's health.

We agree to share information and policies among our countries to improve our drinking water standards and will designate officials from our ministries to exchange monitoring data on microbiological drinking water contaminants and waterborne disease outbreaks on a regular

basis. We agree to collaborate on research to support the development of technologies and methods to control disease outbreaks and will give special emphasis to appropriate technologies for small drinking water treatment systems.

**Air Quality:** Air quality is of particular importance to infants and children, both indoors and outdoors. Childhood asthma and other pediatric respiratory ailments are increasing dramatically in our countries and are substantially exacerbated by environmental pollutants in the air, including emissions from fossil fuel combustion and other sources. While research on children's exposure to some specific air pollutants has been conducted by some of our countries, further research is needed.

We undertake to reduce air pollution in our respective countries, which will alleviate both domestic and transboundary impacts of air quality and, particularly, children's health. Recognizing that indoor air pollution has been identified as a critical problem affecting children's health worldwide, we agree to exchange information on indoor air health threats and remedial measures.

**Environmental Tobacco Smoke:** Children exposed to environmental tobacco smoke are more likely to suffer from reduced lung function, lower respiratory tract infections and respiratory irritations. Asthmatic children are especially at risk. Many of these symptoms lead to increased hospitalizations of children.

We affirm that environmental tobacco smoke is a significant public health risk to young children and that parents need to know about the risks of smoking in the home around their young children. We agree to cooperate on education and public awareness efforts aimed at reducing children's exposure to environmental tobacco smoke.

**Emerging Threats to Children's Health from Endocrine Disrupting Chemicals:** There is growing scientific evidence that a variety of environmental contaminants can exert adverse health effects by their ability to alter the functions of hormones within the body. These effects, which include cancer, reproductive disorders, changes in behavior and immune dysfunction, have been observed in laboratory animals exposed to specific chemicals, wildlife populations in several broadly contaminated ecosystems such as the Great Lakes, and to a more limited extent in humans exposed to some organochlorine compounds. Some of these chemicals also are capable of causing long-term neurological damage. Infants and children may be at particular risk to the potential effects of these contaminants. Children may be exposed to endocrine disrupting chemicals *in utero*, through breast milk and in the environment.

We encourage continuing efforts to compile an international inventory of research activities, develop an international assessment of the state of the science, identify and prioritize research needs and data gaps, and develop a mechanism for coordinating and cooperating on filling the research needs. These activities should complement initiatives that are being pursued in international fora such as the Inter-governmental Forum on Chemical Safety (IFCS) and through the work of agencies such as the United Nations Environment Programme. We pledge to develop cooperatively risk management or pollution prevention strategies, as major sources and environmental fates of endocrine disrupting chemicals are identified and will continue to inform the public as knowledge is gained.

**Impacts of Global Climate Change to Children's Health:** Decisive international action must be taken to confront the problem of global warming including at Kyoto. Our children and future generations face serious threats to their health and welfare from changes in the Earth's climate due the build-up of greenhouse gases in the atmosphere. Overwhelming scientific evidence links human actions to anticipated changes in the global climate system that are likely to result in unacceptable impacts to all nations. In the words of the Intergovernmental Panel on Climate Change: "Climate change is likely to have wide-ranging and mostly adverse impacts on human health, with significant loss of life." Children will be among the most susceptible to more severe heat waves, more intense air pollution, and the spread of infectious diseases and we are only beginning to understand the interactions between these issues and other global trends, such as ozone depletion. Future generations will face many potential impacts of climate change with serious health, environmental and economic consequences.

We must address environmental health threats with a specific focus on children which, for many countries, will require increased coordination between environment, health and other ministries. Countries must increase institutional and other scientific capacities to work on the specific problems of environmental threats to children. We will make the steps agreed upon in this declaration a priority in domestic action plans, report on our progress in carrying out those steps in appropriate international fora and broaden our cooperative efforts on children's environmental health with other countries.

We recognize that environmental threats to children's health must be set in a larger context of poverty alleviation and economic and social development and we urge Leaders to commit to specific results-oriented actions that will accelerate a global transition to sustainable development at The UNGASS and other international fora.