

IMPROVING THE PUBLIC'S HEALTH THROUGH ENVIRONMENTAL HEALTH EDUCATION AND HEALTH PROMOTION

**Adopted by the SOPHE Board of Trustees
November 5, 2004**

Whereas the World Health Organization defines environmental health as comprising “those aspects of human health, including quality of life, that are determined by physical, chemical, biological, social, and psychosocial factors in the environment. It also refers to the theory and practice of assessing, correcting, controlling, and preventing those factors in the environment that can potentially affect adversely the health of present and future generations”;¹

Whereas environmental health promotion can be defined as “any planned process employing comprehensive health promotion approaches to assess, correct, control, and prevent those factors in the environment that can potentially harm the health and quality of life of present and future generations”;²

Whereas Healthy People 2010 identifies key environmental health issues as including outdoor air quality, water quality, toxics and waste, healthy homes and communities, infrastructure and surveillance, and global environmental health;³

Whereas SOPHE resolutions on asthma⁴ and health disparities^{5,6,7,8} document the impact of the environment on health problems and vulnerable populations;

Whereas there are more than 1244 recognized toxic waste sites nationwide – places where human health and the environment are vulnerable to biologic, chemical, radiological, and other waste;⁹

Whereas people living in poverty, including communities of color, are subject to a disproportionate burden of exposure to environmental hazards including industrial waste, indoor and outdoor air pollution, lead toxins and other carcinogens, noise, crowding, and suboptimal built environments;¹⁰

Whereas local public health agencies play a key role in population-based approaches to environmental health³, including seeking community involvement to address environmental health risks that may result from urban renewal of “brownfields” – places contaminated by former industrial activity;¹¹

Whereas chemicals in indoor environments may increase the prevalence of asthma^{12,13,14} and cancer¹²;

Whereas the quality of the built environment can safeguard or endanger the health of children, by affecting asthma¹⁴, obesity, injury, and other health problems;^{15,16}

Whereas mercury contamination was involved in fish consumption advisories for about 33% of lake acreage and 15% of river miles nationwide in 2002, which is of special concern for people consuming fish on a subsistence basis;¹⁷

Whereas the estimated annual medical costs of the environmental burden of asthma, cancer, developmental disabilities, and lead poisoning in children alone is \$54.9 billion, accounting for 2.8% of the nation's healthcare costs;¹⁸

Whereas air pollution can lead to adverse impact upon health, including irritation of eyes^{19,20}, nose¹⁹, and throat^{19,20}, it can lead to breathing problems¹⁹, and substances found in air pollution can cause cancer^{19,20}, birth defects¹⁹, nervous system damage¹⁹ and respiratory tract injury^{19,20};

Whereas the impacts of global climate change could include adverse health effects such as cardiovascular disease, stress and heat-related death^{21,22,23}; skin cancer^{24,25}; food^{22,23} and water²² shortages; exacerbation of asthma and other respiratory conditions^{21,22,24}; and increased incidence of vectorborne²³, waterborne^{21, 22,23,26,27} & foodborne^{21, 22,23,26} diseases;

Whereas environmental health problems in developing countries include respiratory and diarrheal disease²⁸, global environmental justice pertaining to toxic waste²⁹, urbanization³⁰, and occupational health³¹;

Whereas over 268 million people nationwide are served by community water systems, and inappropriate treatment of water may result in waterborne disease, developmental or reproductive effects, and cancer;³²

Whereas there has historically been an inappropriate disconnect between environmental health and health promotion;^{2,33}

Whereas environmental health education and promotion has the potential to influence individual behavior, community policies, and state and federal legislation that can reduce exposure to environmental hazards and mitigate risk;^{34,35}

THEREFORE, BE IT RESOLVED: That SOPHE:

INTERNAL ACTIVITIES:

1. Encourage SOPHE chapters to engage in environmental health education and promotion by addressing prevention, impact, and resolution of local environmental health problems.
2. Develop a National SOPHE Special Interest Group on environmental health education and promotion and encourage local chapters to do the same.
3. Educate SOPHE members about environmental health and health promotion issues by sponsoring sessions at SOPHE midyear and annual meetings.
4. Partner with college and university graduate and undergraduate professional preparation programs to identify competencies in environmental health promotion and to develop curricula to support attainment of those competencies.
5. Collaborate with the Coalition of National Health Education Organizations, environmental health organizations, and other groups to increase public awareness and knowledge of environmental hazards on health, and promote the role of health education and promotion and health education specialists in addressing environmental health problems.
6. Advocate to the CNHEO for the inclusion of environmental health issues as part of the annual Health Education Advocacy Summits.

EXTERNAL ACTIVITIES

7. Collaborate with education agencies to incorporate environmental health promotion in schools from preschool through the K-12 curricula.
8. Educate national, state and local policymakers about the need for increased funding to:
 - Improve access to health services for individuals and communities in the United States and internationally who may have been exposed to toxic substances.
 - Expand health education programs and research to apply best practices and to build the science base for environmental health promotion.

- Enforce policies that protect the health of the public, with particular attention to vulnerable populations and communities experiencing disparities in exposure to hazardous substances nationally and internationally.
 - Develop environmental health surveillance systems with individual and community level social and behavioral indicators to assess the impact of environmental health promotion interventions.
9. Build capacity of public health professionals to apply principles of community-based participatory research, environmental risk communication and other behavioral/social science theories and principles to environmental health problems
 10. Promote improved collaborative and interactive relationships between federal, state and local public health agencies and federal, state and local environmental health agencies.
 11. Promote a heightened awareness of the public and professionals of how the media marketing practices influence both negatively and positively individual and community environments, e.g., tobacco, fast food, and alcohol beverage industries.

Authors: Deborah L. Kubisiak, Elizabeth H. Howze, Pat Louis, Daniel Perales, Carol Prater, Kim Riley, Behjat Sharif, Michele Samarya-Timm, Carol M. Totzkay –Sitar, Lynn Waishwell, Elaine Auld, Eleanor Dixon-Terry.

References

1. World Health Organization <http://www.who.int/phe/en/> (1 July 2004)
2. Howze EH, Baldwin, GT, Kegler MC. Environmental Health Promotion: Bridging Traditional Environmental Health and Health Promotion. *Health Education and Behavior*. 2004. 31(4):429-440.
3. U.S. Department of Health and Human Services. Healthy People 2010: Understanding and Improving Health. 2nd ed. Washington, DC: U.S. Government Printing Office, November 2000. (Chapter 8 “Environmental Health” - Co-lead Agencies: Agency for Toxic Substances and Disease Registry, Centers for Disease Control and Prevention, National Institutes of Health.)
4. Society for Public Health Education Resolution on Reducing the Impact of Asthma, Adopted by the SOPHE Board of Trustees 10/19/01 (<http://www.sophe.org/public/nhew/asthma/asthmres.html>).
5. Society for Public Health Education Resolution on Eliminating Health Disparities Based on Disability Status, Adopted by the SOPHE Board of Trustees May 2, 2002 (<http://www.sophe.org/about/resolutions/docs/disability.doc>).
6. Society for Public Health Education Resolution for Eliminating Female Gender Disparities, Approved by the SOPHE Board of Trustees May 2, 2002 (http://www.sophe.org/about/resolutions/docs/female_disp.doc).
7. Society for Public Health Education Resolution for Eliminating Health Disparities for Appalachian Populations, Adopted by the SOPHE Board of Trustees May 2, 2002 (<http://www.sophe.org/about/resolutions/docs/appalachian.doc>).
8. Society for Public Health Education Resolution for Eliminating Racial and Ethnic Health Disparities, Adopted by the SOPHE Board of Trustees in 2000 (<http://www.sophe.org/about/resolutions/ethnichealth.html>).
9. U.S. Environmental Protection Agency “Final National Priorities List (NPL) Sites” <http://www.epa.gov/superfund/sites/query/queryhtm/nplfin1.htm> (23 July 2004)
10. Evans, GW, Kantrowitz, E. Socioeconomic Status and Health: The Potential Role of Environmental Risk Exposure. *Annual Review of Public Health*. 2002. 23:303-31.
11. Lorenz, J, Mignery, T. Brownfield Remediation. *Occupational Health & Safety*. 2000. 69(11):77-78.
12. Zhang J, Smith KR. Indoor Air Pollution: A Global Health Concern. *British Medical Bulletin*. 2003. 68:209-225.
13. Institute of Medicine, Health Promotion and Disease Prevention Board. *Clearing the Air: Asthma and Indoor Air Exposures*. January 1, 2000.

14. American Public Health Association Policy 200012 “Reducing the Rising Rates of Asthma” 01/01/2000.
15. Cummins, SK, Jackson RJ. The Built Environment and Children’s Health. *Pediatric Clinics of North America*. 2001;48(5): 1241-52.
16. American Public Health Association Policy 9511 “The Environment and Children's Health” Adopted 01/01/1995.
17. United States Environmental Protection Agency. Office of Water. EPA--823-F-03-005. May 2003 “2002 National Listing of Fish & Wildlife Advisories” <http://www.epa.gov/waterscience/fish/advisories/gpfs.pdf> (22 July 2004)
18. Landrigan, PJ, Schechter, CB, Lipton, JM, Fahs, MC, Schwartz, J. Environmental Pollutants and Disease in American Children: Estimates of Morbidity, Mortality, and Costs for Lead Poisoning, Asthma, Cancer, and Developmental Disabilities. *Environmental Health Perspectives*. 2002. 110(7):721-728.
19. United States Environmental Protection Agency “The Plain English Guide To The Clean Air Act” (http://www.epa.gov/oar/oaqps/peg_caa/pegcaa01.html#topic1) 10 October 2004.
20. American Public Health Association Policy 8511 “Hazardous Air Pollutants” 01/01/1985.
21. <http://yosemite.epa.gov/oar/globalwarming.nsf/content/ImpactsHealth.html> (1 July 2004)
22. World Health Organization “Climate Change and Health” (<http://www.who.int/globalchange/climate/en/>) 10 October 2004.
23. American Public Health Association Policy 9510 “Global Climate Change” 01/01/1995.
24. Breslin K. Global Climate Change: beyond sunburn. *Environmental Health Perspectives*. 102(5):440-443, 1994.
25. World Health Organization. Stratospheric ozone depletion, ultraviolet radiation and health (<http://www.who.int/globalchange/climate/summary/en/index7.html>) 10 October 2004.
26. Harvell, CD, Mitchell, CE, Ward, JR, Altizer, S, Dobson AP, Ostfeld ,RS, Samuel, MD. Climate warming and disease risks for terrestrial and marine biota. *Science*. 2002.296(5576):2158-62.
27. Climate Change Impacts (<http://www.jhu.edu/~climate/health.html#Disease%20Specific%20Information>) 10 October 2004.
28. World Health Organization http://www.who.int/water_sanitation_health/hygiene/en/ (9 July 2004)
29. Hess J, Frumkin H. The international trade in toxic waste: the case of Sihanoukville, Cambodia. *Int J Occup Environ Health*. 2000 Oct-Dec;6(4):331-44.
30. Worldwatch Institute <http://www.worldwatch.org/topics/people/urbanization/> (30 July 2004)
31. “World Health Organization Global Strategy on Occupational Health for All” <http://www.who.int/oeh/OCHweb/OCHweb/OSHpages/GlobalStrategy/GlobalStrategy.htm> (30 July 2004).
32. United States Environmental Protection Agency. (Office of Environmental Information and the Office of Research and Development) *Draft Report on the Environment 2003*.EPA 260-R-02-006. June 2003.
33. National Association of City and County Health Officials - RESOLUTION 99-13 Resolution to Support the Integration of Environmental Health and Public Health Practice *Adopted on November 7, 1999* (<http://www.naccho.org/resolution45.cfm>).
34. Kreuter MW, De Rosa C, Howze EH, Baldwin GT. “Understanding Wicked Problems: A Key to Advancing Environmental Health Promotion.” *Health Education and Behavior*. 2004. 31(4):441-454.
35. Schmid TL, Pratt M, Howze EH. “Policy as Intervention: Environmental and Policy Approaches to the Preention of Cardiovascular Disease.” *American Journal of Public Health*. 1995. 85(9): 1207-1211.