

Health Burden of Un-sustainable Management

Human health and Environmental nexus are getting stronger and stronger as population keeps on increasing and economic activities are growing at the fastest speed ever witnessed before. Human being is both a creature and a molder of his environment; a position which not only gives humanity a sole subservience to depend on physical environment for sustenance but also provides an opportunity for intellectual, moral, social and spiritual growth. The World Charter for Nature (1982) has very rightly placed mankind in his correct perspective, as a part of nature where his life critically depends on the uninterrupted functioning of the natural system that ensures the supply of energy and nutrition. Human activities in various sectors of economy in the name of technological advancements and economic growth have greatly disrupted and put out of balance the smooth functioning of the natural system during the past decades. Consequently, we are destroying our own environment through unsustainable use of the natural resources such as land, water and air. Ironically enough, all human actions exploiting the natural resources unsustainably in the past, as a result of ignorance is now being done intentionally to earn more money without adapting the required mitigation measures.



Unsustainable management and life style has a heavy cost associated with human health besides other social and economic costs. The World Health Organization (WHO) has reports that in 2012 around 7 million people died - one in eight of total global deaths – as a result of air pollution exposure. The worst of all sources of pollution is exposure to cardiovascular diseases, such as strokes and ischemic heart disease, as well as cancer associated with air pollution. The largest air pollution-related burden in 2012, with a total of 3.3 million deaths linked to indoor air pollution and 2.6 million deaths related to outdoor air pollution. The major sources of ambient air pollution are industrial and vehicular emissions, dust and other outdoor emission. The indoor air quality is polluted due to the use of wood, cow dung, biomass, kerosene and other fossil fuel as source of domestic energy.



It is further reported that 2.4 billion people will lack improved sanitation in 2015. As safe and readily available water is important for public health, whether it is used for drinking, domestic use, food production or recreational purposes. Contaminated water and poor sanitation are linked to transmission of diseases such as cholera, diarrhea, dysentery, hepatitis A, typhoid and polio. Lack of sanitation, inadequate, or inappropriately managed water and sanitation services expose individuals to preventable health risks. The

major causes are unsustainable management of urban, industrial and agricultural wastewater resulting in exposing hundreds of millions of people to dangerously contaminated or chemically polluted waters.

Consequently, over 842 000 people are estimated to die each year from diarrhea as a result of unsafe drinking-water, sanitation and hygiene. Almost 240 million people are affected by schistosomiasis – an acute and chronic disease caused by parasitic worms contracted through exposure to infested water. Chemicals are part of our daily life as all living and inanimate matter is made up of chemicals and virtually every man-made product involves the use of chemicals. It is estimated that in 2004 at least 4.9 million deaths (8.3% of all deaths) were due to environmental exposure to selected chemicals. Overall, 99% children are affected by high exposure to lead in low and middle-income countries worldwide.

In South Asia, mortality, morbidity, and disability attributable to the major non-communicable diseases account for about 60% of all deaths and 47% of the global burden of disease; these rates are expected to rise. Almost half of the adult disease burden in South Asia is attributable to non-communicable diseases. Environmental factors are the major determinants of almost all non-communicable diseases. Obstacles to managing the non-communicable diseases epidemic in South Asia include sedentary lifestyles, extreme poverty, and inadequate health care systems.



In order to protect human environment from the adverse impacts associated with unsustainable developmental activities, the need for an effective disciplining of human activities was felt. It is with this view that the place of men and women in environment was recognized at the UN Conference on Human Environment held in Stockholm in 1972. The post Stockholm era witnessed a more rapid global and national environmental institutional

development coupled with the adoption and ratification of dozens of Multilateral Environment Agreements (MEAs) by the world including South Asian countries.

From Rio to Rio+20, countries in South Asia played an active role in the global response to the environmental challenges and the environmental initiatives passed through a gradual transition from environment conservation to the sustainable development. Chapter six of the Agenda-21 'Protecting and Promoting Human Health' provides for a strong and actionable instrument in this regards. WHO is working closely with global, regional/sub-regional and national environmental agencies and countries for ensuring protection of human from the negative impacts of environmental pollution but the challenge is highly complex in space and time. The institutional response is always available in the form of policy, strategy, programmes and legal instruments but their implementation requires community involvement, motivation and above all awareness.

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