



WORLD HEALTH ORGANIZATION

NOTE FOR THE PRESS

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Note for the Media WHO/20
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NEW COUNTRY ESTIMATES SHOW HEAVY TOLL CAUSED BY INDOOR AIR POLLUTION

GENEVA -- In the 21 worst-affected countries, close to 5% of death and disease is caused by indoor air pollution, according to new estimates published by the World Health Organization (WHO).

The first-ever country-by-country estimates of the burden of disease due to indoor air pollution highlight the heavy toll solid fuel use takes on the health and well-being of people around the world.. The countries most affected are Afghanistan, Angola, Benin, Burkina Faso, Burundi, Cameroon, Chad, the Democratic Republic of the Congo, Eritrea, Ethiopia, Madagascar, Malawi, Mali, Mauritania, Niger, Pakistan, Rwanda, Senegal, Sierra Leone, Togo and Uganda.

In 11 countries -- Afghanistan, Angola, Bangladesh, Burkina Faso, China, the Democratic Republic of the Congo, Ethiopia, India, Nigeria, Pakistan and the United Republic of Tanzania -- indoor air pollution is to blame for a total of 1.2 million deaths a year. Globally, reliance on solid fuels is one of the ten most important threats to public health.

"The prevention potential is enormous" said Susanne Weber-Mosdorf, WHO's Assistant Director-General for Sustainable Development and Healthy Environments. "Solutions are available, and it is our international responsibility to promote the health and well-being of those affected, who are mostly women and children."

Worldwide, more than three billion people depend on solid fuels, including biomass (wood, dung and crop residues) and coal, for cooking and heating. Exposure to indoor air pollution from solid fuels has been linked to many diseases, in particular pneumonia among children and chronic respiratory diseases among adults.

A shift towards cleaner and more efficient modern fuels, such as biogas, liquefied petroleum gas (LPG) and kerosene could largely eliminate this health risk and prevent 1.5 million deaths a year globally. In the short-term, the promotion of more fuel-efficient and cleaner technologies, such as improved cooking stoves, smoke hoods and insulated retained heat cookers, could substantially reduce indoor air pollution and would bring about many other convenience and socioeconomic benefits.

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These burden of disease estimates will assist national decision-makers in the health, environment, energy and finance sectors to set priorities for preventive action. They can also be used to assess the performance of policies over time. In the context of limited resources, burden of disease information should be complemented with knowledge on technological options in a given country and information on the costs and benefits of such options.

At the 15th session of the United Nations Commission on Sustainable Development (CSD-15), currently taking place in New York, Ministers in the sectors of energy, environment and development will decide whether to adopt recommendations to integrate the reduction of indoor air pollution into national policies, such as Poverty Reduction Strategy Papers, and provide financial resources to prevent adverse health impacts due to indoor air pollution.

Country by country information on indoor air pollution and its health impacts, available at http://www.who.int/indoorair/health_impacts/burden/en/index.html

CSD-15 position statement on household energy, indoor air pollution and health by WHO and other organizations, available at <http://www.who.int/indoorair/policy/hhhcsd15/en/index.html>

Fuel for life: household energy and health, available at <http://www.who.int/indoorair/publications/fuelforlife/en/index.html>

Chairman's negotiating document, summarized at <http://www.who.int/indoorair/policy/hhhcsd15/> and available in full at <http://daccess-ods.un.org/TMP/5572183.html>

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