



10th Meeting of the Conference of the Parties to the
Convention on Wetlands (Ramsar, Iran, 1971)

“Healthy wetlands, healthy people”

Changwon, Republic of Korea,
28 October-4 November 2008

Agenda item XV

Ramsar COP10 DR 23

Draft Resolution X.23

Wetlands and human health and well-being

(See also COP10 DOC. 28 for the executive summary of STRP’s report “Healthy wetlands, healthy people - a review of wetlands and human health interactions”.)

Submitted by the Scientific & Technical Review Panel (STRP)

1. RECALLING that in Resolutions IX.14 and IX.23 (2005) and [COP10 draft Resolution X.21], the Contracting Parties affirmed the relevance of wetlands and the Ramsar Convention to issues of poverty reduction and to disease, specifically Highly Pathogenic Avian Influenza (HPAI), and that the theme for the 10th meeting of the Conference of the Contracting Parties is “Healthy Wetlands, Healthy People”;
2. RECOGNIZING that the concepts both of sustainable livelihoods and of human well-being include *inter alia* human health dimensions;
3. AWARE of the findings of the Millennium Ecosystem Assessment’s health synthesis, wetlands and water synthesis, and other reports; the IWMI-led *Comprehensive Assessment of Water for Agriculture* and its report to Ramsar that is being published as a Ramsar Technical Report; the second World Water Development Report; and the 4th Global Environmental Outlook concerning water, wetland ecosystems, human health, and livelihoods;
4. ALSO AWARE that the 1986 Ottawa Charter for Health Promotion recognizes as pre-requisites for health *inter alia* food, a stable ecosystem, and sustainable resources; that the 2006 Bangkok Charter for Health Promotion in a Globalised World identified five major strategies for promoting health – building healthy public policy, creating supportive environments, strengthening community action, developing personal skills, and reorienting health services – and that the United Nations Human Rights Framework recognized a right at least to sufficient water to sustain [human] life;
5. RECOGNIZING the relevance of the work of the World Health Organisation (WHO) on human health and ecosystems to the implementation of the Ramsar Convention on Wetlands at local, national and international levels;

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6. NOTING the conclusions of the Symposium on “Healthy Wetlands, Healthy People” hosted by Wetlands International and the People’s Government of Shaoxing City, China, on 8 November 2007, to the effect that “an increased understanding of the functioning of wetland systems has led to the realisation that good wetland management benefits both wetland ecosystem health and human health” and that “immediate multi-sectoral action is essential in order to minimise risks and maximise the benefits to human health and well-being of good wetland management”;
7. WELCOMING the Cooperation on Health and Biodiversity (COHAB) Initiative and its attention to human health and ecosystems issues, including on wetlands;
8. NOTING that much of the available information on the trends in interactions between human health and wetlands is derived from analyses of health and water inter-relationships, rather than on those between the wetland ecosystems themselves and human health, in particular the nature of ecological character and ecosystem services and the inter-relationships between ecosystem services, human well-being, and human health;
9. RECOGNIZING that in places wetlands provide habitat for vectors that contribute significantly to the disease burden of local communities (e.g., malaria and schistosomiasis), that methods of environmental control (e.g., water management) can in some circumstances be the most appropriate approach to mitigation, and that development of human settlements and other developments in such areas need to be approached in a precautionary manner;
10. ALSO RECOGNIZING that there are a number of emerging and re-emerging infectious diseases such as HIV/AIDS and Highly Pathogenic Avian Influenza (HPAI) that can create human health problems associated with wetlands and water, and TAKING NOTE of the guidance on wetlands and HPAI in [COP10 draft Resolution X.21];
11. RECOGNIZING that the changing climate is expected to continue to increase the risk to human health of matters associated with wetland ecosystems, including changing distributions of vectors and pathogens, reduction in water availability, unpredictability of physical hazards, and the changing human population demographics associated with these;
12. AWARE that potentially conflicting responses may arise to wetland wise use and to disease and human health risk management, and CONCERNED that there is often little communication between the wetland and health sectors at local and national levels, despite matters of common interest in the management of wetland health and human health issues;
13. AWARE that for many human communities, hunger, malnutrition, and a lack of access to clean water are the root causes of poor health and that health and well-being are in turn closely linked to people’s livelihoods and to the basis for reducing poverty and vulnerability to poverty;
14. ALSO AWARE that poor health can have a severe impact on the capacity of communities to maintain systems of sustainable resource management and wise use of wetlands;
15. FURTHER AWARE that unsustainable wetland use may both increase the occurrence of many diseases and introduce others, while conversely, the sustainable management of

wetlands, especially in a context of water supply and sanitation, can contribute to the reduction and eradication of water-related disease and to maintaining the health of people in general;

16. FURTHER AWARE that the high nutritional value of wetland food products contributes significantly to the human body's resistance and immunity to disease, and that many indigenous wetland plants and animals have significant medicinal values and are often the only source of medicine available to indigenous people and local communities;
17. FURTHER AWARE that in many societies the role of women in relation to family health issues, food preparation, and water collection, and thereby their potential exposure to diseases and contaminants in water and wetlands, gives them a particular role in relation to health in the community, and that they may also be at a higher risk of ill health due to their particular vulnerability, for example, during pregnancy;
18. CONCERNED that wetland ecosystems continue to be degraded; that when they are disrupted by human activities, particularly through increasing global water scarcity and deteriorating water quality, their capacity to deliver ecosystem services is diminished; and that this has direct and indirect effects on human health, including through loss of food production, loss of livelihoods, the emergence of infectious diseases and disease epidemics, and the resurgence and spread of water-related diseases previously thought to be under control; and
19. THANKING the Scientific & Technical Review Panel for its preparation of its report "Healthy wetlands, healthy people - a review of wetlands and human health interactions" and for the provision of the draft executive summary of this report to this meeting (COP10 DOC. XX), and ALSO THANKING the World Health Organisation for its contributions to that report and the government of Sweden for its financial support to the STRP for its preparation;

THE CONFERENCE OF THE CONTRACTING PARTIES

20. CALLS UPON Contracting Parties and all those responsible for wetland management to take action to improve the health and well-being of people in harmony with wetland conservation objectives, in particular by identifying and implementing actions that benefit both wetland ecosystems and human health concurrently or, in case of any perceived conflict between these objectives, by applying as appropriate the guidance on wise use adopted under the Convention;
21. FURTHER CALLS UPON all those responsible for wetland management to address the causes of declining human health linked with wetlands by maintaining or enhancing existing ecosystem services that can contribute to the prevention of such declines, and to ensure that any disease eradication measures in or around wetlands are undertaken in ways that do not jeopardise the maintenance of the ecological character of the wetlands and their ecosystem services;
22. URGES Contracting Parties to encourage all concerned to strengthen collaboration and seek new partnerships between the sectors concerned with wetland conservation, water, health, food security and poverty reduction within and between governments, non-government organizations, and the private sector;

23. ALSO URGES Contracting Parties and development sectors, including mining, other extractive industries, infrastructure development, water and sanitation, energy, agriculture, transport and others, to take all possible steps to avoid direct or indirect effects of their activities on wetlands that would impact negatively on those ecosystem services of wetlands that support human health and well-being;
24. FURTHER URGES Parties to make the interrelationship between wetland ecosystems and human health a key component of national and international policies, plans and strategies, including by definition of specific wetland targets and indicators that link sustainable wetland management to the World Summit on Sustainable Development (WSSD, Johannesburg, 2002) targets for water, energy, health, agriculture and biodiversity (“WEHAB”) and to the Millennium Development Goals, notably goals 1 (“eradicate extreme poverty and hunger”), 4 (“reduce child mortality”), 5 (“improve maternal health”) and 6 (“combat HIV/AIDS, malaria and other diseases”);
25. ENCOURAGES those concerned with wetland conservation and management to bring information on the scientifically proven contributions that naturally-functioning wetland ecosystems make to good health and well-being to the attention of national ministries and agencies responsible for health, sanitation, and water supply;
26. URGES Contracting Parties, the human health sector, and all relevant stakeholders to collaborate in assessing the consequences of wetland management measures linked with human health, including the identification of appropriate trade-offs in decision-making;
27. URGES Contracting Parties to ensure that decision-making on co-managing wetlands and human health issues takes into account current understanding of climate change-induced increases in health and disease risk and maintains the capacity of wetlands to adapt to climate change and continue to provide their ecosystem services.
28. ALSO URGES the wetland authorities in Contracting Parties, working with their health sector counterparts and others, to be vigilant for the emergence or re-emergence of wetland-linked diseases, to act preventively and proactively in relation to such diseases, and, where instances of such diseases are identified, to develop scientifically-based responses taking into account current good practices;
29. ENCOURAGES all concerned to dedicate resources to building capacity for more integrated approaches to wetland and water management and health, including the application of local and traditional knowledge;
30. REQUESTS the Ramsar Secretariat to work with the World Health Organisation to make available the findings of the STRP’s report on “Healthy Wetlands, Healthy People” to the relevant parts of the human health community, and to discuss with the WHO ways and means of strengthening collaboration with the Ramsar Convention, including on technical issues of common interest;
31. INSTRUCTS the STRP, as a high priority, to further investigate the links between wetlands and health, in particular by:

- i) developing from the STRP's report and other relevant sources further products for the human health sector concerning human health and wetlands;
 - ii) further assessing the interactions between wetland ecosystems and their services and human health and well-being, including issues related to impacts on relevant ecosystem services from pollution, degradation, and loss of wetlands, as well as the role of wetlands in relation to waterborne diseases and disease vectors;
 - iii) developing interpretations and conceptual thinking in a Ramsar context of the applicability or otherwise of "health" to wetland ecosystems, the relationship of wetland ecosystem health to the concepts of ecological character and ecosystem services, and the implications for implementing and monitoring wise use and ecological character objectives under the Convention, taking into account both socioeconomic and ecological considerations;
 - iv) identifying gaps in knowledge and information on wetlands and human health for different regions, and identifying ways and means of filling such gaps;
 - v) identifying opportunities to promote the value of Ramsar sites that have high positive values for human health; and
 - vi) preparing guidance for wetland managers and the human health sector on processes for identifying appropriate responses to the co-management of wetlands and human health issues, including trade-offs as well as the application of health impact assessment approaches, increased transparency of information, representation of marginalized stakeholders, and engagement with the core business of other sectors such as water management;
32. INVITES the World Health Organisation, the COHAB Initiative, and other relevant bodies concerned with human health and ecosystems to contribute to the STRP's work on these matters; and
33. FURTHER INVITES governments, non-governmental organizations, research institutions and others to make available, in appropriate forms including to the Secretariat and the STRP, the results of research and demonstration projects on good practice in integrated approaches to wetland ecosystem conservation and wise use and human health, with a view to demonstrating the practical value of such good practices for those directly involved with wetland management.