On 1 July 2017, Dr Tedros Adhanom Ghebreyesus took office as the new Director-General of the World Health Organization (WHO). Among his five priority areas for action by WHO is addressing the health impacts of climate and environmental change. A changing climate and environment impact many aspects of life that are inextricably linked to health – food security, economic livelihoods, air safety and water and sanitation systems – and WHO estimates that 12.6 million people die each year as a result of living or working in an unhealthy environment. As noted by Dr Tedros, WHO has a key role to play in advancing both mitigation and adaptation strategies for climate and environmental change, working in close partnership with other United Nations agencies and stakeholders.

The health impacts of climate and environmental change in the WHO South-East Asia Region are the focus of this issue of the journal. In the collection of invited articles, progress to date towards mitigation and adaptation is discussed, and the remaining work needed in the region to meet the targets set by the Sustainable Development Goals is outlined.

Member States of the WHO South-East Asia Region are particularly vulnerable to a changing climate. Extreme weather events, undernutrition and the spread of infectious diseases are projected to increase the number of deaths attributable to climate change by 2030. As described in this issue, current trends in the region are towards higher ambient heat levels during large parts of each year, which will particularly affect low-income individuals and communities. With respect to occupational health, heat exposure is already a particular problem for working people in the region and thus strategies to address future health effects and productivity losses resulting from increasing heat levels will be essential.

Countries have started to include climate change as a key consideration in their national public health policies. However, further efforts are needed to increase the capacity of health systems to manage the health risks of climate change. One article describes how the steps taken by the health sector in Nepal to address the impact of climate change may serve as a good example for other low- and middle-income countries.

Access to adequate water, sanitation and hygiene (WASH) is essential for the health, well-being and dignity of all people. In general, the region made considerable progress in WASH provision over the past two decades’ work towards the Millennium Development Goals. An article in this issue describes the significant work done to promote the use of water safety plans (WSPs), which are structured tools that help identification and mitigation of potential risks throughout a water-supply system, from the water source to the point of use. WSPs not only help prevent outbreaks of acute and chronic waterborne diseases but also improve water-supply management and performance. More than 5000 urban and rural WSPs have been successfully implemented in the region in the past 12 years, showing that supplying safe drinking water at the tap throughout the WHO South-East Asia Region is a realistic goal.

However, in contrast to increases in coverage of safe drinking water, access to adequate sanitation remains low in some parts of the region, with continued prevalence of open defecation. The most recent data indicate that 364 000 annual deaths from diarrhoea in the region are attributable to inadequate WASH. Although this represents a reduction in diarrhoea mortality since 1990, the level of diarrhoea morbidity has remained unchangingly high. Moreover, while the burden of health effects of inadequate WASH other than diarrhoea, such as undernutrition and soil-transmitted helminthiases, is more difficult to calculate, it is estimated to be at least as great as – and possibly much greater than – that of diarrhoea.

Putting the emphasis on the “S” in WASH is therefore a key priority. In this issue, authors describe the process by which the 2016 WHO manual on sanitation safety planning was developed, report on results of the extensive programme of pilots, and reflect on the opportunities for wider implementation in the region. Encouragingly, the authors note that lessons learnt during the piloting phase show how reducing health risks can be surprisingly easy, even in low-income settings.

In summary, the experts contributing to this issue have highlighted not only the challenges, but also the successes and opportunities that are relevant to health and climate and environmental change in the region. I hope this collection of articles will inform and encourage those working on this WHO priority area for action.

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