

Expectations for a new WHO Director General: health in a rapidly changing environment



Awareness of the need for integrated approaches to health has grown with increasing realisation that human, animal, plant, and ecosystem health are intertwined and ultimately affect the livelihood and wellbeing of human beings, as well as planetary sustainability and resilience.¹⁻³ The origins of many diseases are rooted in how we produce and use food, water, energy, and other natural resources for a growing population,⁴ but also the way our living environments and social and economic interactions evolve.⁵ Historically, this evolution was primarily driven by societies' desire to increase allocative efficiency and generate better welfare for human beings. In the past 3 decades, although millions of people have been lifted out of poverty, many poor sub-populations worldwide are mired in craters of inequality without opportunities.⁶ At the same time, many millions of people produce and consume far more than they need, and this overconsumption has been at enormous environmental and health cost.

We are living in an unprecedented situation in which we are changing ecological dynamics and evolutionary processes more rapidly than ever, because of the number of human beings inhabiting the planet and the efficiency of our technological means. Harnessing opportunities to the benefit of humans without further undermining the ecosystem, other species, and our own health is a key element of the UN Sustainable Development Goals. Although these goals set important targets in several dimensions of society, ecology, and economy, they also raise clearly conflicting agendas. As an example, continued economic growth remains elusive without environmental change and consumption of dwindling resources. This approach undermines the benefits people obtain from healthy ecosystems,^{7,8} potentially exacerbating conflict for the affected populations.⁹ The global community struggles to capture and manage risks of our own doing, because they occur in a complex and dynamic system of many dimensions. With 23% of global deaths in 2012 attributed to unhealthy environments¹⁰—plus morbidity and mortality from zoonotic disease, antimicrobial resistance from injudicious medical and agricultural use, and toxicity

of pesticides and other chemicals—disease prevention through enhanced environmental resilience is clearly warranted. Shifting from the current paradigm of ever growing resource-intensive responses will require deep, structural change far beyond the clinical dimension. The One Health, Ecohealth, Planetary Health, and related approaches support systems based and integrative efforts of multiple disciplines working to attain optimal health for people, animals, and the environment. They can also be instrumental in collating concerns and real risks from multiple stakeholders in the living and inert world, and above all, emphasise upstream prevention opportunities such as equitable trade, welfare oriented animal husbandry and sustainable land use that promote public health. The regional One Health Inter-ministerial meetings WHO recently held in collaboration with the Food and Agricultural Organisation (FAO) and the UN Environmental Program (UNEP) are a strong step forward. These programmes are further strengthened by the Operational Framework for Good Governance by WHO and the World Organisation for Animal Health (OIE) at the human-animal interface, which supports countries to bridge WHO and OIE toolkits for the assessment of national capacities. However, funding mechanisms and incentives remain limited to support operationalising One Health. For example, although the Contingency Fund for Emergencies provides crucial response resources for public health emergencies, the future Director-General of WHO should also advocate for long-term capacity and infrastructure investments across the UN that ultimately provide incentive for intersectorial collaboration and promote disease prevention.

The clear dominance of anthropogenic change on our planet has changed the requirements for governance and leadership. The leadership of WHO in the Anthropocene should reflect a holistic approach to health. In this respect, we expect the future Director-General to facilitate shifting the global health conversation from a solely health security narrative towards a narrative of mutual benefits for the whole planet. We would hope that they consider decisions that are detrimental for future generations as important as



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decisions made for the benefit of our generation. Now more than ever, WHO should have the forethought to constructively engage diverse stakeholders and broaden the agenda to address underlying drivers of disease—including predatory economy, landscape change, rapidly changing food systems, and climate change, among other pressures. It is imperative that we optimise development investments for the future. For this, the Director-General will rely on a cabinet that include diverse perspectives, ensuring a focus beyond solely human health security aims, and a balanced approach that respects the necessity of healthy animals and ecosystems. We expect the Director-General to show exceptional courage by incorporating the importance and immediacy of an integrated health approach for future generations.

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