

Statement on Interlinkages in Health and Biodiversity

Excellencies, dignitaries and colleagues,

As articulated by previous speakers and well highlighted by the seminal research publications such as “Sustaining Life: How Our Health Depends on Biodiversity” (2008)¹ and the recent State of Knowledge Review on Biodiversity and Health by CBD and WHO (2015), health is closely linked to biodiversity and ecosystems and includes multiple dimensions. Addressing these multiple dimensions in all its complexities is essential to achieving health, wellbeing and equity.

This brings us to a foundational question of what it means to “be healthy” that goes beyond traditional notions of access to health. It brings us back to the WHO definition of health which refers to “a complete state of physical and mental well-being”. This requires us to Understand interdependencies, and to adopt a Systemic approach to jointly address health and biodiversity issues and thereby allow us to Leverage on the strengths and Synergize efforts to achieve concurrent benefits.

At the same time, it is important to pay attention to issues of equity and inclusivity – of marginalized and vulnerable groups towards access to resources and healthcare as well as rights to their knowledge and health practices. Such approaches are not new to related communities of practice and there is growing evidence that several initiatives have moved beyond pilot phases and are being adopted by different stakeholder groups.

For further strengthening these initiatives there is a need for strategically focusing on appropriate efforts in the realms of research, capacity building, science-policy interfacing, advocacy, and upscaling successful pilot models. While there are several areas where a combination of efforts may be deployed, I shall focus on a

¹ Eric Chivian and Aaron Bernstein

few areas and highlight some impactful initiatives that are enabling co-achievement of health, biodiversity and sustainable development goals and which, importantly, can potentially be replicated elsewhere. These initiatives also highlight strategies for multistakeholder partnerships and new forms of international cooperation and financing.

1. Agriculture food, nutrition and livelihoods – It is no surprise that agro-biodiversity and nutritional security go together. The Biodiversity for Nutrition (BfN) initiative co-ordinated by Bioversity International and funded by the Global Environmental facility, a multi-country project, has been spearheading the facilitation of policy developments to promote agro-diverse farming and diets, especially for children and women. Similar initiatives on health, food, and traditional knowledge are also being undertaken by education networks like the ProSPER.Net and the Regional Centres of Expertise of the United Nations University and several other networks and NGOs with local communities.
2. Traditional medicine, health and livelihoods – most of us are quite familiar with the WHO statistic that around 70 % of the world's population continues to use traditional medicine and resources for health care needs. Estimates suggest that globally between 50,000 and 70,000 species of medicinal plants are used in traditional and modern medicinal systems, and around 6000 plants are actively in trade in the global markets. As per the IPCC Fourth Assessment Report, in many sub-Saharan African rural communities non-timber forest produce such as medicinal plants and forest foods form over 50 percent of cash income and provide health needs for over 80 percent of the population. While the likely impacts of climate change on such medicinal and nutritional resources is high, there is no comprehensive data on this. This highlights the importance of more integrated approaches to assessment of status of biodiversity, health and wellbeing and of

ensuring conservation and sustainable use of such resources at various scales.

Strengthening the capacities and credibility of traditional health practitioners, often the first and sometimes, the only point of healthcare intervention in remote and marginalized communities has become an immediate necessity. Organizations such as the FRLHT and the Medicinal Plant Conservation Network in India have been involved in country-wide, large-scale conservation initiatives for endangered medicinal plants through public-private partnerships. Systematic national assessments carried out under this initiative show that around 300 important medicinal plants fall into various categories of threat in the country. They have also been engaged in mobilizing community health practitioners to identify local health priorities and solutions for more than 2 decades and engaging them in participatory conservation, primary health and livelihoods program. This has created a country-wide healers' and indigenous and local knowledge holders' network in India.

Global platforms are also valuable at bringing together communities of practice. For example, the Biodiversity and Community Health (BaCH) Initiative hosted by the United Nations University brings together the expertise of several multistakeholder agencies with an interest in community health to leverage on and synergize multiple efforts mentioned earlier. This global partnership has led to innovative capacity building initiatives such as peer learning exchange programs between communities from different developing countries across continents and with plans to replicate such efforts through stronger South-South cooperation.

A main objective is also for enabling the development and promotion of appropriate integrative methodologies for assuring evidence on quality, safety and efficacy of health practices based

on standards within and across health systems and various disciplines.

3. Biopharmaceuticals & Neutraceuticals: Prof. Norman Farnsworth and several others have systematically documented a large number of (over 110 molecules) drug molecules that are currently used are derived from natural products. Natural product discoveries still account for a significant part of biopharma R&D. This has key implications for the discourse on the fair and equitable sharing of resources, including under the CBD's Nagoya Protocol. Apart from the more notable discussions on its potential to alleviate poverty and support conservation efforts, there are also examples involving communities in South and South East Asia that trade in raw herbs supplied to major pharmaceutical companies providing even passport data on source of origin of every consignment. There are also several examples of communities partnering in local research and development efforts to develop medicines and nutritional products to meet local consumer demands and devising ways locally to effect equitable benefit distribution. Furthermore, development of local documentation of knowledge linked to Peoples' biodiversity registers and further linking them to intangible property rights are happening in a dynamic fashion within the ambit of international and national legal systems.
4. Landscapes, health and healing – There is increasing evidence suggesting natural/therapeutic/sacred landscapes can contribute to our mental and spiritual. Initiatives such as the IUCN commission on Cultural and Spiritual Values of Protected Areas and specifically case studies from countries like Guatemala, by community based organizations are well documented examples of local and global efforts in this area. It is important to take forward the best practices and recommendations shared at the World Parks Congress in 2014 in order to strengthen this theme.

5. Health education – A proactive approach to raising awareness of health and measures requires the buy-in of most, if not all, relevant actors. In this context, work on health, as well as sustainable development education by the Regional Centres of Expertise of the United Nations University (which is a network of local networks in 146 locations) demonstrates the power of decentralized multistakeholder planning and action. One of the RCEs from Kenya is represented here by colleague Dr. Nguka Gordon who I hope will share some learning from their experience of medicinal plants and livelihoods from Kakamega region, Western Kenya.
6. One health/eco-social health/ planetary health– This is the final point I want to make and it relates to a truly integrated approach to achieving good health for all. This relates to also ensuring the health of the environment and of all life whose spill- over effects have an impact on human health. There are several related and interlinked concepts like ecoHealth, one Health, planetary health, among many others. The work of the Lancet commission on Planetary Health was already shared by Prof. Tony Capon. More demonstrably, the Natural Livestock Farming (NLF) network coordinated from the Netherlands has embarked on a multi-country partnership in the field of One Health using Ethno-veterinary care of livestock as an entry point to reduce antibiotic use and resistance while looking at other dimensions such as local breeds, integration of traditional medicine, animal management and so on. There are several such examples in the area of one health.

While the rise in non-communicable diseases has begun to trigger greater uptake and new recommendations in this area - much more is needed. To get there we not only have to address the common drivers already described but also consider governance and institutional challenges in conservation and sustainable use.

Finally, while we already know what is wrong with the socio-ecological systems that are affecting our health and wellbeing,

actions to achieve the broader mandate of good health care at low costs requires us to connect sectoral implementation plans and strategically consider how to make best use of available resources – natural, human and financial.

In this context, facilitating Inter-agency cooperation has become an urgent requirement. As the management of natural resources typically falls outside the traditional role of health ministries and departments, it is important that the conservation community takes an active role in pursuing this agenda by bringing together health, development and other relevant sectors. I must add here that the United Nations University is committed to contributing to and facilitating as appropriate, research and capacity development in this regard.

In closing, while we are speaking within a policy space, we see around us that successes come when bottom up initiatives are first acknowledged and mainstreamed. To reiterate, it is time to invest and foster multistakeholder partnerships, innovative forms of international cooperation such as South-South, North-South and triangular co-operation, for mutual learning and importantly, to bring together existing efforts and resources.

Thank you for your attention !

Unni Payyappalli

22 May 2016