

**Statement on behalf of WHO, including the Secretariat of the WHO Framework  
Convention on Tobacco Control (WHO FCTC), an entity hosted by WHO**

**Fourth Session of the Intergovernmental Negotiating Committee to develop an  
international legally binding instrument on plastic pollution, including in the  
marine environment (INC4)**

**Ottawa, Canada 23 – 29 April 2024**

WHO and the Secretariat of the WHO FCTC congratulate the INC Secretariat and Member States on the revised draft text of the legally binding instrument on plastic pollution, including in the marine environment.

WHO's contribution to the treaty negotiation process reflects the concerns expressed by Member States in World Health Assembly Resolution 76.17 (2023) that the production, consumption and disposal of plastic products, including microplastics and related chemicals, which can be released to the environment, may potentially impact human, plant and animal health as well as the environment, directly or indirectly

Throughout the negotiations WHO's view has been guided by three overriding principles: the need

- 1) to pursue the highest attainable standard of human and environmental health.
- 2) to address potential health risks and exposures associated with plastic polymers, chemicals and additives, microplastics and nanoplastics at all stages of the plastics lifecycle.
- 3) to ensure access to safe and effective health products that are affordable, accessible and appropriate to those that need them. The treaty must not inadvertently disrupt access to these products.

WHO's Executive Board received an update on progress with the negotiations at its

154<sup>th</sup> session in January 2024 and Ministries of Health voiced their support for these principles and the continued engagement of WHO in the negotiations in accordance with resolution 76.17 of the WHO Health Assembly.

After a careful analysis of the proposed treaty text WHO considers that it is essential to strengthen the revised text by more consistently recognizing potential risks to human health from all forms of plastic pollution and their association with sustainable development and environmental degradation, as well as health benefits (where relevant) from proposed actions.

WHO does not support a blanket exemption from the application of treaty obligations for medical and health uses, responses to public health incidents or research., Instead WHO strongly recommends that special consideration be afforded to health products containing or packaged in plastics, to prioritize continued affordable access to medicines, medical devices and health services, while seeking to reduce plastic use, and reduce the risks and harms from plastic pollution and waste from the health sector. This could include allowing additional time to find and obtain regulatory approval for non-regrettable, affordable, accessible alternatives that meet clinical safety, efficacy and quality standards.

Including healthcare in the proposed “special sectoral approaches” along with agriculture or fisheries, and/or in sector specific approaches to product design and innovation would build on existing expertise, mechanisms and innovative approaches already developed in the health care sector for sustainable procurement, waste management and product circularity.

WHO has existing, well-established health guidance, technical and standard setting mechanisms, expert advisory groups, networks and working groups in relation to health products (including medicines and medical devices), assessment of health risks, management of health waste, and initiatives to reduce carbon and toxicity and increase sustainability in the health supply chain (such as – the Alliance for action on climate change and health (ATACH)).

This expertise and resources could be assets when it comes to implementation of the treaty. Fostering and promoting innovation in design and specifications of health products for greater circularity and sustainability, and strengthen waste management practices in the health care sector. A health sector specific approach or dedicated programme of work for treaty implementation may further assist alignment with existing health mechanisms and networks.

In WHO's experience it is critical that information on health risks and harms associated with environmental hazards, and validated biomarkers of exposure and effect, be mandatory in the transparency, reporting and information-sharing provisions of the treaty. Ensuring that such information is promptly disclosed and not treated as confidential and that such products are clearly and appropriately labelled will to mitigate and prevent health harms.

WHO and health experts seek to be active participants in any scientific / technical mechanism or science-policy interface with an adequate mandate, role and resources to provide the necessary advice, assessments and technical support. In our experience, to avoid potential bias or misinformation and ensure the quality of scientific and technical analysis and advice, subsidiary bodies should function independently and have robust processes in place requiring disclosure of interests and management of potential conflicts of interest, transparency of data and methodologies and opportunities for independent review of advice, recommendations and analysis.

Overall, WHO urges that the development and implementation of this treaty take account of relevant WHO norms and standards and relevant decisions and resolutions of WHO governing bodies, to ensure that treaty functions are coherent with, complementary to, and not duplicative of WHO work.

Also, in this same line, this treaty needs to take into account other international treaties, including the WHO Framework Convention on Tobacco Control. At the recent Tenth Conference of the Parties to the WHO FCTC, a decision FCTC/COP10(14)<sup>1</sup> was adopted

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<sup>1</sup> <https://storage.googleapis.com/who-fctc-cop10-source/Decisions/fctc-cop-10-14-en.pdf>

urging Parties to coordinate to address plastic waste from tobacco products and electronic devices. The decision also called for an examination of regulatory options, including a potential ban on plastic cigarette filters, based on scientific evidence. A report on these matters will be prepared for submission to the Eleventh session of the COP.

In recognition of the disproportionate burden of plastic pollution on Indigenous communities and other populations who are particularly vulnerable to the impacts of plastic pollution, ecosystem degradation, and climate change, WHO emphasizes the importance of incorporating measures that support a rights-based approach, cross-sectoral collaboration and health equity in the treaty development process.

WHO stands ready to support countries as needed in the treaty development and implementation, making best use of WHO's mandate, convening power, technical resources and experience on matters related to health, and of our global and regional technical and scientific networks.