

## Decision 2019/21

### Revised mandate for the Joint Task Force on the Health Aspects of Air Pollution

*Recalling* the relevant provisions of articles 7 and 8 of the Convention on Long-range Transboundary Air Pollution,

*Recalling also* its decision 1999/2 concerning the structure and organization of work,

*Recalling further* the terms of reference of the Joint Task Force on the Health Aspects of Air Pollution (EB.AIR/WG.1/2000/4, annex VIII), noted at its eighteenth session (ECE/EB.AIR/71, para. 58 (c)),

*Recalling* its decision 2002/1 on the financing of core activities, as amended by decision 2018/8,

*Acknowledging* the achievements of the Joint Task Force on the Health Aspects of Air Pollution, including:

(a) Providing scientific evidence of health effects of long-range transboundary air pollutants by delivering a series of health assessment reports by pollutant: persistent organic pollutants (2003); particulate matter, ozone and nitrogen dioxide (2003); particulate matter (2006); heavy metals (2007); particulate matter from various sources (2007); ozone (2008); black carbon (2012); and residential heating with wood and coal (2015);

(b) Holding over 20 annual meetings providing a platform where Parties could share recent policies and activities related to air pollution and health;

(c) Providing updates on progress in research on the health impact of air pollution;

(d) Contributing to Parties' capacity-building and supporting the effective implementation of the existing Protocols and their revisions.

*Recognizing* the need to update the Joint Task Force's mandate to ensure its consistency with the provisions of the amended Protocols to the Convention, and its strategic priorities, as set out in the following documents:

(a) The revised long-term strategy for the Convention on Long-range Transboundary Air Pollution (ECE/EB.AIR/142/Add.2);

(b) The 2016 scientific assessment of the Convention;<sup>1</sup>

(c) The policy response to the 2016 scientific assessment of the Convention (ECE/EB.AIR/WG.5/2017/3 and Corr.1 and ECE/EB.AIR/2017/4).

*Noting with appreciation* the ongoing leadership of the Joint Task Force by the World Health Organization European Centre for Environment and Health and its function as a Centre for Work on the Health Effects of Air Pollution,

1. *Adopts* the Joint Task Force's revised mandate as contained in the annex to the present decision, which includes the Joint Task Force's key objectives and functions to be carried out on an ongoing basis, whereas additional activities and specific tasks and associated deliverables to be carried out in a shorter time frame will be included in the biennial workplans for the implementation of the Convention;

2. *Decides* that:

(a) The Joint Task Force will consist of experts nominated by Parties to the Convention;

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<sup>1</sup> See Rob Maas and Peringe Grennfelt, eds., *Towards Cleaner Air: Scientific Assessment Report 2016* (Oslo, 2016) and United States Environmental Protection Agency and Environment and Climate Change Canada, *Towards Cleaner Air: Scientific Assessment Report 2016 – North America* (2016).

(b) The lead organization is responsible for leading and coordinating the Joint Task Force's ongoing work and tasks, organizing its meetings, communicating with participating experts, maintaining an up-to-date web page that includes information on the Joint Task Force's activities, work, meetings and participants and other organizational arrangements, in accordance with the biennial workplan. Chairs of the Joint Task Force are appointed by the lead organization to carry out these tasks;

(c) In the event that the lead organization needs to discontinue its leadership role, it is encouraged to notify the secretariat as soon as possible, but preferably no later than one year prior to the time it will need to cease its leadership activities. The withdrawing lead organization will make every effort to ensure a smooth transition to the next leadership model, by ensuring that all data and any other information required for Joint Task Force operations are provided to the appropriate country, organization or person(s);

(d) The Joint Task Force is responsible for the production and provision of all information and data on the health effects of air pollution necessary for the implementation of the Convention and its Protocols by the Parties;

(e) The Joint Task Force is responsible for carrying out the work assigned to it in the biennial workplans approved by the Executive Body, reporting thereon and keeping other relevant bodies apprised of its work.

## **Annex**

### **Revised mandate for the Joint Task Force on the Health Aspects of Air Pollution**

1. The Joint Task Force on the Health Aspects of Air Pollution will continue to evaluate and assess the health effects of long-range transboundary air pollution and provide necessary information on the subject. Assessments aim to quantify the contribution of transboundary air pollution to human health risks and help define priorities for guiding future monitoring and abatement strategies.

2. The Joint Task Force reports on its activities and deliverables to the Working Group on Effects.

3. The Joint Task Force's functions are to:

(a) Quantify health impacts of long-range transboundary air pollution;

(b) Expand the knowledge base by consolidating existing evidence on health outcomes of exposure to air pollution and by identifying emerging issues relevant to health;

(c) Provide a forum to the Parties and expertise to exchange recent research, experiences and suggestions on the health impact of air pollution;

(d) Assist Parties in quantifying the health impact of transboundary air pollution and defining priorities to guide future monitoring and abatement strategies;

(e) Facilitate communication by Parties of health risks associated with air pollution exposure;

(f) Contribute to capacity-building on quantifying health impacts of air pollution and assessing the health benefits from reducing air pollution in Eastern Europe, the Caucasus and Central Asia by developing a curriculum and supporting the use of health impact quantification tools;

(g) Cooperate with the Working Group on Effects and the Cooperative Programme for Monitoring and Evaluation of the Long-range Transmission of Air Pollutants in Europe on tools and methods for facilitating streamlining of methodological approaches to assessing the effects of air pollution;

(h) Collaborate with the Cooperative Programme for Monitoring and Evaluation of the Long-range Transmission of Air Pollutants in Europe to assess the hazardousness of air pollutants in the region;

(i) Collaborate with other processes and organizations (the European Environment and Health Process, Health 2020, the Paris Agreement, the Sustainable

Development Goals and the United Nations Environment Assembly of the United Nations Environment Programme) to identify and realize synergies;

(j) Carry out other tasks assigned to it by the Working Group on Effects and the Executive Body.