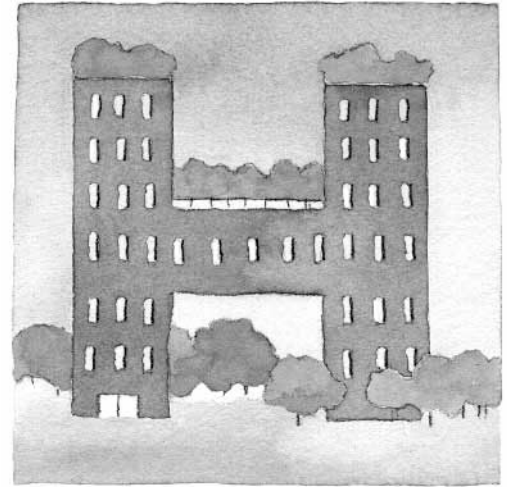




Medical/Public Health Professionals



This section is for individuals and organizations that support or deliver environmental and sustainability education to medical and public health professionals: doctors, nurses, medical support staff, public health providers, and medical students.

Outcomes

Medical personnel and public health service providers will:

1. Understand and make known the health effects of interactions between human activity and the environment

Sample Indicators:

- They are well informed about, and advocate for the sustainable development of the larger ecosystem in which they live and work.
 - They are expected to take a course in environmental health to learn about the links between environmental quality and human health.
 - They engage in **ecological thinking**.
 - They recognize and consider the environmental and health impacts of broad policy decisions (e.g., applying larvicides for control of West Nile virus).
2. Set goals for including the environment in medical practice; increase knowledge of human impacts on environments and reciprocal environmental impacts on human health



Sample Indicators:

- They are able to take an environmental history for patients.
- They recognize the direct relation between human health and the natural environment.



- They recognize issues such as air and water quality, childhood asthma, waste disposal and reduction, consumerism, and personal lifestyle choices as environmental health considerations.
3. Find centralized ways to impact curricula at both secondary and post-secondary levels with respect to environmental health content

Sample Indicators:

- They collaborate to influence decision-makers to include more environmental health in curricula.
 - They expect and help to devise methods of accountability for environmental learning.
4. Increase attention given to environmental topics and issues

Sample Indicators:

- They increase the number of sessions about environment and health given at educational conferences (e.g., Canadian Institute of Public Health Inspectors).
- They practice in a way that is consistent with environment related recommendations, and encourage staff to do the same.
- They are aware of relevant, good quality literature in the environmental area and use it in their decision-making.

5. Develop strong, evidence-based cases that integrate environment and health for use in medical training

Sample Indicators:

- Physicians and medical students include ecosystem health as high priority content.
- “Green thinking” is expected and respected within health professions.

6. Position environmental learning as core material within continuing medical education

Sample Indicator:

- They increase the inclusion of environmental issues in the ongoing professional development of physicians.

7. Increase environmental learning opportunities within the medical and public health professions, as well as interactions with professionals from other backgrounds and fields

Sample Indicators:

- They educate other health professionals and their clients on environmental health issues.
- They take part in the education and promotion of environmental health to prevent further damage to the environment and to people’s health.



- They create links with groups that focus on environmental issues to look at more global solutions (e.g., Canadian Association of Physicians for the Environment, the Environmental Health Committee of the Ontario College of Family Physicians, Ontario Public Interest Research Group, Pesticide Reduction Group, parks, and other green associations from the fields of ecology, education, economics, urban planning, and health and safety).
- 8. Play a role as community leaders, becoming more proactive in their communities and working towards change

Sample Indicators:

- They increase the number of health units with staff dedicated to environmental issues.
 - They explore alternatives to traditional, large-scale solutions to control potential health risks (e.g., chlorination of water, vaccination of populations, etc.).
 - They communicate knowledge about specific environmental risks to their patients and to communities, and increase their ability to diagnose and treat environmental illnesses.
 - They use their knowledge and skills to educate patients and the public when appropriate.
 - They are politically active, as feasible, and provide others with the tools to be politically active to decrease the activities that pollute the environment and affect our health.
9. Incorporate awareness and understanding of, and sensitivity to, nature in developing public policy around public health issues

Sample Indicator:

- They collaborate in calling for municipal, provincial, and federal policies that encourage such things as increases in energy efficiency, renewable technologies, low-emission technologies; increased public transit, cycling, and walking; more intensive urban development; and protection and naturalization of green space.

Needs

Members of the medical profession and health professionals need:

- Broader recognition and acceptance of environmental health by health professionals and the governing bodies
- More time and resources for professional development and education on environmental issues, and coordination of information to disseminate to a broad audience
- Resources for coordination within the system as a whole
- A coordinated effort between the disciplines at the university level to teach students about environmental health



- More information on environmental learning opportunities, including credit courses
- Information about the links between environment and health for patients and the general public
- Identification of realistic goals for advancing environmental knowledge
- Evidence-based strategies to move towards what is optimal
- Education for health professionals on the value of the **precautionary principle**
- Formal training opportunities in health and environment connections
- Ways to identify and measure small successes along the way
- Resources and information on “greening” health care and hospitals
- Questions on which to base an environmental diagnosis (i.e., environmental history)
- An ability to interest public health providers in environmental topics and refer them to quality information
- Available funding for including an environmental perspective in medicine
- More municipal funding to enable local level initiatives to improve air quality and to prevent climate change
- More regional resources for expanding environmental health
- More provincial funding to take the burden off municipal budgets
- An interactive approach helping to identify how current actions or practices may not be consistent with what is optimal
- Champions within the field; a meaningful reward system for environmental learning
- Incentives and accountability for environmental learning

Strategies

Programs, Projects, and Policies

1. Design short, intensive sessions that meet the time demands of physicians and public health professionals (e.g., continuing education seminars on environment and health; peer education, workshops, and short courses; faculty development programs on health and environment).
2. Improve and increase information on environmental issues within programs mandated under the Ontario Ministry of Health.
3. Promote the **precautionary principle** as a tenet of health care for public health and policy activities.
4. Advocate for change from within the system (e.g., medical schools and train-the-trainer programs) and outside the system (e.g., community and patient advocates).
5. Inaugurate health promotion programs that aim to find specific ways to reduce the human impact on the environment (e.g., energy reduction, reduced vehicle use, integrated pest management or alternatives to pesticides, mercury thermometer exchange, awareness of cradle-to-grave pollution for consumer products, organic and local food, waste reduction, more conscientious consumption, and environmental protection as preventive medicine).
6. Collaborate to influence curriculum changes for medical and public health training to include coverage of environmental issues.



7. Make these issues relevant to public health by highlighting the health benefits of reducing environmental impacts.
8. Move education from the current reductionist scientific model towards more a more **holistic**, integrated approach to teaching and learning.
9. Use evidence-based cases as teaching examples.
10. Support compulsory education for youth at the secondary school level based on the notion of people as part of nature, so that all members of society—including health care professionals—will be more aware of environmental issues (i.e., education systems which deal with the environment and the human–environment interface as it relates to health).
11. Make more links among educational programs for health professionals; create a network of information exchange on ecosystem health learning opportunities; actively seek to broaden the base of participation.
12. Educate politicians and decision-makers about the importance of these efforts.
13. Collaborate to persuade government and the private sector to eliminate cancer-causing chemicals.

Resources

1. Make a solid evidence-based case for health–environment links and learning.
2. Call for funding research, professional time, and education on environmental health issues.
3. Develop tools for use by educators and advocates to educate and influence others.
4. Set a timetable to help the many willing participants do the needed work in medical schools and with other health professionals to advance environmental health learning (with existing and available resources).
5. Build partnerships, collaborative programs, and networks with other groups who have similar objectives and expertise about the human impact on the environment and health, thereby sharing resources.
6. Find and make available resources on environmental health, green hospitals and health care, available courses, case studies, and links to recommended websites.

Support

1. Look for champions from within the health professions, as well as community and political champions, who can get things moving.
2. Recognize those who make environment a priority in health care; acknowledge and endorse effective work of other groups (e.g., at Board of Health meetings).
3. Look “outside the circle” for partners who have influence in key areas (e.g., labour).
4. Mentor those who wish to become involved.
5. Create policies for environmental health education.
6. Encourage dialogue on ways to coordinate our efforts.

Please see Appendix 1 for a list of useful websites.

