



Indoor air pollution from solid fuel use - the neglected risk factor



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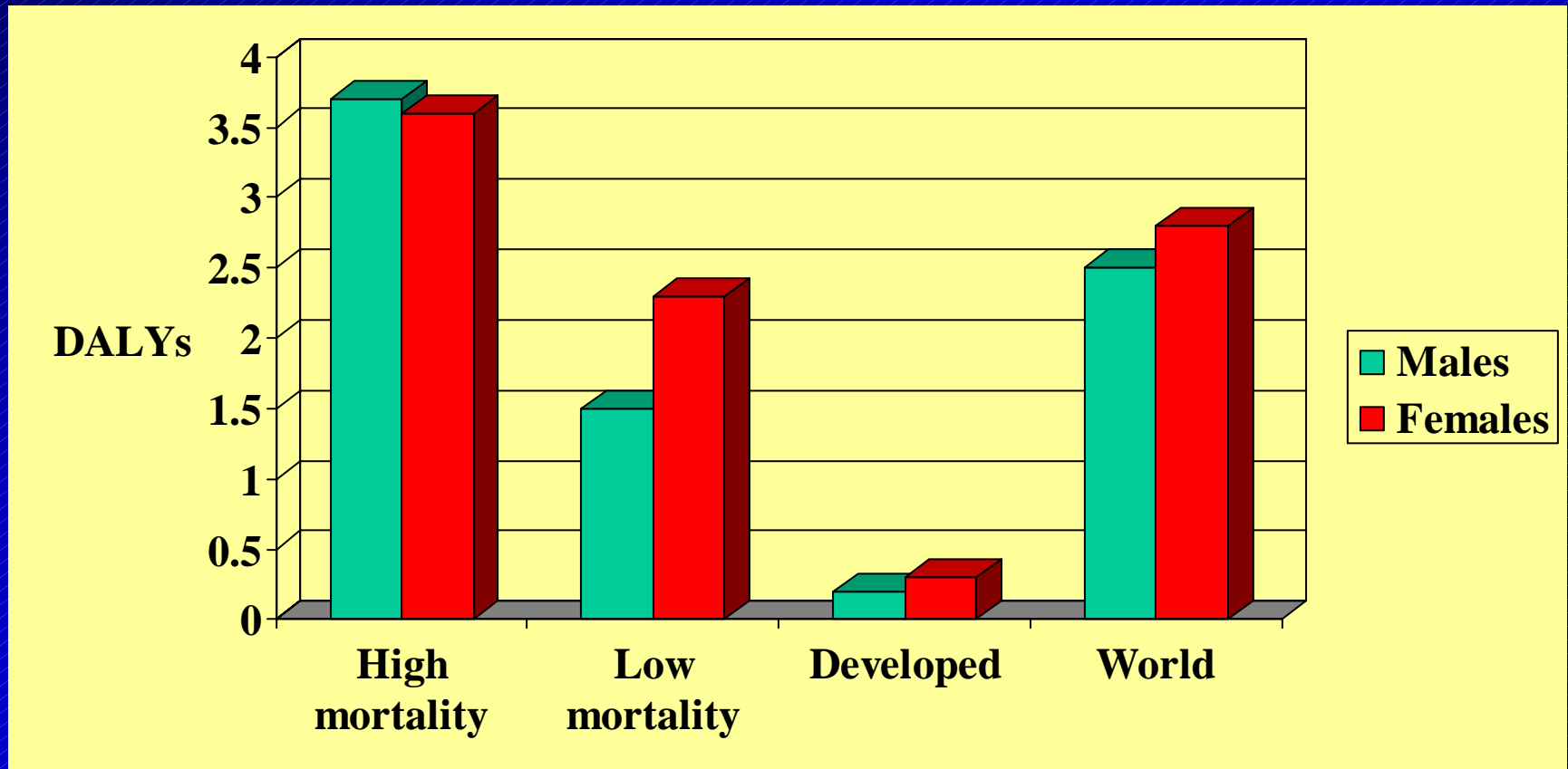
Protection of the Human Environment,
World Health Organization

Household energy, indoor air pollution and health

- Some 3 billion people rely on solid fuels (e.g. dung, wood, agricultural residues, charcoal, coal) for their basic energy needs.
- Cooking and heating with solid fuels leads to high levels of indoor air pollution (IAP), a complex mix of health-damaging pollutants (e.g. PM, CO).
- Women and young children, who spend most time at home, experience the largest exposures and health burdens.

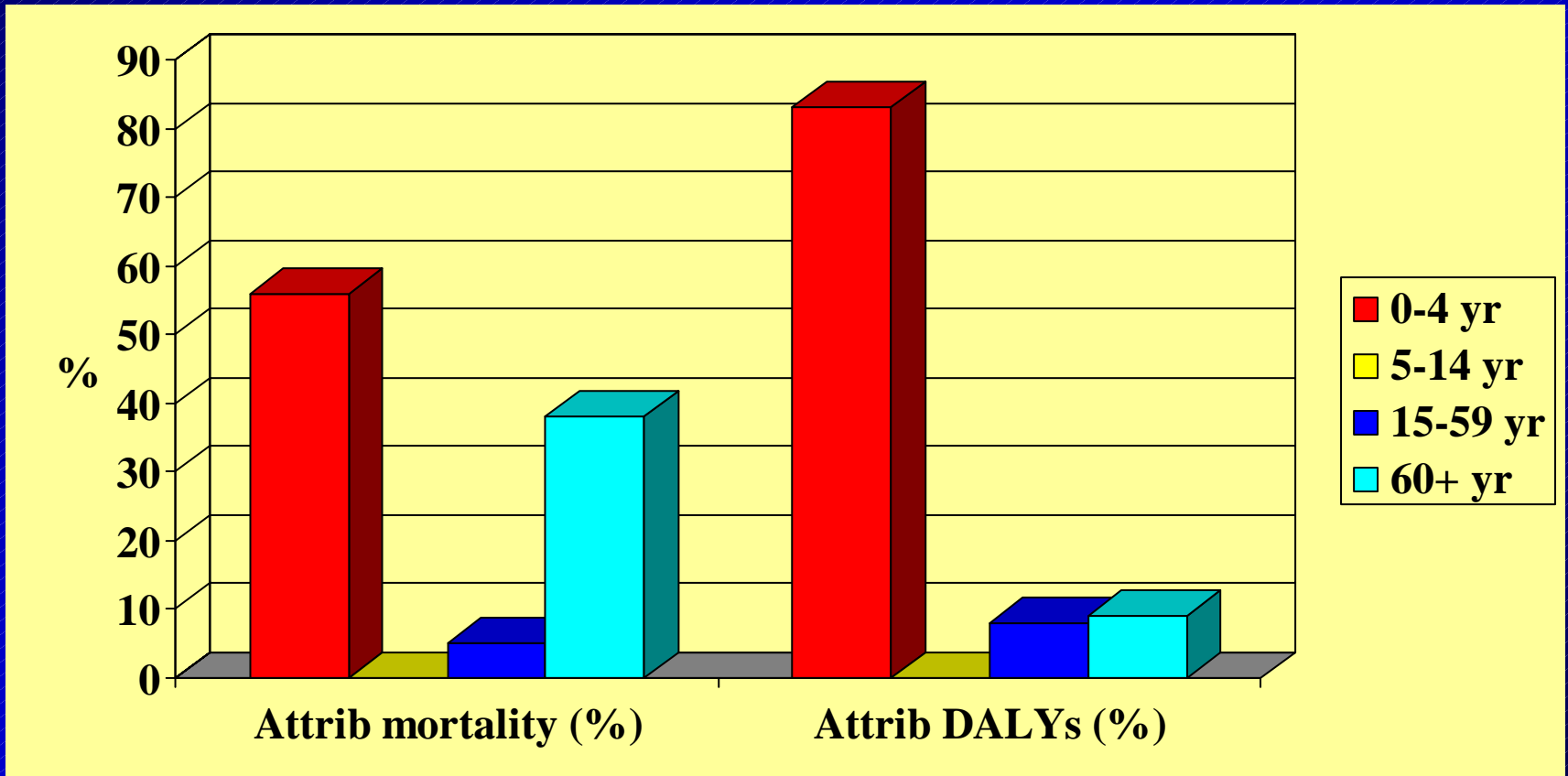


Poverty: distribution of disease burden (DALYs) by level of development



Source: World Health Report 2002

Attributable mortality and DALYs from solid fuel use by age group



Source: World Health Report 2002

What gaps do we still need to fill?

- Do interventions reduce the disease burden?
 - reductions in health outcomes in women and children
 - broader impacts of interventions, e.g. on time-activity patterns, opportunities for income generation
- How to make interventions work?
 - participatory approaches
 - creating demand
 - financing mechanisms
 - sustainability
 - coverage
- Do interventions make sense in economic terms?
 - cost effectiveness analysis
 - cost benefit analysis

WHO's Programme on Indoor Air Pollution

- Encourage research into the health effects of IAP
- Support intervention research
e.g. Guatemala randomized controlled trial; ITDG study in Kenya, Sudan, Nepal
- Build capacity at the regional and national level
e.g. development of a harmonized evaluation methodology; regional training workshops for evaluation of intervention projects
- Provide evidence to policy-makers
e.g. comparative evaluation of intervention experiences; cost effectiveness analysis; approach to cost benefit analysis