

SUSTAINABLE HEALTH
in PROCUREMENT PROJECT (SHiPP)

Annual Report 2022



Supported by



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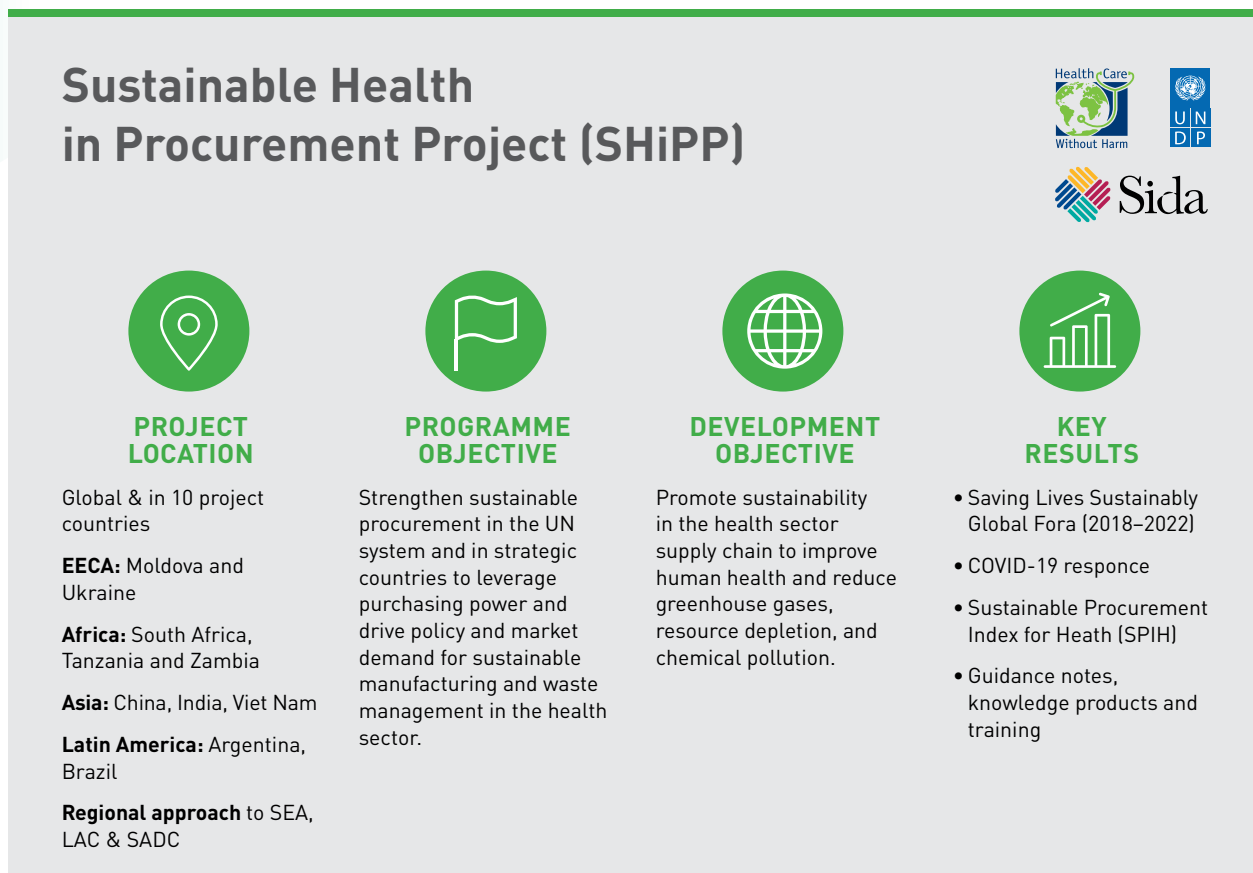
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Introduction and summary

Figure 1. Project Summary



SHiPP—Support to the Historic Shifts towards Sustainable Health Systems

Sustainable Health in Procurement Project (SHiPP) has made important contributions in addressing the health sector’s impact on climate change, using health procurement as an entry point. Born out of UNDP’s vision of health as both a driver and an outcome of sustainable development and launched to align with UNDP’s strategic priorities of integrated development solutions to address the nexus of health and environment, SHiPP has demonstrated how incremental changes within health supply chains can lead to significant impact on making health systems climate resilient and smart. Leveraging UNDP’s broader development mandate and partnering with Health Care Without Harm (HCWH) for implementing lasting change on the ground, SHiPP was able to work both upstream

and downstream on making health sector supply chains more sustainable.

UNDP’s combined expertise in building resilient and sustainable health systems, leveraging health procurement and delivering environment and health interventions catalyzed into SHiPP—the action necessary to produce tools and momentum for change within healthcare supply chains. Health sector contribution to environmental degradation through the use of energy and materials as well as water consumption and direct emissions is recognized by UNDP 2022–2025 HIV and Health Strategy as a critical concern. Health sector is the 5th largest greenhouse gas emitter on the planet with health supply chains contributing 70%

of this footprint. As one of the major procurers of health commodities globally, UNDP is uniquely positioned to ignite change in the health sector across 170 countries and address this harmful impact. Additionally, as a convener and secretariat of the Interagency Task Team on Sustainable Procurement in the Health Sector (SPHS) UNDP fosters targeted market shaping and policy reforms around health procurement by using the broad purchasing capacity and spend value (average of USD \$5.5 billion per year) of the 10 UN and global health agencies.

SHiPP, with a modest budget and a broad reach, demonstrated that where efforts of UNDP, governments, manufacturers, and health sector actors align—progress towards decarbonized and detoxified health supply chains is possible. SHiPP achieved unequivocal policy gains in 10 focus countries and 3 regions (Southern Africa, Latin America and Southeast Asia). In Vietnam, for example, the policy on elimination of plastics from the health sector was developed and is now part of the key performance indicators for all healthcare managers. The partnership with Health Care Without Harm (HCWH)—reaching the Global Green Health Hospital network active in 83 countries with over 70,000 healthcare facilities—was able to pilot a number of tools such as the Sustainable Procurement Index, the climate checklist among

others, all developed by SHiPP and tested in real time to facilitate change on the ground. The work with the private sector through the Global Forum enabled SHiPP to directly impact manufacturers and suppliers of health commodities in over 5 regions where the Forum was convened (Philippines, Tanzania, Saudi Arabia, Colombia and United Kingdom). With the evidence and prototypes developed, manufacturers are investing their own resources to introduce sustainable solutions including use of solar to operate their plants as it is the case with manufacturers in India and Medical Stores limited in Zambia.

SHiPP provided tangible methodologies and tools for countries to include health—a topic that has traditionally has been left out—in their Nationally Determined Contributions to Climate Change and partner in ensuring that countries prioritized resilient and climate-smart health sector in their climate commitments. At a global level this was articulated through COP 26 and the subsequent establishment of the the Alliance for Transformative Action on Climate and Health (ATAACH). Significant efforts of SHiPP and its partners have contributed to more countries signing up to the health and climate agenda which is evidenced by United Arab Emirates—hosted COP28 commitment to a dedicated day focused on health. This report summarizes the final year of SHiPP, but the transformation of the health systems has just begun.

Final Year in Review

The final year of the Sustainable Health in Procurement Project (SHiPP) was marked by efforts to overcome the challenges posed by COVID-19 and disruptions caused by the war in Ukraine. In this context, the project focused on completing the remaining interventions, consolidating the structures to sustain the progress, identifying the priorities for future work, and outlining the strategic next steps. The project implementation continued smoothly and achieved key results in SHiPP countries and beyond, as planned through the bridge funding request. The project continued to roll out the Sustainable Procurement Index for Health (SPIH). In May, a major global orientation event on the Index was held for the UN Interagency Task Team on Sustainable Procurement in the Health Sector (SPHS) members, representatives

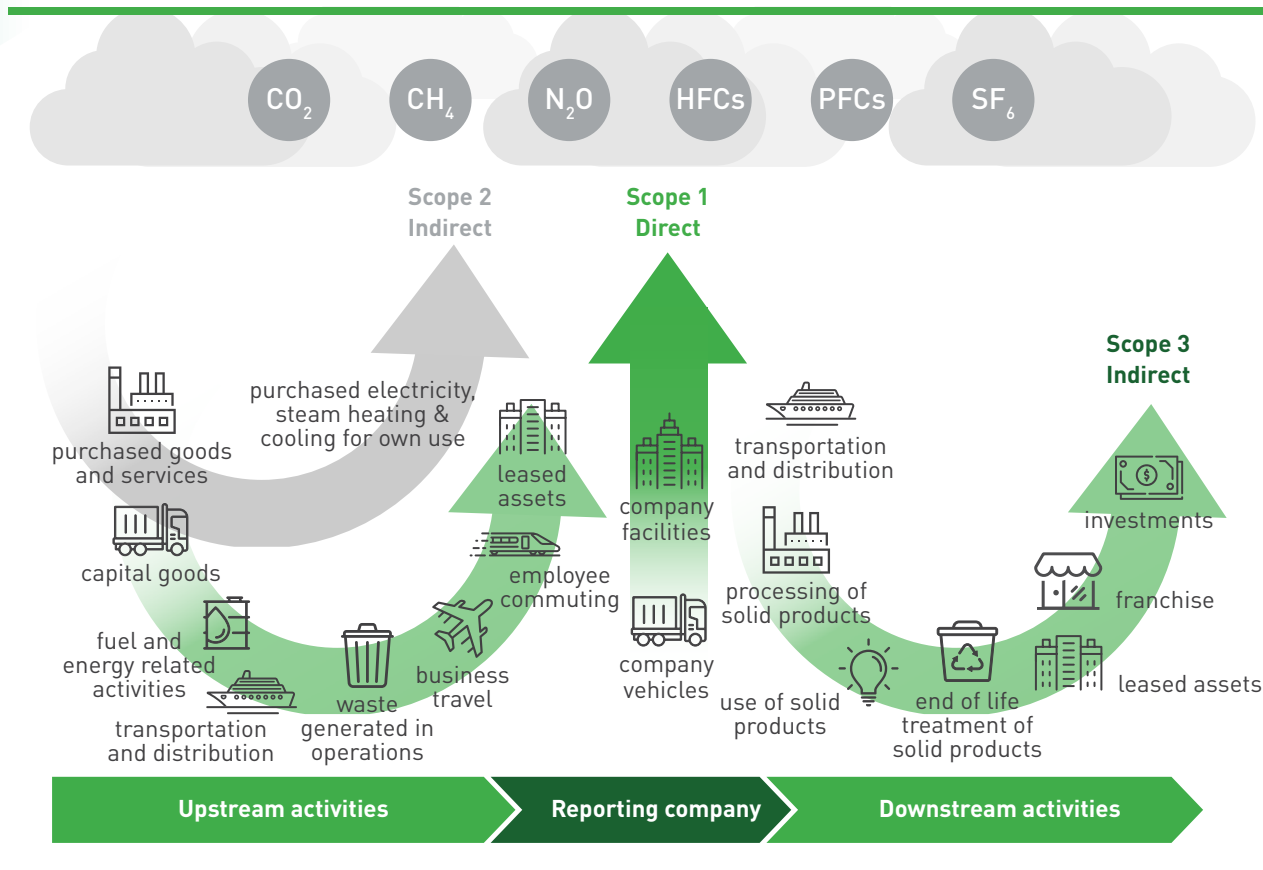
from SHiPP focus countries, and regional staff. The event enabled the participants to acquire practical skills to apply and use the SPIH in various contexts, such as procuring health commodities and goods.

Along with the index, the project also launched the new [Sustainable Procurement Checklist: A Self-assessment tool for the health sector](#) on the [Global Green and Healthy Hospitals \(GGHH\) Hippocrates Data Center](#) website in English and Spanish. The Checklist supports the implementation of the [Sustainable Health Procurement Guidance Note](#) and the [Sustainable Procurement Guide](#), which help procurers and administrators benchmark their performance and monitor their progress. The project also publicly launched the new [Sustainability Criteria for Examination and Surgical Gloves and Toolkit](#)

in its final year. Gloves were prioritized because of the documented concerns about forced labor in the supply chain of this commodity, and excessive use of resources in its life cycle, i.e. significant greenhouse gas emissions, pollution through the production

cycle, and contribution to waste. This was especially timely, since COVID-19 response led to a surge in the use of gloves. The guide's launch was followed by commitments from all GGHH members in different SHiPP regions to test the criteria in their hospitals.

Figure 2: Scope 1,2 and 3 of greenhouse gas emissions



In November, 2022, the 5th [Saving Lives Sustainably Global Forum](#) was successfully convened under the theme *“Supply Chains for Sustainable Healthcare: Production and Procurement to Accelerate Social and Environmental Action.”* The event facilitated dialogue among key stakeholders in the health sector supply chain. Through this platform, manufacturers of health commodities had the opportunity to discuss with procurers, policymakers, academia, and Civil Society Organizations (CSO) the need to transform the entire health supply chain towards carbon-neutrality. In addition, the [Joint UNICEF-UNFPA-WHO Meeting for Manufacturers and Suppliers held in the first quarter of 2022](#) provided a platform for manufacturers and suppliers to understand the importance of enhancing sustainability in business practices. The Forum was attended by more than a thousand manufacturers and suppliers of health commodities from Europe, Asia, Latin and North America.

Overcoming Challenges: Due to the war, UNDP Ukraine country office was unable to implement their work plan fully, however, a special assessment on barriers and gaps on the path to [sustainable management of medical waste](#) in healthcare facilities in Ukraine was still conducted. The war in Ukraine [disrupted the movement of goods and services](#), including those related to health. This resulted in shortage of [health and other general commodities](#) in many countries around the world. The effects of the COVID-19 pandemic on warehouse capacity and container availability had just started fading when the war in Ukraine triggered another hit for the industry. The war impeded the flow of goods and fueled health product cost increases and shortages around the world. As these challenges persisted, SHiPP supported the government of Ukraine in implementing special activities to track the impact of war-related emissions on the health of its people and nearby countries.

Programme management and support

SHiPP joint planning and review meeting: On March 22, project [planning and review meeting](#) was held to ensure SHiPP programme efficiency. The review meeting started with a unified message that humanity is at a tipping point and that all efforts must be galvanized to accelerate the decarbonization agenda. At this review meeting, SHiPP focus countries and scaled-up regions presented their key 2021 achievements and 2022 workplans. Arising from this exercise the rollout of the Sustainable Procurement Index for Health (SPIH) was prioritized. Countries further committed to continuing identifying key health sector carbon hotspots and supporting various interventions, such as policy formulation, capacity building, and removing chemicals of concern from the health supply chain. These and many other interventions have been identified as crucial for helping the healthcare sector decarbonize. On 13th October 2022, an annual review meeting was held with the Swedish International Development Cooperation Agency (SIDA), where the project senior management team presented key project results from the past four years. Through SHiPP, UNDP and Health Care Without Harm implemented several initiatives that are advancing the COP26 Health Commitments in SHiPP countries, regions, and beyond. SIDA recognized the interesting, innovative, and creative work that SHiPP has done and its direct impacts.

Resource mobilization: As project funding from SIDA was ending in December 2022, senior management embarked on various resources mobilisation efforts to continue and expand the work and legacy initiated by SHiPP Phase I in the ten project countries and beyond. SHiPP's new ambition is to deepen engagement in the current ten countries while adding new countries. The new phase will contribute to reducing the global health sector's carbon footprint through several novel and science backed interventions including the following:

➤ **Develop Policy and Global Consensus:** Policy coherent and development across the health sector to decarbonize, detoxify, make climate

resilient, equitable, pandemic-ready supply chains aligned with SDGs

- **Strengthen Sustainable Procurement Capacity:** Build capacity for sustainable health care at every stage of the supply chain.
- **ITransform supply chains for decarbonization and detoxification:** Mobilize national and subnational ministries of health, other line ministries, international organizations, private sector & health care systems to transform the health sector
- **Financing SDGs:** working with country level partners to regulate and incentivize sustainable manufacturing and procurement for health.

A draft proposal with a clear theory of change and the related results framework has been developed.

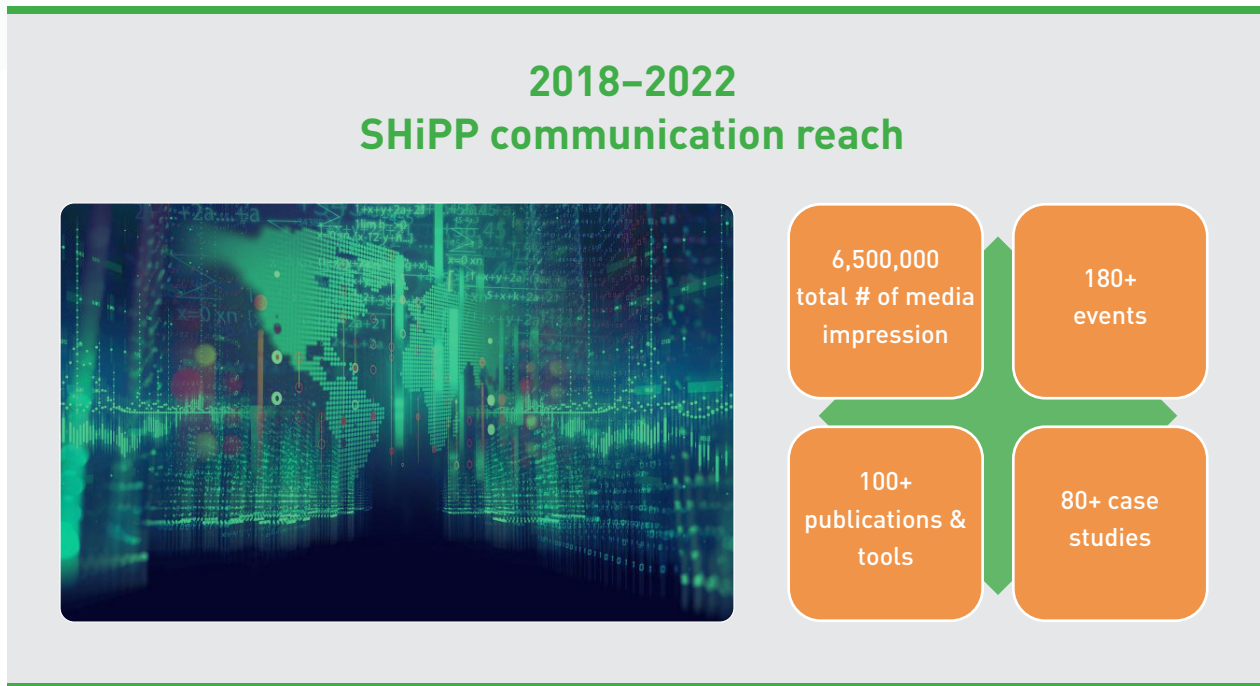
The new program has already been presented to a number of partners that including SIDA, Global Affairs Canada (GAC), the Foreign and Commonwealth Development Office (FCDO), United States Agency for International Development (USAID) among others. More meetings are planned with New Zealand, a selected number of foundations and vertical funds.

Communication for sustainable healthcare: SHiPP continued to strengthen communications with stakeholders through various media channels, publications, meetings, workshops, and webinars to increase awareness about the sustainable healthcare laws, policies, strategies, tools, and practices the project championed and implemented in several regions and countries. The [SHiPP Annual Report 2021](#) was finalized and shared widely with stakeholders through the UNDP and Health Care Without Harm communication channels. The 2021 report featured the technical and financial resources SHiPP has provided for developing different policies, strategies, and tools in the global healthcare sector. Further, the Sustainable Procurement in the Health Sector (SPHS) [Digital Annual Report 2021](#), also featured the SHiPP 2021 results and the [SHiPP Impact Stories that Inspire](#),

were launched. The SPHS 2021 report profiled the efforts of the SPHS Members (Gavi, The Global Fund, UNDP, UNEP, UNFPA, UNHCR, UNICEF, Unitaid, UNOPS, and WHO) to implement equitable,

innovative, and sustainable healthcare policies and practices that positively impact the global health supply chain, while fighting COVID-19 and preventing the next pandemic.

Figure 3. Number of Stakeholders Reached through SHiPP Interventions



In 2022, the 4th *Saving Lives Sustainably: Sustainable Production in the Health Sector Global Forum 2021 Report* was also launched. The report summarized the individual sessions that took place during the *Global Forum 2021* and showcased good practice examples and suggestions for environmental and social sustainability in the production, supply, and procurement of health commodities, delivery of healthcare services, and management of associated waste in the context of the COVID-19 pandemic. In addition, the report provided insights into the best healthcare sustainability practices, case studies, standards, and tools.

Staff transition: During this period, Dr. Rosemary Kumwenda, as well as the Health Care Without Harm International Sustainability Director, Susan Wilburn retired from their respective organisations.

They had both acted as the project’s stewards since its inception. Marina Smelyanskaya was recruited as the new team leader for Eastern Europe and Central Asia on the UNDP side. At HCWH, an International Sustainability Associate Director was hired in May 2022, and the organization’s leadership team assumed the coordination role during the bridge funding year. The technical staff involved in project implementation remained unchanged and continued supporting project activities. This was critical for the project’s continued and consistent implementation both at global and national levels.

SWOT analysis of the SHiPP project: The project team conducted a SWOT analysis to evaluate the strengths, weaknesses, opportunities, and threats of the project so far. The table below summarizes the main findings of the analysis:

Figure 4. SHiPP Project SWOT Analysis

Strengths	Weaknesses
<ul style="list-style-type: none"> • Strong leadership that sets policy and strategic vision and guides the teams on the ground to steer interventions. • Country-level presence in more than 172 countries, which provides a platform for country engagement. • Access to global policies, tools, and knowledge products that can influence global practices and shape markets. • A robust Global Policy Network and Community of Practice that covers key areas of climate, health, gender, energy, and biodiversity, providing skills and expertise to advance the project’s work. • Interest from cooperating partners such as SIDA, the Canadian government, and USAID to continue supporting some innovative project components. 	<ul style="list-style-type: none"> • Lack of fully dedicated staff paid by the project in some countries. • Challenges in retaining skilled practitioners within partner institutions Resulting in having to work with different staff all the time.
Opportunities	Threats
<ul style="list-style-type: none"> • Interest generated through the COP26 health focus which resulted in launch of ATACH . • Availability of a scaled-up proposal developed by the joint team of UNDP and HCWH. • The ability of countries to build momentum and develop ambitious programmes like the case of Tanzania project team, which has developed the Sustainable Public Procurement Portfolio. • Use the experience of SHiPP to strengthen integration into ongoing high-level procurement platforms of the UN system. • Use the SHiPP concept to influence countries that were not part of Phase I to develop similar interventions and achieve sustainability. 	<ul style="list-style-type: none"> • Failure to secure resources for Phase II of the project following SIDA’s end of funding has disrupted the scaling up of interventions. • The inability of countries to mobilize own resources to scale up interventions. • Continued disruption of programme implementation due to concentrating resources and efforts to recover from COVID-19 pandemic and its variants. • War in Ukraine may jeopardize the project gains and cause an increase in air pollution and medical waste, leading to pollution, disease, and death.

Programme implementation

Policies, criteria & standards for sustainable manufacturing & supply of healthcare products

Sustainable Procurement Index for Health (SPIH)

and other related tools: After launching the SPIH in November 2021, SHiPP developed the **SPIH digital platform** to make the tool more accessible to various audiences and users. The new digital platform showcases several functions, such as interface between manufacturers, suppliers, and buyers. Procurement officers can access real-time data and provide immediate feedback. In addition, the new platform produces various reports that allow the SPHS Secretariat and buyers to assist manufacturers and suppliers with specific sustainability capacity building needs. Following the launch of the SPIH, SHiPP collaborated with the Global Fund in developing its **Responsible Procurement Framework (RPF)** program.

To make SPIH widely available to many users, SHiPP participated in a number of engagement events organized globally. The Oxford Global Conferences invited SHiPP to present the index at their **Sustainability**

in Pharma & Healthcare Congress, which took place 8–9 September, 2022 in London. The event provided a key platform to explore best practices and strategies for achieving net-zero carbon targets by healthcare organizations and pharmaceutical companies. More than two hundred delegates from governments and the private sector participated. Furthermore, SHiPP was invited to present the index to **CMS Global**. The 2022 CMS Global Life Sciences and Healthcare Forum was convened under the theme: *Uncertain times, an evolving legal framework: managing risks and ensuring social responsibility in the life sciences & healthcare sector*. Presenting the index to lawyers interested in litigating to curb the impacts of climate change was a key achievement, considering their vital role in developing legal instruments that could contribute to environmental litigation and standard setting. SPIH was also presented to USAID at an upstream level, when the agency expressed interest in understanding how the index could be applied to their programming.

Figure 5. Speakers at the Pharmaceutical Symposium held in London

Key speakers include



Fiona Adshead
Sustainable Healthcare Coalition



Veronique Touilly
UCB



Ian Milimo
UNDP Istanbul Regional Hub



Nazneen Rahman
YewMaker; Sustainable Medicines Partnership



Nick Martin
Great Ormond Street Hospital

Furthermore, SPIH was presented at the annual suppliers meeting organized by the joint UN procurement agencies based in Copenhagen. Given this interest in SPIH, more efforts and resources will have to be dedicated to working with other global organizations to scale up the tool and ensure it becomes the gold standard for sustainability.

Some interested key partner institutions include Unitaid, USAID, other UN agencies, World Bank, and Asian and African Development Banks. Continued engagement with these and other partners aligns with the original design of the SPIH to be a globally adaptable index for health procurement.

To continue bringing SPIH into use, several orientation clinics, tutorials, and meetings were held throughout 2022, in which over **145 participants from twenty different countries** across the globe participated. Among the 145 participants, 97 were women, demonstrating the project's central position of identifying women and profiling them as a driving force of change for sustainability in the health sector. In addition, these events provided participants with practical skills to apply the four dimensions of the index (**Green House Gas Emissions, Resource Conservation, Chemicals and Toxicity, and Labor, Human, and gender rights**) during the procurement and implementation of health services. At the country level, the SPIH served as a guiding tool for developing Government of Tanzania-UNDP's Sustainable Public Procurement Portfolio. The Government of Tanzania committed to ensuring that only sustainable products enter the country through this new portfolio and that involvement of disadvantaged groups (such as women and youths) in supplying commodities to the government procurement system was increased. If brought to scale, this approach could be a model for enhancing women's participation in various supply chains in SHiPP countries and beyond.

SPIH has been well-received by partners on the ground, including the **Global Green Health Hospital (GGHH) network** members. The lead project partner in **Brazil**, Projecto Hospitais Saudáveis (PHS), translated the SPIH User Guide into **Portuguese**, making it available to many facilities on the ground. This allowed to engage Portuguese-speaking countries, such as Mozambique and Angola, which were not part of SHiPP. The index has further shared with **Essity do Brasil** and **Viveo Group**, some of Brazil's key manufacturers of health commodities. Using the SPIH as the guiding framework, SPHS has also developed the **Sustainable Procurement Challenge Modules to Capacitate Members on Governance, Products, and Suppliers**.

In the Republic of **India**, efforts focused on working with Aurolab Madurai¹ to incorporate SPIH components in their **vendor assessment document**. This initiative was deemed an excellent opportunity for hospital-level entities to utilize the

SPIH to promote sustainability in the health sector. SHiPP partners in **India** have also disseminated the SPIH and the user guide throughout the **Health and Environment Leadership Platform (HELP)** and the Sustainable Procurement Healthcare India group. The Indian team also coordinated with four hospitals, including Bhagat Hospital Delhi, Sehgal Neo Hospital Delhi, Jupiter Hospital Mumbai, and Aravind Eyecare Madurai, during the pilot phase to apply the SPIH to their procurement processes. In the Peoples Republic of **China**, the Green Hospital Network working with CEC, translated the index into Chinese, making it available to local partners such as Beijing University Hospital and CEC (through the Green Hospital Committee network, a Chinese member of the Global Green and Healthy Hospitals network.)

The **Latin America and the Caribbean** regional team restructured the **Sustainable Procurement Form 2022²** to collect information about the procurement of gloves and disinfectants. The objective of this revision was to enable the procurement of gloves by applying the SPIH principles through the online **gloves survey online form**. Exam and surgical glove use increased significantly during the COVID-19 pandemic, and raised multiple sustainability concerns, including evidence that gloves affect both human and environmental health by contributing to greenhouse gas emissions, waste, and chemical contamination. In addition, there is mounting evidence that some glove manufacturers engage in forced labor in their production plants. Based on the evidence provided, a number of partners including **OECD**, **HCWH**, and **ILO** have developed dedicated program to work with glove manufactures to address these labor related issues.

In the same period, the **Sustainable Procurement Checklist: A Self-assessment Tool for the health sector** was revised and launched on the GGHH website in Spanish and English. The Checklist follows the **10 elements of a best-in-class sustainable procurement program** and is a GGHH member tool hosted on the Global Green and Healthy Hospitals (GGHH) **Hippocrates Data Center**. It's intended for use by procurement officers, sustainability focal

1 Aurolab, based in southern part of India, is an integral part of the Aravind Eye Care System. It manufactures a wide range of high quality ophthalmic consumables such as intraocular lenses, surgical sutures, pharmaceutical products, surgical blades and equipments.

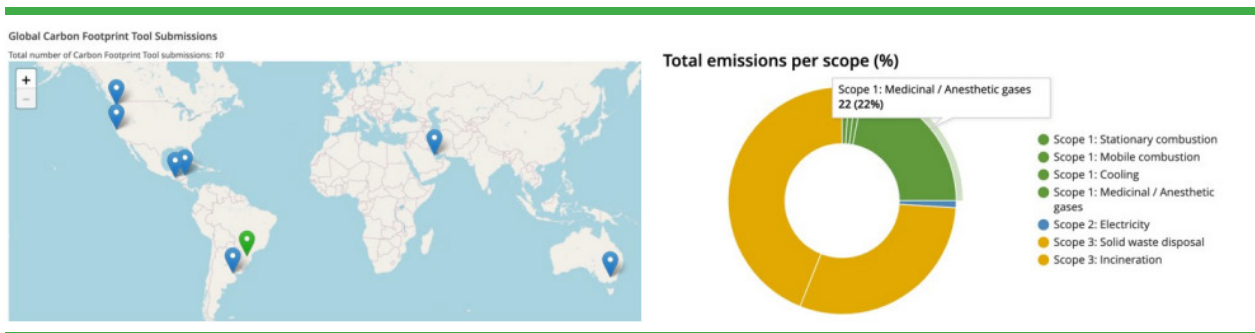
2 from its predecessor Sustainable Procurement Form 2021.

points, and senior management. The Checklist enables healthcare facilities to assess the extent to which their organization has integrated sustainability into procurement processes. The assessment results provide a snapshot of current processes and highlight areas that need improvement, helping to facilitate planning and guide the implementation and improvement of the facility's sustainable procurement programme. The Checklist's user-friendly format includes "yes/no" answers and drop-down options, with results presented through charts, traffic lights, and descriptions. The Checklist has been widely used by over 70% of GGHH members and is hosted on the **GGHH CONNECT Hippocrates** data platform. Access to the Checklist is now

provided to 1,542 members in seventy-five countries, representing over 62,244 healthcare facilities.

Carbon Hotspot Tool: Alongside the SPIH, SHiPP has developed the **Carbon Hotspot Tool**, which now introduces sustainable procurement. This addition was part of the training agenda for the in-depth face-to-face Climate Impact Checkup Tool Training of Trainers and the country-based training workshops for priority countries in Southeast Asia (Indonesia, Philippines, Malaysia, Singapore, Taiwan, and Vietnam). The illustration below shows HCWH's partial visualization of the checkup reports section in the Hippocrates platform.

Figure 6: HCWH's Partial Visualization of the Checklist



Policy Development and Implementation: With technical support from SHiPP, UNDP working with the Public Procurement Regulatory Authority (PPRA) of the Government of **Tanzania** have developed a Sustainable Public Procurement Portfolio (SPPP) and established a formal partnership with the government's Public Procurement Regulatory Authority (PPRA) to strengthen the application and implementation of the country's sustainable public procurement policies and practices. In this process, UNDP will provide technical assistance in developing and adopting environmental and social policies, strategies, and tools to enhance service delivery. The new portfolio will also facilitate investment in producing and manufacturing goods and services by local, women-led, and owned private sectors and promote digital and innovative solutions for sustainable public procurement. Additionally, UNDP will support the government in procuring selected commodities to ensure the country can fulfill its development agenda while maintaining sustainability (SPIH) at the core of all activities. Learning from the Tanzanian SPPP

model, other countries, including Vietnam, Zambia, and Mozambique, are interested to receive support from SHiPP to develop similar projects to create a higher-level impact for sustainable procurement beyond the healthcare sector.

In **Ukraine**, the health impacts and social costs of air pollution in larger urban areas were evaluated. The research aimed to estimate the economic consequences of death resulting from air pollution primarily caused by the ongoing war. The results showed that air pollution-related morbidity and premature deaths would lead to the loss of approximately 300,000 person-years of the labor force in Ukraine. This loss represents about 1.6% of the total labor force in Ukraine and could reduce up to US\$1 billion in the country's GDP. At the conclusion of the war, these recommendations will be used to provide evidence and data for developing new policies and related laws around combating air pollution. Implementing these policies and strategies would contribute to a reduction in morbidity and mortality

rates, thereby saving valuable human and financial resources for the country.

In **Brazil**, the concerted advocacy efforts of SHiPP and other partners resulted in the unanimous ratification of the Kigali Amendment by the Brazilian House of Representatives on May 26, 2022. The amendment adds hydrofluorocarbon gases (HFCs)³ to the list of substances controlled by the Montreal Protocol, which will improve the energy efficiency of equipment used in **Brazil** and reduce the environmental impact of air conditioning and refrigeration systems. The initiative has the potential to significantly reduce the national healthcare sector’s carbon footprint and make Brazil a compelling case study for other countries to learn

from, as it opens the way for the development of new laws and policies around cooling systems.

Gloves Related Policies: The **Sustainability Criteria for Exam and Surgical Gloves** were finalized and translated into **Portuguese** and **Spanish** for use by stakeholders. Following this development, Brazil disseminated a survey on **Criteria and events for acquiring examination and surgical gloves**. This survey is part of a set of activities to pilot sustainable procurement criteria for surgical and procedure gloves with PHS members. Figure 7 below shows the global **guidance for sustainable glove purchasing** produced by Health Care Without Harm.

Figure 7: HCWH’s Global Guidance for Gloves Purchasing

PROTECTION WITHOUT POLLUTION » GUIDANCE FOR SUSTAINABLE GLOVE PURCHASING

Guidance for sustainable glove purchasing

Health and environmental benefits

Reducing glove use where possible eliminates the resources and waste associated with unnecessary use

- Gloves are the highest volume disposable product purchased by healthcare. Glove use has increased dramatically and is expected to nearly double in the next five years. Manufacture and transport of gloves requires resources and energy, and the use of chemicals of concern.
- Glove disposal results in waste that, if handled improperly, can threaten health.
- A pilot project in the United Kingdom’s National Health Service system showed glove use could be **dramatically reduced with significant savings** and carbon reduction while maintaining infection prevention and improving care.

Some materials used to manufacture gloves can be toxic throughout their life cycle

- Polyvinyl chloride (PVC)** is toxic throughout its life cycle. It is derived from vinyl chloride, a known human carcinogen. Every step in the production of PVC involves the use of **chemicals of high concern**. Burning PVC gloves can result in the **formation of highly toxic chemicals**.
- The **manufacture and disposal** of gloves can threaten surrounding communities and workers.
- Recycling PVC is challenging and can **hinder the recycling of other kinds of plastic**.

Some components of gloves can pose a threat to patients and workers

- Ortho-phthalates are added to PVC and other plastics to impart flexibility. They are used in many products so exposure is widespread, and can be cumulative. Adverse effects include hormone disruption, reproductive and developmental impacts, and kidney toxicity. Exposure to some ortho-phthalates is associated with an increased risk of asthma.
- Some biocides used in gloves can be dangerous or toxic to humans and the environment, and can accelerate the development of resistance to bacteria.
- Many gloves are made with accelerants like thiurams, thiazoles and carbamates that are contact allergens and can cause skin irritation and/or sensitization.

Health Care Without Harm recommendations

Health Care Without Harm recommends health care facilities only use gloves where indicated, avoid gloves containing polyvinyl chloride (PVC) and powdered latex, and replace them with more sustainable alternatives that meet labor standards without compromising patient safety or care.

Health Care Without Harm glove target goal

Tier 1: Clinical care gloves must meet mandatory procurement criteria including:

- No PVC (vinyl)-containing gloves.
- No powdered latex gloves.
- Meet ILO labor standards.

Tier 2: All gloves must meet Tier 1 requirements.

Please see table on page 3 for definitions.

HEALTH CARE WITHOUT HARM 1 www.noharm.org

3 Hydrofluorocarbons (HFCs) are greenhouse gases (GHGs) commonly used by federal agencies in a wide variety of applications, including refrigeration, air-conditioning (AC), building insulation, fire extinguishing systems, and aerosols.

Plastic Elimination: HCWH acted as an observer organization during the first international negotiation committee (INC-1) of the new Plastics Treaty, participating throughout the months leading up to the event and attending the sessions in Uruguay in November 2022. During this process, the organization brought together a workgroup of regional offices and partners to coordinate advocacy actions, highlighting the healthcare sector's relevance in tackling plastic pollution. The workgroup developed a [position paper](#) and identified a strategic approach for the health sector to support a strong Global Plastics Treaty. Strategies included emphasizing the centrality of health in the development of the treaty and the critical role of healthcare in advising and elevating health concerns. It was crucial for the sector to adhere to a robust Plastics Treaty and resist any industry attempts to be exempt. In a related development, HCWH working through SHiPP, contributed to the [Global Joint Statement of Major Groups and Stakeholders](#) for the United Nations Environment Assembly (UNEA-5), a significant event that supported the historic resolution at the [UN Environment Assembly to End Plastic Pollution](#) and to establish an internationally legally binding agreement by 2024. The resolution targets the entire lifecycle of plastic, from production to design and disposal, which aligns with SHiPP's goal to support the decarbonization and detoxification of the healthcare sector. Furthermore, **HCWH Europe** compiled case studies and examples of plastic reduction efforts across Europe and beyond to create an [online best-practice list of plastic reduction strategies](#). The list of strategies currently includes twenty examples and will be regularly updated; the initial set built on successful work in **Vietnam** and **Tanzania**, where governments have passed policy directives to eliminate plastics from the health sector.

Global Climate-related Platform Coordination:

Following the launch of the **Alliance for Transformative Action in Climate and Health (ATACH) Initiative** by WHO, both UNDP and HCWH have been actively engaged in several mechanisms to support the implementation of this important platform. **ATACH** works to realize the goal set at COP26 to build climate-resilient and sustainable health systems, using the collective power of the WHO Member States and other stakeholders to advance the sustainability agenda forward at a rapid pace and scale; and promote the integration of climate change and health nexus into respective national, regional, and global plans. At the launch of ATACH, SHiPP was recognized and commended as a transformative project that has designed a number of critical policies and tools. The ATACH launch event was organized under the theme of "Follow-up to COP26 Health Commitments to the Initiatives on Climate Resilient and Low Carbon Sustainable Health Systems" in Geneva, Switzerland in June 2022. Dr. Mandeep Dhaliwal, the Director of UNDP's HIV and Health Group, emphasized the global impact of SHiPP at this inaugural meeting. Additionally, UNDP's Nature, Climate, and Energy team, together with the HIV and Health Group, are working with the WHO to establish a global mechanism for distributing ATACH resources to countries. HCWH is also a member of the ATACH steering committee and co-chairs the Low Carbon and Sustainable Health Systems working group while UNDP participates on a number of working groups. Participation in this forum allows SHiPP to share best practices and prototypes available for global scale-up. In addition to the ATACH launch, SHiPP participated in the Sustainable Health Care Academic Research and Enterprise (SHARE) Conference and the One Planet Network Multi-Stakeholder Advisory Committee Meeting.

Strengthening capacity for sustainable procurement in the health sector

Since 2018, capacity development of procurement officers and manufacturers has been the focus of programming. **In Europe**, HCWH organized an in-person circular healthcare training in Bristol, UK, covering sustainable procurement, plastics, and toxic chemicals in healthcare. The training

attracted 22 participants (13 of whom were women). Alongside the in-person meeting, an online event was organized with over 613 people registered, with 50% of the delegates being women. In South East Asia, the Government of **Vietnam—UNDP** team conducted a two-day training for participants

from the southern-based provinces Can Tho, Kien Giang, Soc Trang, Tra Vinh, Dong Thap, Hau Giang, Bac Lieu, Tien Giang, Vinh Long, and A Giang. The training focused on sustainable procurement, using the newly developed SPIH and the [UNDP Sustainable Health Procurement Guidance Note](#), launched in

2020. Through these events, SHiPP provided basic knowledge and raised awareness about the critical role of sustainable procurement in reducing the healthcare sector's carbon footprint. Figure 8 shows some of the resources developed by SHiPP for capacity building.

Figure 8: Summary of Knowledge Products developed through SHiPP



In **Brazil**, PHS launched the new [PHS online platform](#) to provide members with easier access to resources and tools from HCWH, partners, and the PHS. The platform's new functionalities include the ability to disseminate resources on the internal pages of the PHS Challenges and in the library. Additionally, the administrative page has been improved to help the team manage PHS members, and their participation in the PHS Challenges more efficiently. Through this platform, PHS has also introduced new Portuguese versions of resources, including:

- [Sustainable Procurement Criteria for Examination and Surgical Gloves + Toolkit](#)
- Safer Disinfection: [Surface](#), [Hand Hygiene](#), and [Instrument Disinfection](#)
- [Measuring and Reducing Plastics in Health Care](#)

Efforts to enhance capacity building took place through training of trainers for the Carbon Footprint Climate Impact Checkup Tool in the **Republic of Philippines** in partnership with the RISE Alliance.

Participants were drawn from GGHH members and non-members committed to implementing the health recommendations resulting from COP26. The training was attended by: (1) five GGHH member hospitals and one GGHH member organization from **Vietnam**, (2) representatives of the Ministries of Health of **Indonesia, Malaysia, Laos**, and the **Philippines**, (3) the Department of Climate Change, Ministry of Natural Resources and Environment of **Laos**, (4) one partner organization from **Laos** and (5) two trainers from the HCWH Southeast Asia team. After the training of trainers' session, the Philippines organized Carbon Footprint Climate Impact Checkup Tool Training took place on May 25–26, 2022. The event was attended by 12 hospitals and representatives from the Department of Health. The training promoted use of less toxic and low-carbon consuming technologies in healthcare facilities.

In **Latin America**, SHiPP conducted a carbon footprinting exercise with the Ministry of Health of

Republic of Peru, where the carbon hotspots tool and the SPIH were presented. Through this action, 20 hospitals were introduced to methodologies of how to use the carbon hotspots tool, and 10 of them reported estimated emissions related to the supply chain. Furthermore, to strengthen efforts to implement the disinfectant factsheets, the Latin American and Caribbean team organized the How to Read a Safety Data Sheet workshop on May 26, 2022. The event was led by the environmental manager of a GGHH hospital, and over 380 people registered, with 180 participating in a face-to-face meeting. Of the participants, 66.3% were women, and 33.7% were men.

Latin America and the Caribbean HCWH office used SHiPP's knowledge products to develop two three-day training sessions for new members to enhance their sustainable procurement expertise. These sessions reached more than 150 health facility leaders from the State of Guanajuato health system in Mexico: six hospital leaders from the first cohort of members receiving the online session and 70 members of the Mexican Social Security Institute (IMSS). Of the participants, 95% were women. Furthermore, Latin America and the Caribbean team updated the online form for sustainable procurement used by GGHH members to report progress and to apply to the "Menos huella, más salud" (less footprint, more health). The Latin American GGHH membership requires each institution to select two goals from the Global Green and Healthy Hospitals Agenda and commit to working in these areas.

In partnership with organizations under the Kigali Project (iCS, Mitsidi, and Sitawi Finanças do Bem), **Projeto Hospitais Saudáveis (PHS)**⁴ based in **Brazil** developed and launched **three fact sheets for heating, ventilation, and air conditioning (HVAC) products**. As a way of promoting the fact sheets, HCWH partner in **Brazil** held consultative meetings with seven PHS members. The fact sheets provide purchasing and operating criteria for unit air conditioning, central air conditioning, and refrigeration equipment. In addition, Brazil also held capacity-building meetings with twelve healthcare organizations related to the procurement challenge and HVAC equipment fact sheets. The sessions

included discussions of sustainable procurement index as a valuable tool for healthcare organizations to improve their sustainability performance and contribute to the transformation of the supply chain. The main resolutions were:

- Review and promote a few modifications to the SP Challenge—Governance Module.
- Consider a tailored approach to sustainable procurement with public and private organizations.
- Explore more synergies between sustainable procurement and energy agendas.
- Regarding the fact sheets, continue meetings with PHS members and evaluate how to support organizations to improve cooperation between technical and purchase/supply areas and to implement more sustainable criteria for purchasing HVAC equipment.

To mark World Environment Day 2022, the staff at PHS took part in various sustainability-focused events aimed at improving their knowledge and skills and to network and collaborate with others in the global south. As a result of this, PHS developed two case studies centered around sustainable procurement, as outlined below:

- The first case study focuses on detergent packaging innovation, which involves the transition from 5L gallon to 40 ml capsules, reducing the use of plastics and GHG emissions, and improvement in internal cleaning management for *Hospitales que Curan el Planeta* (Hospitals that heal the planet).
- The second case study outlines the sustainable procurement process that Santa Casa da Bahia implemented, based on its participation in the 2021 cycle of the PHS Sustainable Procurement Challenge—Governance Module, developed for Impact Stories II.

These two case studies have transformed sustainable procurement practices in Brazil's healthcare facilities. The case studies are being shared across Latin America and the Caribbean, contributing to broader learning and knowledge exchange.

As part of building the momentum for the 2022 cycle of the PHS challenge, PHS conducted a workshop on

4 PHS is a platform of institution working with SHiPP through HCWH in Brazil.

sustainable procurement focusing on four thematic sessions concerning energy, waste, climate, and sustainable procurement. The event had 397 participants, with 235 attending online and 162 in person. Out of the 162 participants, 97 requested a certificate of participation, allowing additional gender-related queries. Of these, 52 participants (54%) were women. The event's agenda included discussions on sustainable procurement and its significance in the health sector, the implementation of SHiPP's tools, such as the SP Guide for Healthcare, SPIH, Carbon Hotspots, Criteria for the Sustainable Acquisition of Gloves, Fact Sheets on Safe Disinfection, which are available to PHS members to promote sustainable and healthy practices in the healthcare sector.

In the Republic of **South Africa**, the **Sustainable Procurement Guide** was introduced at the Sustainable Procurement Forum as part of a presentation to the Free State Department of Health senior management. The guide was equally shared with the new GGHH members before launching GGHH as a programme at the new hospitals. The guide is designed to build the capacity of procurement officers in sustainable procurement. 35 delegates participated, of which 20 were women.

Promoting SHiPP's mandate and achievements among the GGHH members and network facilities in **Southeast Asia (SEA)** has been and will continue to be a top priority. In May 2022, HCWH SEA office hosted a coffee table discussion for GGHH members in **Taiwan**, featuring the SPIH, Carbon hotspot tool, and several guidance materials produced by the project, which six GGHH member facilities attended. In the Republic of **India**, the GGHH team attended the **SMART HOSPITALS Conference**, organized by Medical Fair India and Quality Accreditation of India, to raise awareness and provide training for primary healthcare hospital owners and medical professionals. Additionally, the conference discussed the latest trends in designing and developing smart, sustainable, and eco-friendly hospitals. SHiPP India team also participated in a panel discussion on "the multi-stakeholder role in building future smart hospitals" and a "climate-smart healthcare" session introducing attendees to SHiPP tools and resources, including the **Sustainable Procurement Guide**. The event drew 75 participants from across India.

As knowledge management is an essential feature of SHiPP, the team developed a **website for HELP** and launched it on September 7, 2022. The website includes different program areas, including Climate Change and Human Health, Air Pollution and Human Health, Sustainable Procurement in Health Care, Health Care Waste Management, and Sustainable Food in Healthcare. All resources developed in different program areas, including the initiative's regular newsletter, are available on the website and are being utilized to facilitate action on the ground.

Webinars: Two public webinars were conducted on July 13 and 15, in Spanish and English, to support the launch of the Sustainable Procurement Checklist: *A Self-assessment tool for the health sector*. There were 129 participants and 400 registrants for the events. The first webinar was attended primarily by hospitals in Latin America (68%), while the second webinar was mainly attended by representatives from the Philippines (44%) and Australia (38%). In addition, the team issued 33 social media posts (on Twitter, Facebook, and LinkedIn) with 11,248 impressions and 658 engagements. The tool was co-created by a group of SHiPP partners, led by the global team. The Checklist follows the ten elements of a best-in-class sustainable procurement program with the associated GGHH member tool hosted on the **GGHH CONNECT Hippocrates** data platform, and available in Spanish and English.

As part of the Climate Smart Webinar Series, a webinar on the Climate Impact Checkup tool was organized for HELP members in the Republic of **India** on July 6, 2022. The webinar received active participation from representatives of about 40 member hospitals, with 80% of participants being female. The participants included procurement officers, sustainability focal points, members of the procurement committee, and senior management. The tool is being used by 75 countries, representing over 62,244 healthcare facilities that are part of GGHH. The Checklist enables healthcare facilities to assess their current processes, identify areas for improvement, and guide the implementation and improvement of their sustainable procurement program.

The Center of Excellence for Climate Smart Healthcare, PHFI-CCDC, organized a webinar on July 22, 2022, for public health professionals

in the Republic of **India** on facility-level health-energy assessments in partnership with the SELCO Foundation. The training aimed to support health facilities that are beginning to invest in smart facilities, including those powered by clean energy. The webinar was hosted by NCDC under the National Programme on Climate Change & Human Health (NPCCHH) and attracted 163 participants from various states. In the People's Republic of **China**, the Green Hospitals Committee organized a webinar for Chinese hospitals on the approach and tools for accounting and reducing carbon emissions. Rock Environment and Energy Institute (REEI), the implementing partner for SHiPP, provided financial and technical support for this event. The webinar lasted for four hours and had over 800 clicks. According to the data provided by the GHC, the audience consisted of people from over 60 cities across the country. The guest speakers included hospital management, a carbon accounting consultancy firm, and research institutes. The keynote address was given by Ang Zhao of REEI, which focused on carbon accounting, the decarbonization roadmap to sustainable procurement, and the Climate Impact Checkup tool.

Healthcare waste management: Healthcare waste management has become an increasingly important

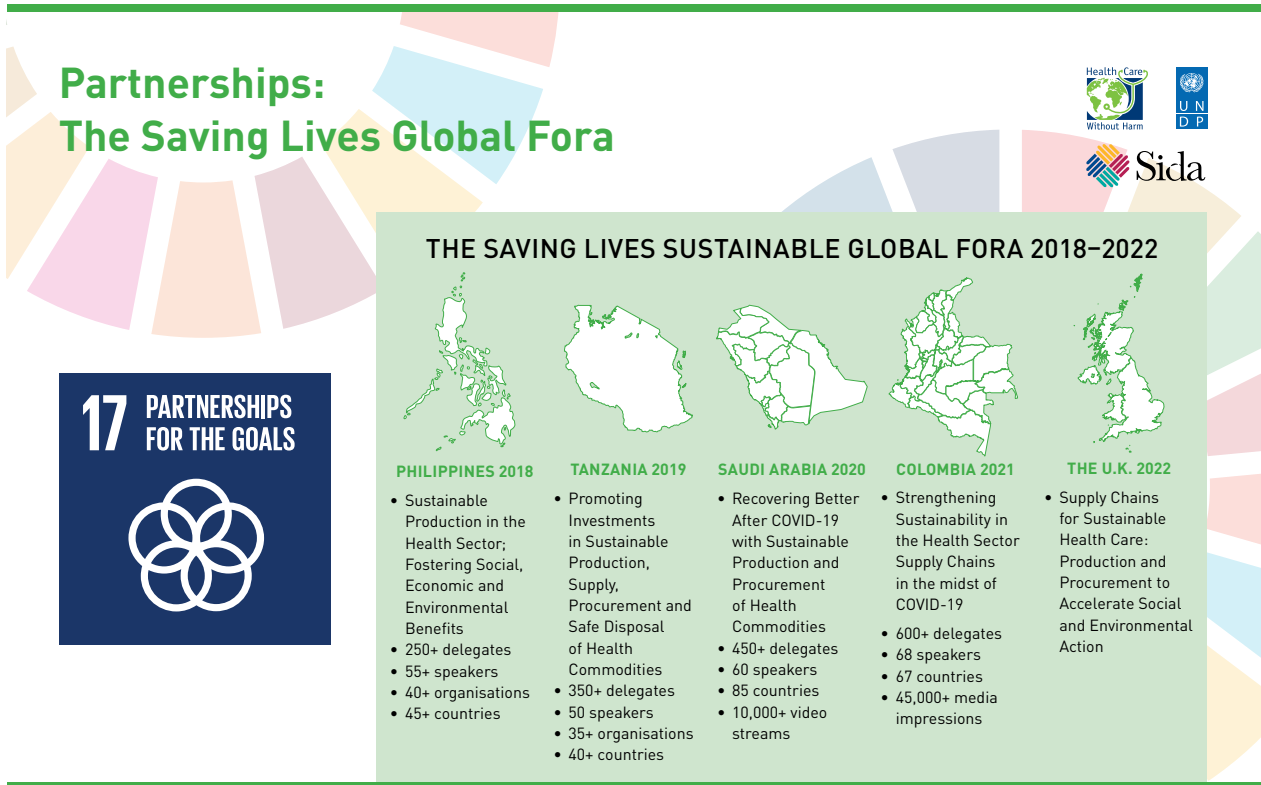
topic in sustainability due to the significant increase in waste generated during the COVID-19 pandemic. The subject received considerable attention among delegates during the Saving Lives Sustainably Global Forum. In the reporting period, the **Health Care Waste Tracker** was developed with the launch of Nepal's Health Environment and Climate Action Foundation (HECAF360). Since its launch, the tracker has received 230 page views and 130 unique access views for downloading. The initiative is growing in many SHiPP countries, driven by the lessons learned during the initial COVID-19 response when an unprecedented amount of waste was generated. For example, a new program is being developed in **Mozambique** to manage vaccine-related medical waste. Based on experience gained over time, SHiPP worked with Engineers without Borders in 2021 to document key challenges and opportunities in **Sustainable Health Care Waste Management** in eight countries. A key recommendation from this initiative was to ensure the development of policies and strategies for waste management, the need for adequate funding and capacity building of health institutions to deal with and manage waste accumulation, and the need for innovation and technology for waste management in the healthcare sector.

Strengthening capacity for sustainable production, supply, and disposal of healthcare products

Engagement of manufacturers and suppliers of health commodities has remained a popular event on the SHiPP calendar. The **5th Saving Lives Sustainably Global Forum 2022: Supply Chains for Sustainable Health Care: Production and Procurement to Accelerate Social and Environmental Action** was held as a post-COP27 event from November 23 to 24th, 2022, co-hosted by the Sustainable Healthcare Coalition and HCWH. The Forum advocated for concerted efforts from all partners to identify and adopt sustainable environmental and social practices throughout the healthcare supply chain. The 2022 event brought together suppliers and manufacturers, policymakers, regulators, technical experts, academia, and civil society organizations from across the global healthcare industry to support this cause. The Forum covered various

topics on environmental and social sustainability in the production, supply, and procurement of health commodities, delivery of healthcare services, and management of associated waste, all in the context of the COVID-19 pandemic. The event featured an official opening address and two keynote speakers. In his opening address, Dr. Nick Watts, highlighted the important role of the health sector to lead the decarbonization agenda. Alexandra Hammond, the Head of Sustainable Procurement and Supply, NHS England, and Juliette White, the Vice President at AstraZeneca UK, jointly delivered the keynote speech on **Building sustainable supply chains towards net zero emissions**. Their presentations highlighted the available tools for decarbonization of the health sector and the critical role of procurement in this sustainability agenda.

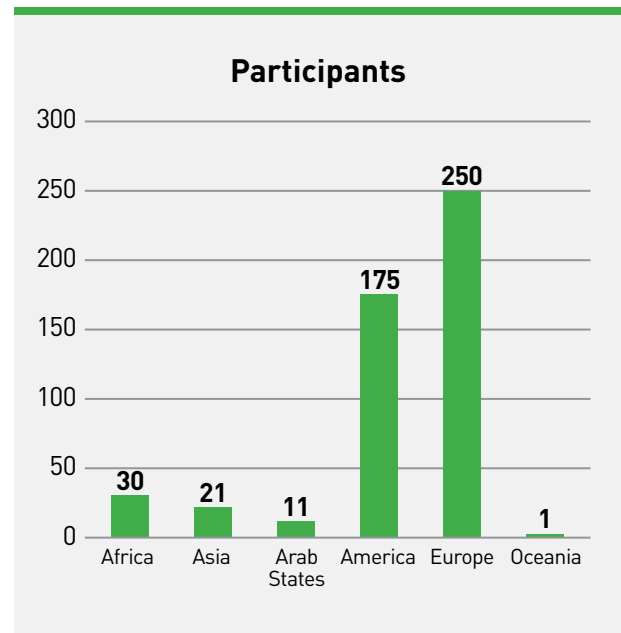
Figure 9. Saving Lives Sustainably Fora 2018–2022



The 2022 Forum featured various activities, including keynote speeches, technical expert presentations, workshops, and roundtable discussions. Manufacturers, suppliers, procurers, and frontline staff played a significant role by sharing concrete examples and case studies of the benefits of introducing socially and environmentally responsible practices in the global health supply chains. These practices and suggestions were shared to provide concrete case studies for the health sector to replicate and scale up. The table below shows the number of participants per region, with the majority coming from Europe, which may be attributed to the event being co-organized in the United Kingdom.

SPHS suppliers engagement: The [Joint UNICEF-UNFPA-WHO Meeting for Manufacturers and Suppliers](#) took place in March 2022 with the broad objectives of updating the industry on strategic developments, describing the UN sustainability strategies Phase II, commitments to the SDGs, and also presenting some specific activities of agencies. The meeting also aimed to provide the opportunity for learning from industry actors about the targets they are working towards and get information on sustainability capacity support available from UN

Figure 10: 2022 Global Forum Participants by Regions



agencies. Participants also discussed ISO⁵ and other standards, explored the value of questionnaires and tools being applied to obtain information, and generated ideas for being catalytic toward supporting the sustainability agenda. The meeting brought together a wide range of stakeholders from the UN family, manufacturers, suppliers, quality, safety, efficacy experts, procurement agencies, procurers,

and international donors whose combined efforts bring needed health products for vulnerable and marginalized populations. The sustainability session allowed different SPHS member agencies to highlight their sustainability work, including UNDP. SHiPP, through UNDP, used the occasion to emphasize the role and application of sustainable procurement in the health sector supply chain.

5 ISO 20400:2017 provides guidance to organizations, independent of their activity or size, on integrating sustainability within procurement, as described in ISO 26000. It is intended for stakeholders involved in, or impacted by, procurement decisions and processes.

Conclusion and looking into the future

SHiPP's final year coincided with broader commitments to climate resilient, low carbon health systems. At COP 27 this progress was highlighted by a partnership between U.S. Department of Health and Human Services and National Health Service (NHS) of England on developing aligned procurement requirements focused on addressing emissions in the health supply chain and by further acceleration of the work of ATACH. SHiPP stakeholders have taken active steps to participate in various ATACH workstreams to ensure that the gains the project has made are not lost and that the commitments made by the US and the UK can be achieved more broadly. Based on the work done by SHiPP, the Government of Tanzania working with the UNDP Country office with technical support of the Istanbul project team has developed the Sustainable Public Procurement Portfolio in which the government has already invested more than US \$5 million and committed more resources towards the actualization of sustainable procurement of goods and services for the country's dash to meet a number of Sustainable Development Goals. Additionally, SHiPP's involvement in the Southern African Development Community's health pooled procurement design has led to realisation of safer environment and health of the people in the 16 Members states which are part of this mechanism.

SHiPP's culminating year was also marked by transformative action on the ground. From rollout of SPIH to multiple regional and global platforms where policies were developed and implemented. Additionally, SHiPP zeroed in on capacity building of stakeholders across government, procurement and health care sectors—this has led to an increase in the number of critical technical staff with knowledge on health and climate and the motivation to transform the status quo. Though 2022 marked the conclusion of the program's implementation, major achievements are evident, and many prototypes are now ready for scaling up.

SHiPP's scale up phase could focus on the following strategic areas:

- Driving policy and global consensus: Policy coherence and development across the health sector to decarbonize, detoxify, make climate resilient, equitable, pandemic prepared supply chains aligned with the SDGs;
- Strengthening Sustainable Procurement Capacity: Build capacity for sustainable health care at every stage of the supply chain;
- Transforming supply chains for decarbonization and detoxification: Mobilize national and subnational ministries of health, other line ministries, international organizations, private sector & health care systems to transform the health sector
- Financing SDGs—work with country level partners to regulate and incentivize sustainable procurement for health.

To go to scale, SHiPP needs on-going commitment and resources that can support policy transformation at national, regional and global level, implementation of tools developed through SHiPP's first iteration, and engagement of manufacturers and government partners in a dialogue that will lead to creating incentives for sustainable supply chains. A key feature of the project in the last five years was its ability to create a platform for multi-ministerial engagement in climate and health and engage government and partners more broadly. For example, the Technical working group established in Zambia was comprised of the Health Ministry as a lead but working closely with Ministries of Environment, Commerce, as well as local governments. Additional stakeholders involved on the grounds included academia, CSOs, and National Environmental Agencies among others. This whole government approach is critical for the broad based climate health reforms. This progress will not be possible without the whole government approach and the concerted efforts on the part of governments, private sector, development partners and the local communities impacted by climate change, which SHiPP is poised to deliver in its next phase.



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