PLENARY 8 (PL8): Household air pollution research and policy: a worked example

Professor Nalini Sathiakumar

Nalini Sathiakumar is an environmental and occupational epidemiologist and a pediatrician. Funded by industry and the US National Institutes of Health (NIH), she has conducted pioneer research in occupational health, occupational cancers, and health effects of environmental exposures including heavy metals, indoor and outdoor air pollution and pesticides with a special focus on infant and early childhood neurodevelopment. In addition, she has led NIH-funded training grants for over 15 years such as the International Research and Training in Environmental and Occupational Health (ITREOH) program in South Asia. Under this initiative, she has trained several emerging scientists in India, Sri Lanka and Pakistan, and mentored their research. As part of this program, she spearheaded the development and implementation of a competency-based Master of Public Health (MPH) degree program in Manipal University in India and the University of Kelaniya in Sri Lanka; the latter is the first program in the country. Dr. Sathiakumar has served as an expert for the Institute of Medicine, Centers for Disease Control and Prevention, NIH, World Health Organization, etc. She is the recipient of several awards and honors including the President's award for excellence in teaching.

SUMMARY

Objectives:

1) To describe the importance of scientific evidence in policy development in the area of household air pollution

2) To present a framework on designing evidence based interventions and policy on exposure reduction related to household air pollution

The future of policy development in the area of household air pollution (HAP) depends on credible scientific data that documents the health risks associated with HAP. In most instances, it is necessary to base decisions on the evidence generated elsewhere and to make inferences about the extent to which this evidence is generalizable to another location or country. The ways in which elements of the structural, physical, social and/or cultural environmental factors can influence HAP and how these factors may influence the effectiveness of interventions to reduce HAP exposure are discussed. A framework to be used by public health professionals who are designing, executing, reporting and synthesizing research on HAP, designing and implementing interventions for HAP exposure reduction or formulating policy is suggested.

Session chair: Dr Anuradhani Kasturiratne