

Climate and Health at COP28: Treating the Symptoms or Causes? Emily Pender

Air pollution causes over <u>8 million deaths per year</u>. By 2050 extreme heat, diarrhoea, dengue, malaria, and malnutrition (stunting) will together cause <u>21 million more deaths</u> than there would be without climate change. At <u>COP28</u> in Dubai, state parties are rightly recognising the climate crisis as a health emergency – for the first time – with a <u>Declaration on Climate and Health</u>. COP28 has also seen the launch of a new set of <u>Guiding Principles for Financing Climate and Health Solutions</u>, a dedicated Health Day and over <u>\$2.7 billion pledged to health initiatives</u> related to climate change. While these achievements are laudable, the lack of acknowledgement of the role of fossil fuels, specifically, has led to widespread criticism. It has also led to a <u>Call to Action on Climate and Health</u> from the World Health Organisation (WHO) which advocates for the phase-out of fossil fuels.

The Declaration on Climate and Health

The <u>Health Declaration</u> – endorsed by 141 countries as of 11 December – aims to prioritise health in climate-related initiatives (such as the Paris Agreement) and establish climate-resilient health systems. The declaration recognises that climate action will lead to health gains, including the reduction of air pollution and the lowering of healthcare costs. It stresses the need for urgent action by over 60 Ministers of Health who were present, and various health organisations. It was made public ahead of the inaugural COP28 Health Day and represents global acknowledgment of the escalating health impacts of climate change on communities and nations.

Signatories commit to addressing health impacts of climate change. They pledge to develop policies for health gains, foster partnerships, and prioritise adaptation actions. A <u>One Health approach</u> is emphasised. Parties also commit to improving health systems, combatting inequalities, and promoting policies for poverty reduction, improved health, and clean energy access. Further commitments include curbing emissions, strengthening

research, and leveraging investments for efficient finance flows. A breakdown of these commitments is presented below.

COP28 Health Declaration Commitments

- Develop and implement policies that maximise health gains
- Foster partnerships with various stakeholders, including Indigenous Peoples, local communities, women and girls, children and youth, healthcare workers, persons with disabilities, and vulnerable populations
- Implement a One Health approach
- Strengthen research efforts on the climate-health nexus
- Intensify efforts for early detection of zoonotic spill-overs as a means of pandemic prevention,
 preparedness, and response
- Prioritise and implement adaptation actions across sectors such as food and agriculture, water and sanitation, housing, urban planning, healthcare, transport, and energy
- Address impacts of climate change on mental health, psychosocial well-being, loss of traditional medicinal knowledge, loss of livelihoods and culture, and climate-induced displacement and migration
- Combat inequalities within and among countries
- Promote poverty and hunger reduction, improve health and livelihoods, strengthen social
 protection systems, ensure food security and improved nutrition, and provide access to clean
 energy, safe drinking water, and sanitation for all
- Reduce emissions and waste in the health sector
- Assess greenhouse gas emissions of health systems and develop action plans, decarbonization targets, and procurement standards
- Encourage investments in climate and health from various sources

Improve monitoring, transparency, and evaluation efforts of climate finance, including for

climate-health initiatives.

Reactions to the Declaration: Call to Action on Climate and Health by WHO

The declaration has been widely criticised for not explicitly mentioning fossil fuels. Fossil fuels have

been found to be the primary contributors to climate change and air pollution and are thus the primary

cause of climate-change and pollution related health concerns, with particle emissions from fossil fuel

combustion (PM2.5) accounting for 5 million deaths annually.

Instead of acknowledging this, the declaration emphasises the reduction in emissions from the health

sector itself. Considering that fossil fuels account for over 75% of global emissions while the health

sector accounts for 5% this is regarded as a glaring omission. In response, the WHO's Call to Action on

Climate and Health calls for a clear focus on fossil fuel phase-out. It has been supported by roughly 43

million signatories since its launch.

Health Day Discussions: Climate and Health

The first dedicated Health Day at COP28 saw over 65 ministers of health participate in discussions. The

opening ceremony was attended by key figures, including Dr Tedros from the WHO, US Presidential

Climate Envoy John Kerry, Bill Gates, and the IEA's Fatih Birol.

The World Bank also launched its Climate and Health Program, which will develop support measures

for public health systems in developing states.

During the Reaching the Last Mile Forum, pledges totalling \$777 million were made. The UAE

announced a commitment of \$100 million, and additional contributions came from the Bill & Melinda

Gates Foundation, Children's Investment Fund Foundation, Belgium, the US, and other supporters.

Neglected Tropical Diseases

During the COP28 Health day, both the UAE and the Bill & Melinda Gates Foundation pledged \$100

million each to the eradication of tropical diseases. Developing states in tropical and subtropical regions

are particularly vulnerable to the effects of climate change. They are disproportionately affected by

increases in temperature and are less likely to have the capacity to prepare for the long-term effects.

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Tropical diseases are of particular concern in developing countries as climate change progresses. According to experts at <u>Stanford University's medical school</u>, the increase in global temperatures will mean that mosquitoes can move further out of their current habitats, expanding the reach of diseases such as malaria, Zika virus, dengue fever, chikungunya and West Nile virus. Experts assert that the extent of this crisis will depend entirely on the extent of climate change.

Dengue cases <u>had risen globally by 10 times</u> between 2000 and 2019. Brazil has seen a 73% jump in cases from their five-year average, and there is an ongoing outbreak in Bangladesh. From 2021 to 2022 global malaria cases rose by 5 million.

These diseases, particularly malaria, are most prevalent on the African continent. In 2022, the <u>WHO</u> <u>reported</u> that the continent accounted for 94% of all reported malaria cases and 95% of all malaria deaths. Other tropical diseases that may spread in a warmer world include <u>river blindness and sleeping</u> sickness which are spread by parasitic worms and flies, and both also affect Africans disproportionately.

Malnutrition

Vector-transmitted diseases (such as those carried by mosquitoes and worms) are not the only concern. Malnutrition as a result of climate-related food insecurity also disproportionately affect developing countries.

At COP28 Health Day, the Food and Agriculture Organization of the United Nations (FAO) emphasized the relationship between climate change, food insecurity and health. The Director-General of the FAO, Qu Dongyu, noted that 42% of the global population (or 3.1 billion people) could not afford a healthy diet in 2021, and that 40% of the world's population is vulnerable to the climate crisis, meaning many are at risk of malnutrition.

Natural Disasters and Weather Related Events

Also acknowledged at the Health Day was the fact that natural disasters (floods, droughts, storms, wildfires and heat waves) also increase risks to public health. The frequency of natural disasters has increased by 500% since the 1950s, driven by climate change. Natural disasters are increasing in intensity over time and each type of natural disaster is associated with a different set of health risks that increase in frequency as disasters do.

- <u>Wildfires</u> are increasing in frequency globally and have been found to contribute to premature mortality, increased hospitalisations for respiratory distress, declines in lung function amongst children, and contribute to exacerbation of asthma. They have also been linked to chronic obstructive pulmonary disease (COPD), acute bronchitis, and pneumonia
- <u>Heatwaves</u> are associated with increases in hospitalisations, as well as dehydration, acute renal failure, heat illness, and other related maladies
- A <u>NASA study conducted in late 2018</u> provides evidence that global warming is contributing to the rise in the frequency of severe storms, particularly over Earth's tropical oceans, located between 30 degrees north and south of the equator. Severe storms can lead to deaths by drowning or injuries sustained as infrastructure is destroyed. Over 11,000 people <u>were killed in</u>

 <u>Libya this past September due to floods that have been linked to changing weather patterns</u>
- Aside from infrastructure destruction and drownings, flooding can lead to increases in vectortransmitted diseases. Malaria cases quadrupled in Pakistan after severe flooding in 2022.

Emissions and Pollution

The <u>Clean Air Fund</u> spoke at the Health Day, asserting that air pollution claims more than 8 million lives annually – surpassing the toll of COVID-19 over the past four years. Of these casualties, over half a million are infants and children, particularly vulnerable to the harmful effects of toxic soot and fumes on their developing lungs, hearts, and brains.

Various types of emission-related air pollution can cause diseases. Particulate Matter (PM), small particles, can enter the respiratory system, causing respiratory and cardiovascular diseases, reproductive issues, central nervous system dysfunctions, and cancer. Ozone, while protective in the stratosphere, harms the respiratory and cardiovascular system at ground level. Nitrogen oxide, sulphur dioxide, Volatile Organic Compounds (VOCs), dioxins, polycyclic aromatic hydrocarbons (PAHs), and carbon monoxide are harmful air pollutants. Diseases from these pollutants include respiratory disease, cardiovascular disease, central nervous system dysfunctions, and skin diseases. Heavy metals like lead can also result in poisoning or chronic intoxication.

Guiding Principles for Financing Climate and Health Solutions

The <u>Guiding Principles for Financing Climate and Health Solutions framework</u> is another major health development at COP28. Endorsed by 41 agencies (<u>as of 1 December</u>), including the Green Climate Fund, the Global Fund, the WHO and the Rockefeller Foundation, the framework aims to promote the financing of climate and health solutions.

The Guiding Principles

- Expedite transformative climate and health solutions for immediate and future life-saving impacts
- Back the health and climate priorities of highly affected nations and communities
- Advocate for an inclusive and fair financing approach to climate and health solutions
- Rally diverse partners to contribute to a comprehensive financing portfolio
- Integrate climate and health objectives throughout financing strategies
- Improve fair access to financial resources
- Encourage holistic approaches for comprehensive impact
- Foster innovation and support scientific research and development
- Align financing for climate and health solutions with broader international financial system transformation efforts.

The announcement of the framework accompanied pledges amounting to \$1 billion for health related investments as part of climate action.

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