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# Climate change and health

## Report by the Director-General

1. This report gives an overview of the health risks from climate change and the necessary response by the global health community to this threat. It describes the specific contributions currently being made by WHO in the field, and which it is proposed to further enhance in the transition to the Fourteenth General Programme of Work. It situates the health response to climate change within the overall response to environmental risks to health, as described in the WHO global strategy on health, environment and climate change,<sup>1</sup> which was noted by the Health Assembly in decision WHA72(9) (2019), and provides an update on the previous Health Assembly resolution on climate change and health.<sup>2</sup>

### **BACKGROUND: THE HEALTH THREAT FROM CLIMATE CHANGE**

2. The world is warming at a faster rate than at any time in human history, mainly as a result of the burning of fossil fuels. Unless urgent action is taken to cut carbon emissions, global warming will soon exceed the 1.5°C limit set in the Paris Climate Agreement, and current trends are likely to result in over 3°C of warming by the end of the century.<sup>3</sup>

3. The Sixth Assessment Report of the Intergovernmental Panel on Climate Change concludes that climate change is already having observable adverse impacts on human health and well-being through heat, malnutrition, infectious diseases, mental health and displacement, both at the global level and in the majority of the specific regions assessed. More fundamentally, climate shocks and growing stresses, such as drought and rising sea levels, are undermining the environmental and social determinants of physical and mental health, from clean air and water to sustainable food systems and livelihoods – and threatening the existence of some nations.<sup>4</sup>

4. The health impacts of climate change are highly inequitable. The Sixth Assessment Report estimates that up to 3.6 billion people live in contexts that are highly vulnerable to the impacts of climate change. Low- and lower-middle-income countries and small island developing States face the greatest

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<sup>1</sup> WHO global strategy on health, environment and climate change: the transformation needed to improve lives and wellbeing sustainably through healthy environments. Geneva: World Health Organization; 2020 (<https://iris.who.int/handle/10665/331959>, accessed 24 November 2023).

<sup>2</sup> Resolution WHA61.19 (2008).

<sup>3</sup> Climate Change 2021: The Physical Science Basis, the Working Group I contribution to the Sixth Assessment Report of the Intergovernmental Panel on Climate Change (eds. Masson-Delmotte, V. et al.). Cambridge University Press; 2021.

<sup>4</sup> Climate Change 2022: Impacts, Adaptation, and Vulnerability. Contribution of Working Group II to the Sixth Assessment Report of the Intergovernmental Panel on Climate Change (eds H.-O. Pörtner, D.C. Roberts, et al.). Cambridge University Press; 2022.

health consequences of climate change, despite contributing the least to historical global emissions. It is estimated that over the past decade, mortality from floods, droughts and storms was 15 times higher in highly vulnerable regions compared to regions with very low vulnerability. Within countries there can also be large disparities in levels of vulnerability to the impacts of climate change. Populations living in poverty, the elderly, women, children, indigenous peoples, outdoor workers, the socially isolated, and individuals with pre-existing medical conditions are typically at highest risk.

5. There is a large overlap between the development pathways and economic choices that are driving the climate crisis, and the direct causes of large health impacts. These include polluting energy systems, which are the main cause of almost seven million premature deaths from air pollution each year; environmentally destructive and unhealthy food systems that are contributing to the global increase in noncommunicable diseases; and urban planning and transport systems that result in car-dependency – contributing to the burdens of physical inactivity and road traffic injuries. The health care sector itself is now also a significant contributor to climate change, responsible for approximately 5% of global carbon emissions.

6. The world is not yet responding adequately to the scale of this challenge. Although the “right to health” is at the core of the United Nations Framework Convention on Climate Change and the Paris Agreement, it is largely absent from its operational mechanisms. Less than 0.5% of international climate finance is currently allocated to health projects, and only 10% of nationally determined contributions to the Paris Agreement quantify the large health gains expected from climate change mitigation. Similarly, while health is routinely identified as a top priority for climate action, 70% of countries lack adequate finance to implement a national adaptation plan for health, and few national or international health actors allocate significant resources to climate action.

## **OBJECTIVES FOR THE HEALTH RESPONSE TO THE CLIMATE CRISIS**

7. This fundamental threat to human health requires a strong response from the global health community to protect health from increasing climate hazards, ensure access to high quality, climate resilient, environmentally sustainable health services, and improve health, while limiting global warming to the agreed 1.5°C limit. This will require action on both adaptation (protecting health from the impacts of climate change) and mitigation (limiting emissions of greenhouse gases and other climate pollutants into the atmosphere).

8. Achieve climate-resilient health systems to address health risks and impacts of climate change. There is a need for national health and environment agencies to systematically assess climate-related risks to health systems and health outcomes, and to develop national health adaptation plans to ensure that the health of the population is resilient to climate shocks and stresses. Implementation of these plans should embed climate resilience as a central component of health systems<sup>1</sup> within the provision of universal health coverage, primary health care and health workforce capacity, while also implementing specific public health interventions, such as climate informed surveillance and response systems for key risks, including extreme heat and infectious diseases. It will also require health actors to work across sectors to jointly safeguard key environmental determinants, such as promoting climate resilient water and sanitation, and sustainable food systems, while also closing the financing gap for health adaptation and resilience.

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<sup>1</sup> Operational framework for building climate resilient and low carbon health systems. Geneva, World Health Organization; 2023 (<https://iris.who.int/handle/10665/373837>, accessed 24 November 2023).

9. Increase the provision of low-carbon health systems and the creation of healthy, low-carbon societies. Given the significant and growing impact of health care on the global climate, it is necessary for countries to develop and implement plans to stabilize and then reduce carbon emissions from the health sector. It is important that such actions reinforce rather than undermine the achievement of universal health coverage, the scaling up of primary health care, and climate resilience. Particularly in low-income settings, this should focus on identifying opportunities to bypass polluting, ineffective and expensive technologies and instead implement cheaper, more reliable and cleaner solutions, such as the rapid roll-out of renewable energy access for health care facilities. There is also an important role for the health community in providing evidence and building partnerships towards the achievement of health “co-benefits” (e.g. lives saved through improved air quality) through health promoting climate change mitigation in other sectors, notably, energy, food, transport and urban systems.

### **PROPOSED ACTIONS BY THE SECRETARIAT IN SUPPORT OF MEMBER STATES**

10. The Secretariat has previously referred to the need to elevate protecting and promoting health as a top priority, with significantly increased investment in countries and at WHO. It also highlighted the need to act on climate change, in particular, for radical action to safeguard the health of the planet on which all life depends by addressing the existential threat of climate change.

11. It is proposed that the Secretariat should further develop and scale up the application of existing climate change and health work across its core functions; support Member States to achieve the health adaptation and mitigation goals described in the preceding section; and provide the essential leadership, evidence, monitoring and technical support functions to guide the global health response and underpin the work of other global health actors on this issue.

12. Leadership and raising awareness. WHO is proposing to continue to lead the global health community, in partnership with other international health actors, to raise ambition in addressing the existential threat of climate change. This includes supporting national health agencies to present health as a central consideration in national and international climate policy, including through the negotiations and mechanisms of the United Nations Framework Convention on Climate Change (UNFCCC). The Organization will advance evidence-based messages, use communication science to present health as a positive and compelling argument for climate action, and accelerate the growing mobilization of engaged health professional and civil society organizations behind that agenda. This will also include delivering on WHO’s commitment to become carbon neutral by 2030.

13. Evidence, monitoring and technical products. The Secretariat proposes to build on its ability to convene global experts, and its position as a trusted source of health evidence with a direct connection to national governments. The Organization will take the lead compiling summaries of global and regional evidence and defining priority research agendas, supporting countries in undertaking their own national assessments, and monitoring progress at national and global level – with an emphasis on identifying and accelerating deployment of the most effective policies and interventions. WHO will increasingly focus on improving access to knowledge and data that is relevant to policy in order to support delivery at country level.

14. Capacity building and country support. The ultimate objective of all WHO’s work will remain having a positive impact on countries, communities and individuals. Country offices, backed by regional offices and headquarters, place the Organization in a unique position to provide policy and technical support to national health ministries for working across their own operations, in partnership with other health actors, and with other health determining sectors. It is proposed to enhance engagement across all Member States, using WHO’s convening power to bring national governments together with a range

of development partners and stakeholders capable of supporting them in addressing the health implications of climate change. This will include ongoing strengthening of guidance and tools for application at country level, combined together in a compendium of effective policy options and interventions ready for implementation, as well as capacity development with particular emphasis on delivering face-to-face training at national and regional level. The Organization will also build on over a decade of experience in executing major projects on climate change and health, to provide assessment, planning and implementation support directly to those countries and populations most impacted by the climate crisis. The Secretariat will facilitate access to finance from both climate and health funds, and work with partners to develop a co-financing facility specifically for climate and health. WHO will leverage and multiply its own efforts by working in effective partnerships, including leading the secretariat of the Alliance for Transformative Action on Climate and Health, bringing together the capacities of development actors, technical experts and health practitioners to support countries in delivering on their own commitments to climate and health action.

### **ACTION BY THE EXECUTIVE BOARD**

15. The Board is invited to note the report, and to provide guidance in respect of the question set out below.

- Do the proposed actions by the Secretariat, set out in paragraphs 10–14 above, meet the expectations of Member States in supporting them to respond to the health threats presented by climate change?

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