COVID-19 recovery and the health argument for climate action. Commentary on the WHO COP26 special report on climate change and health

Significance:

- Critical climate change and health action needs to be considered globally post the COVID-19 pandemic.
- The WHO Climate Change and Health Special Report outlines 10 priority recommendations to be considered by nations and adopted at COP26.
- The special report provides South Africa with the opportunity to consider how the priority recommendations can be implemented locally.

The World Health Organization (WHO)’s release of the COP26 Climate Change and Health Special Report: The Health Argument for Climate Action outlines critical action that needs to be considered by politicians, scientists, corporations and civil society, post the COVID-19 pandemic. The report was prepared in advance of the Conference of Parties (COP) meeting that was held in Glasgow in November 2021, and strives to significantly advance the call for global and local climate-smart healthcare.

Climate change is the largest and most singular danger confronting humankind, with vulnerable and disadvantaged communities progressively and most disproportionately at risk as natural ecologies become less stable. Increasingly recurrent extreme and life-threatening climatic events, such as droughts and heatwaves, hurricanes and flooding, kill thousands and dislocate millions of people, whilst at the same time threaten fragile healthcare systems and facilities when they are most needed. Climatic changes are further jeopardising food security and increasing food-, water- and vector-borne diseases, such as dengue and malaria, whilst adversely impacting on mental health. Reaching the Paris Agreement targets will save millions of human lives annually due to improved air quality, diet, and physical activity, for example. Nonetheless, most current climate decision-making practices do not account for these health co-benefits and their economic impacts. An unmitigated increase in the health impacts of climate change, and the existing health aftermaths of delayed and erratic responses of nations worldwide, evidence a distinct need for fast-tracked interventions which position the health of individuals and the planet as priorities. As poorer populations are most defenceless against climate-induced health impacts, demand for healthcare access will also intensify in significance in South Africa and elsewhere.

To avoid the looming health crises, global warming needs to be restricted to under 1.5 °C, while human health and equitable healthcare access need to be centrally placed in all climate change mitigation and adaptation activities. Moreover, the COVID-19 health crisis has clearly indicated the magnitude and significance of listening to the health and medical community and incorporating their views in strategic planning. It has also highlighted the inequitable impacts of such a worldwide threat. All nations need to set ambitious national climate commitments if they are to sustain a healthy and green recovery from the pandemic. Furthermore, the origins of many worldwide health crises are interlinked with the annihilation of entire ecosystems and biodiversity loss, the climate crisis, and, in particular, findings from a comparative risk assessment on the global burden of disease, indicate that air pollution causes 13 deaths per minute globally. Lowering air pollution to WHO-recommended levels, as an example, would cut the total sum of worldwide mortalities from air pollution, which is estimated to be seven million people per year, by 80%, while simultaneously significantly limiting the greenhouse gas emissions which fuel climate change. Minimising food losses, together with modifications in production approaches, has also been shown to be a pivotal means of increasing food security, while simultaneously decreasing stress on the earth. A transition to more wholesome plant-based diets, as aligned with WHO recommendations, can also significantly cut global emissions and subsequently safeguard more resilient food systems, as well as prevent up to 5.1 million diet-related deaths a year by 2050. Addressing air pollution and shifting today towards the direction of sustainable food systems will thus not only assist in addressing the climate crisis, but will simultaneously also improve everybody’s health.

The 2021 United Nations Climate Change Conference (COP26) in Glasgow is critical in terms of current and future global climate action, and decisions made there will have sweeping significance for the long-term health of communities. As the Lancet Countdown 2020 Report concludes: no continent, nation, or society is resistant to the health consequences of the climate crisis. WHO has called on governments to pledge to more ambitious climate action and to a healthy recovery from COVID-19. To accomplish this, the WHO COP26 climate change and health special report collects health arguments on what the world needs to do, and by which means, to tackle the climate crisis. The special report provides distinct resolutions from both the health community and policymakers. It strives to ensure representivity from across sectors, districts, and population groups, and particularly that of the expressions of the medical community. It is necessary for nations to set ambitious national climate commitments and goals if they are to advance a health and green recovery from the COVID-19 pandemic. The WHO report was presented simultaneously as an open letter, signed by over two thirds of the international health workforce, with 300 organisations acting on behalf of at least 45 million medical doctors and other health professionals internationally, calling for heads of state and other COP26 country representatives to step up climate action. The letter stipulates the following demands:
• We call on all nations to update their national climate commitments under the Paris Agreement to commit to their fair share of limiting warming to 1.5 °C; and we call on them to build health into those plans;

• We call on all nations to deliver a rapid and just transition away from fossil fuels, starting with immediately cutting all related permits, subsidies and financing for fossil fuels, and to completely shift current financing into development of clean energy;

• We call on high income countries to make larger cuts to greenhouse gas emissions, in line with a 1.5 °C temperature goal;

• We call on high income countries to also provide the promised transfer of funds to low-income countries to help achieve the necessary mitigation and adaptation measures;

• We call on governments to build climate resilient, low-carbon, sustainable health systems; and

• We call on governments to also ensure that pandemic recovery investments support climate action and reduce social and health inequities.

WHO’s COP26 special report reflects consensus statements from the international health community on key actions that governments need to take in order to address the climate crisis, rebuild ecosystems, and safeguard health. It proposes 10 priority recommendations for governments to adopt in order to amplify the health benefits of addressing climate change in a number of sectors, thus avoiding the worst health impacts of the climate crisis. The following recommendations provide concrete examples of actions that, with the correct backing, can be scaled up quickly in order to preserve both health and the environment⁴:

1. **Commit to a healthy recovery.** This goal strives to commit to a healthy, green and just recovery post COVID-19. The next couple of months and years will provide a critical window in which to align climate change and health goals. Furthermore, the pandemic has also provided the world with an opportunity to build toward the future in a better fashion which is both green and more equitable. Climate and health goals need to be aligned, commitment needs to be made for a fossil-free recovery, the world needs to prevent and prepare for the next pandemic, health needs to be included in all policies, and, lastly, there needs to a commitment to global vaccine equity.

2. **Our health is not negotiable.** Health and social justice need to be placed at the heart of the United Nations Framework Convention on Climate Change (UNFCCC) climate talks. In order to achieve this goal, the 1.5 °C gap needs to be closed in order to survive, the scaling up of finance for vulnerable countries needs to be mobilised in order to tackle climate change, support for adaptation and resilience efforts needs to be stepped up, and the finalisation of the Paris Agreement Rulebook needs to take place.

3. **Harness the health benefits of climate action.** Climate interventions with the largest health and socio-economic gains need to be prioritised. In order to do this, health co-benefits of climate action need to be identified and measured at all levels of governance and maximised, everyone’s right to health needs to be honoured, and the science of health and climate change should be bolstered.

4. **Build health resilience to climate risks.** Climate resilient and environmentally sustainable health systems and facilities need to be built and health adaptation and resilience across sectors supported. This will require iterative health vulnerability and adaptation assessments, the development and implementation of evidence-based adaptation plans for health and the health sector, strengthening climate resilience and environmental sustainability of health systems and facilities, addressing the lack of financing for health and adaptation resilience, and, lastly, protecting health and advancing climate justice by implementing health-promoting interventions in other sectors.

5. **Create energy systems that protect and improve climate and health.** A just and inclusive transition to renewable energy to save lives from air pollution, particularly from coal combustion, needs to be undertaken. Energy poverty in households and healthcare facilities needs to be ended. Investing in clean solutions for household energy needs to be pursued, and powering the health sector with clean energy, and ensuring a just transition for workers and communities transitioning out of the fossil fuel sector, need to be prioritised.

6. **Reimagine urban environments, transport and mobility.** The promotion of sustainable, healthy urban design and transport systems, with improved land use, access to green and blue public spaces, and priority for walking, cycling and public transport, needs to be prioritised. In order to achieve this goal, the phasing out of internal combustion engines needs to take place as well as the reduction of private car use; walking, cycling and ventilated public transport needs to be prioritised, and the creation of people-centred cities needs to be pursued.

7. **Protect and restore nature as the foundation of our health.** We need to protect and restore natural systems which constitute the foundation for healthy lives, sustainable food systems, and livelihoods. Action points here include ending our destruction and degradation of nature, protecting and restoring the ecosystems that we all depend on, recognising the interconnections between human, animals and ecosystem health, promoting nature-based solutions and nature-based recovery, protecting people and planet by implementing a new global biodiversity framework.

8. **Promote healthy, sustainable and resilient food systems.** The promotion of sustainable and resilient food production geared towards more affordable and nutritious diets will deliver on both climate and health outcomes. Harmful and discriminatory agricultural subsidies, such as those supporting the meat and dairy industry (which contributes significantly to the rise in global greenhouse gases) and only large-scale farmers, should be removed to support a just agricultural transition which supports sustainable food systems and local small-scale farming. This transition will in turn mainstream biodiversity for nutrition and health.

9. **Finance a healthier, fairer and greener future to save lives** by transitioning towards a well-being economy, which needs to be actioned by: stopping the funding of pollution, closing the health finance gap, ensuring that public finance does no harm, and providing dept relief to vulnerable nations.

10. **Listen to the health community and prescribe urgent climate action.** Include the healthcare communities’ voices in planning for climate change. Action also needs to be taken to mobilise and support the health community on climate action by training the health workforce to respond to climate change, taking climate action in the healthcare sector, enabling health professional advocacy on climate change and health, and lastly by protecting the health of future generations.

The special report emphasises that individual health can be protected by transformational acts in every sector, including the engineering, energy, transport, urban design, nature, food systems and finance sectors. It points to the potential for public health co-benefits of climate change interventions to offset their costs, and provides South Africa with the opportunity to reflect and carefully consider how priority recommendations may be implemented locally.¹

**References**


3. Dos Santos M. Climate change, the fourth industrial revolution and sustainable development in Africa. Africa Insight. 2020;49:4.


