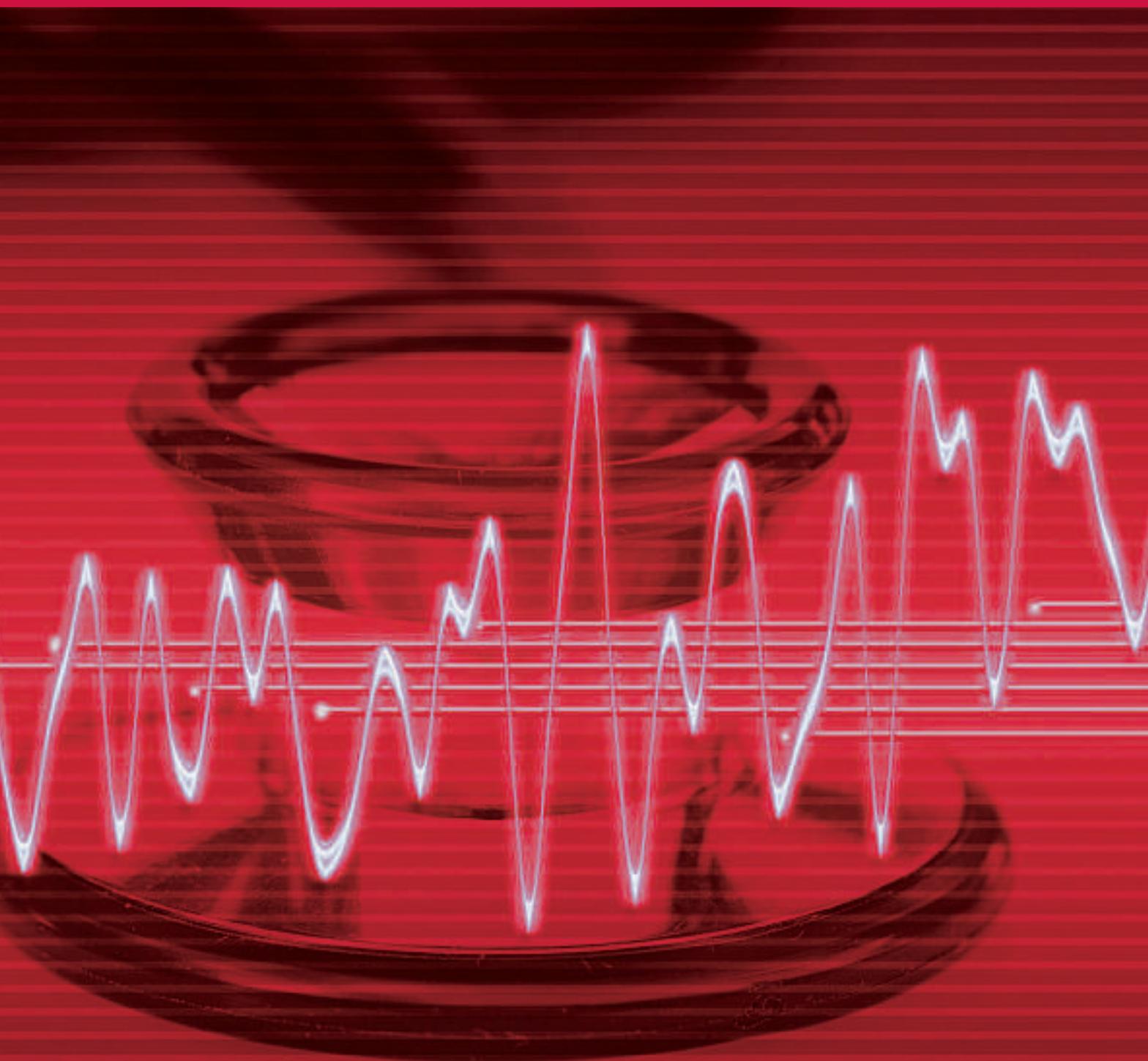


Saving lives, saving money

We have a once-in-a-lifetime opportunity to align health, environment and economic objectives, say Maria Neira and Diarmid Campbell-Lendrum of the World Health Organization.



While climate change is identified as the defining challenge of this century, ensuring health for all remains the unfinished business of the last century. More than 10 million children die every year—an affront to human dignity. And in recent months, the emergence of the global financial crisis threatens to cut the resources available to spend on tackling either of these problems. This is prompting some to ask, in such hard times, should we invest in saving lives now, on combating climate change, or neither? Which is more important: glaciers, people, or bank balances?

On closer inspection, however, these apparently stark choices start to break down, to be replaced by a more hopeful outlook. Could this be a once-in-a-generation opportunity to bring health, environment and economic objectives into better alignment?

Over the last 20 years, the World Health Organization (WHO) has been sounding the alarm bells with ever greater urgency. Climate change will affect, in profoundly adverse ways, the basic requirements for good health: clean air and water, viable food crops and adequate shelter. Each year, about 60,000 people die in weather-related natural disasters, almost one million from malaria, over two million from diarrhoea and 3.5 million from under-nutrition. With each of these threats being highly sensitive to climate conditions, we can expect increasing temperatures and more extreme weather to make it even more difficult to combat them. The burden of these diseases falls mainly on the poor, on women and particularly on children who have contributed least to global greenhouse gas emissions. They need, and deserve, protection.

Here is the first opportunity for alignment between climate change and health. In the language of the climate change community, there is a need for 'health adaptation', to protect those who are most vulnerable from the risks associated with climate change. Our global machinery and resources such as the Adaptation Fund (for concrete adaptation projects in developing countries that are Parties to the Kyoto Protocol) should therefore be directed to help protect health.

When the health community looks at this situation, they use their own language, of disease prevention, or public health protection. But the objective is the same—safeguarding lives, whatever the weather. Most importantly, the health community has a great capacity to help achieve this goal. Climate change is expected to lead to changes in existing health issues rather than the emergence of new, unfamiliar, diseases. The necessary preventive actions to deal with most climate-sensitive diseases are already well known. Strengthening these actions would help save lives now (the goal of health protection) and reduce vulnerability to climate change in the future (the goal of adaptation).

To take one example, climate change, along with other global trends such as

increasing movement of people, disease vectors and pathogens, threatens to spread infectious disease and exacerbate epidemics. The health sector already has surveillance systems in place, from the local to the international level, but there are weaknesses in coverage and in response capacity that will be increasingly shown up in a changing climate. The best response therefore is to strengthen existing health surveillance systems and integrate them with those that monitor climate and other environmental conditions that favour disease outbreaks, along with disease in wildlife and farmed animals.

As another example, global freshwater resources are declining, mainly due to water extraction and contamination. Climate

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change is expected to add to water stress, particularly in already dry regions such as the Eastern Mediterranean and North Africa. An integrated programme of scaling up of water and sanitation services, provision of point of use disinfection and water conservation, would reduce both the current burden of disease and vulnerability to further water stress.

Of critical importance in the current economic conditions is that these actions are highly cost-effective. Investments in water and sanitation infrastructure have a significantly favourable benefit-cost ratio. New approaches such as warning and alert systems to prevent deaths in heat waves are also showing themselves to be highly cost-effective. Whether these are called climate change adaptations or public health measures, they are good deals.

The second point of alignment relates to the long term goal of climate stabilization. Many of the measures that could reduce greenhouse gas emissions such as the use of cleaner energy sources for power generation, transport and in the home, and urban planning that enables safe and efficient use of public transport, carry important health 'co-benefits'. These include potential reductions in some of our largest disease burdens—the 800,000 deaths per year from outdoor air pollution, the 1.5 million from indoor air pollution, the 1.9 million from physical inactivity and the 2.6 million from obesity.

Health arguments present a huge and neglected opportunity for those pushing for climate change mitigation. Experience has shown that quantifying the benefits to health and well-being can often tip the balance in

favour of more environmentally-friendly choices. For example, a cost-benefit analysis of the US Clean Air Act showed that each dollar invested in implementing the Act generated 42 dollars in societal benefits—almost entirely through health improvements. The 2007 Intergovernmental Panel on Climate Change report showed that the costs of many mitigation interventions would be partly or wholly compensated by health benefits. These are often valued close to or higher than the 'social cost' of carbon dioxide or the 'market cost' in carbon trading schemes. In other words, these interventions should be valued and provided with incentives as much for protecting health as they are for protecting the climate.

These health benefits are also immediate and local—often making them particularly attractive to politicians and the general public. Some people are arguing, correctly, that if richer populations moderated their consumption of red meat, this would help reduce greenhouse gas emissions. They should argue just as forcefully that this would also help reduce their risk of obesity, heart disease and colon cancer.

In order to achieve mutual benefits for health and the environment, we are going to have to start working closer together. We already have the mandates to do so. The UN Secretary General has identified climate change and health as priorities for his term in office. The Millennium Development Goals bring together health, environment and development objectives. The stated aim of the UN Framework Convention on Climate Change (UNFCCC) is as much to avoid damage to health and wellbeing, as to the environment and economic development. And last year, the 193 countries represented at the World Health Assembly passed a resolution calling for

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stronger action to protect health from climate change—bringing the health community fully on board in confronting this global challenge.

But these efforts are still too isolated from one another. Although health is supposedly central to the UNFCCC and is frequently identified as a priority in national adaptation plans, there is close to zero health representation at the UNFCCC Conference of the Parties. It is therefore no surprise that very few health adaptation projects are submitted, and that even fewer are funded. Perhaps more importantly, we may miss the chance to ensure that a new, low-carbon future also promotes health, which would be everybody's loss.

We can do much better than this. The health and the environment sectors have huge strengths, in public support, the skills and motivation of millions of professionals and volunteers, and significant (although still inadequate) financial resources. There will be some situations when there are real conflicts between environmental and health objectives. In these cases, you can expect WHO to argue strongly for those actions which will save or improve the most lives in the shortest time. But we will be on the same side much more

often than we oppose each other. Combating climate change and improving health should be the same battle. ■

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