Climate Change & Health A Framework for Action

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CAT Public Health Work Group
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"Climate change is the biggest global health threat of the 21st century... The impacts will be felt all around the world – and not just in some distant future but in our lifetimes and those of our children."

The Lancet



Why aren't we doing more?

- No funding, no resources
- No mandate, not our job, silos
- Lack capacity
 - Funding, resources, knowledge, expertise
- Lack leadership
- Competing priorities
 - Tyranny of the urgent
- Unclear exactly how this relates to what we do now
- Unclear what exactly we can do

Physical Environments













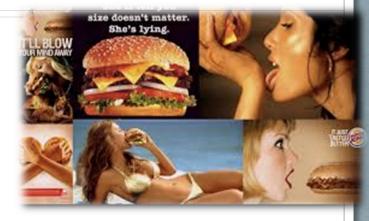
Services Environments



Social Environments















Economic Environments









Place Matters



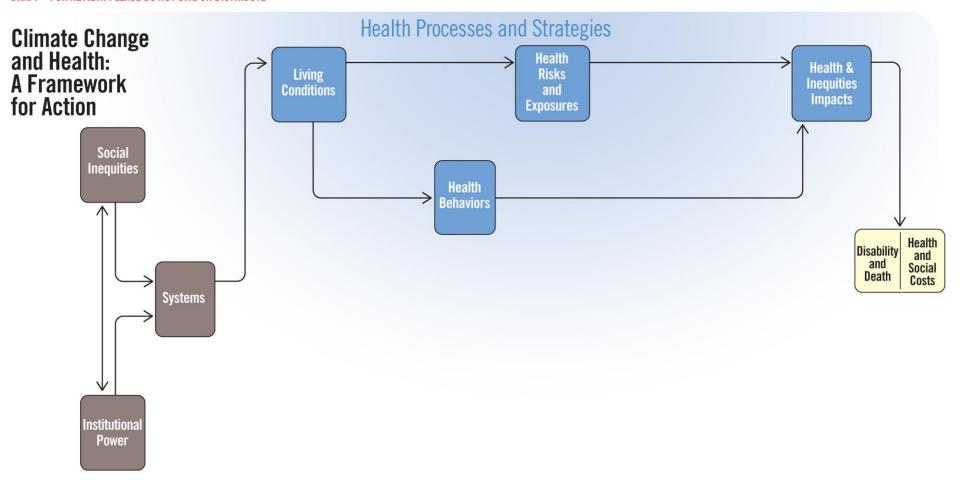
BARHII
Bay Area Regional Health
Inequities Initiative

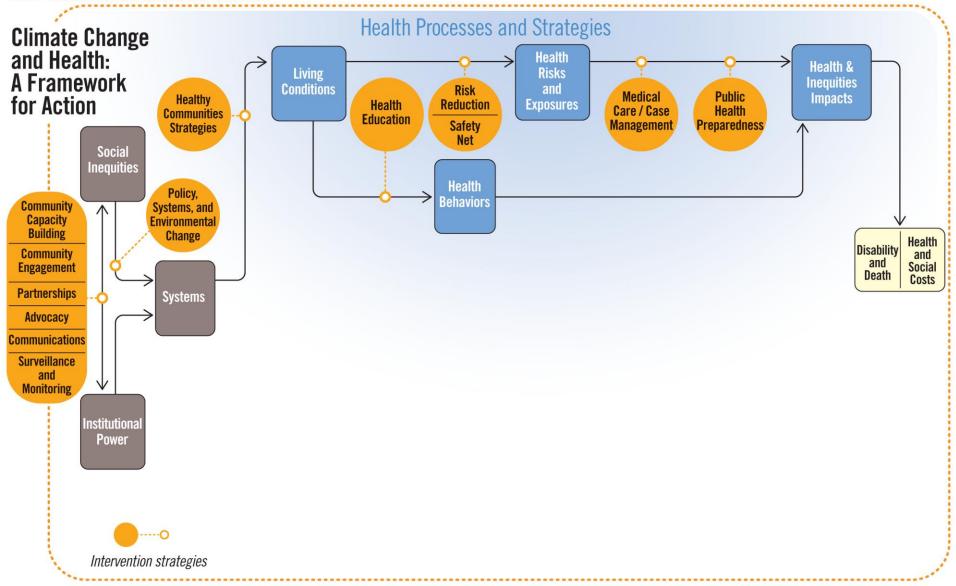
UPSTREAM

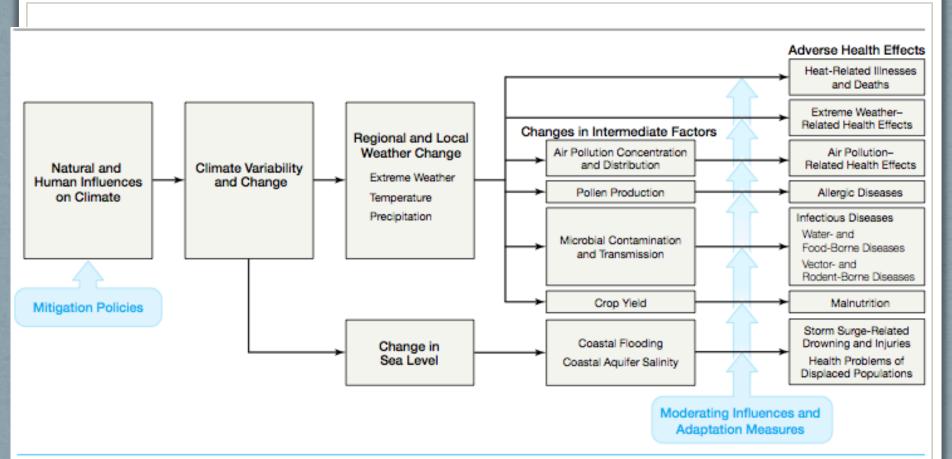
What are response to the property of the prope

LIVING CONDITIONS Physical Environment Land use MORTALITY RISK DISEASE SOCIAL INSTITUTIONAL Transportation **BEHAVIORS** & INJURY INEQUITIES POWER Housing Risk Behaviors Communicable Residential Segregation Infant Class Corporations & Mortality Smoking Disease Businesses Exposure to Toxins Race/Ethnicity Poor nutrition Chronic Life Government Immigrati in Status Racism, Gender, Gender (Intentional & Immigration Violence Sother Sexual Cavio 10 a ws Unintentional) Drugs Not-for-Profit Organizations Economic & Work Sexual behavior Environment Employment Income Retail Businesses Occupational Hazards Service Environment Health Care Education Individual Health Health Care Social Services Education Strategic Partnerships Community Capacity Building Advocacy Case Management Community Organizing Civic Engagement POLICY Emerging Public Health Practice Current Public Health Practice -

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Mitigation Policies for Reduction of Greenhouse Gas Emissions

Energy Efficiency
Use of Renewable Energy Sources
Forest Preservation

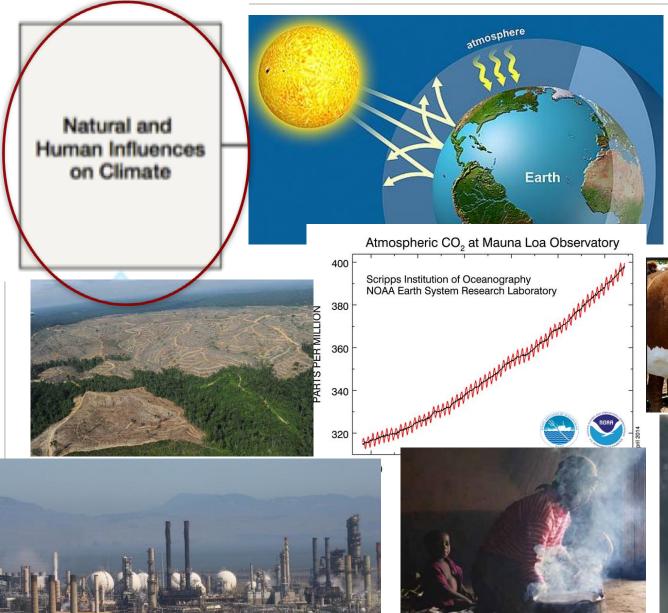
Moderating Influences

Population Density and Growth
Level of Technological Development
Standard of Living and Local Environmental Condition
Preexisting Health Status
Quality and Access to Health Care
Public Health Infrastructure

Adaptation Measures

Vaccination Programs

Disease Surveillance
Protective Technologies
Weather Forecasting and Warning Systems
Emergency Management and Disaster Preparedness
Public Health Education and Prevention
Legislation and Administration

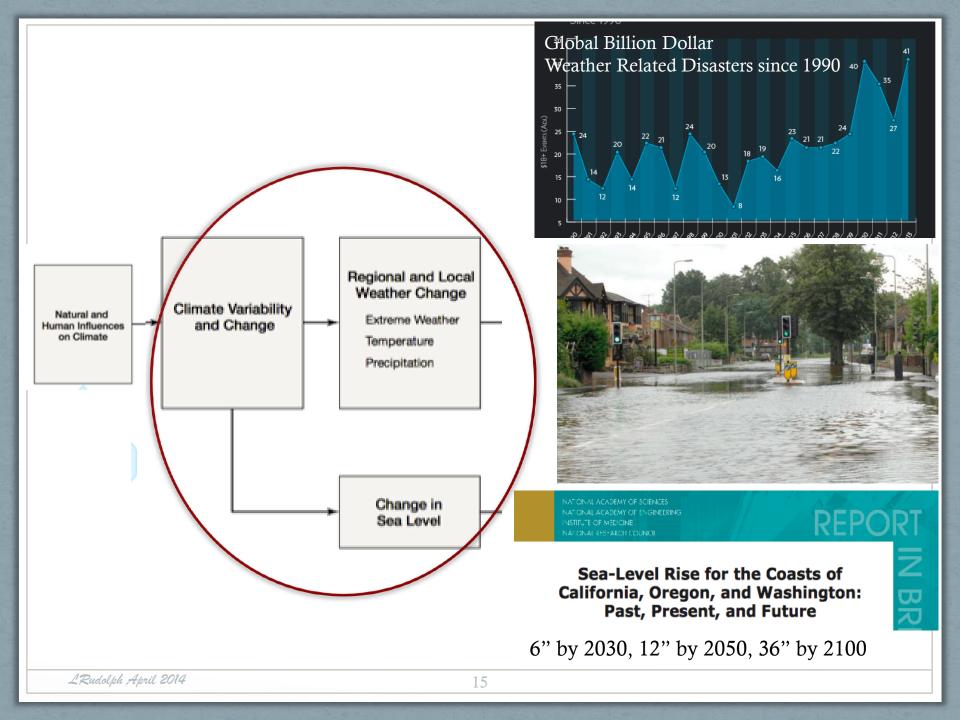








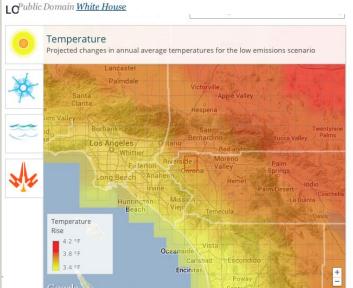
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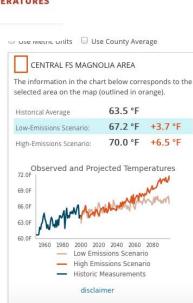


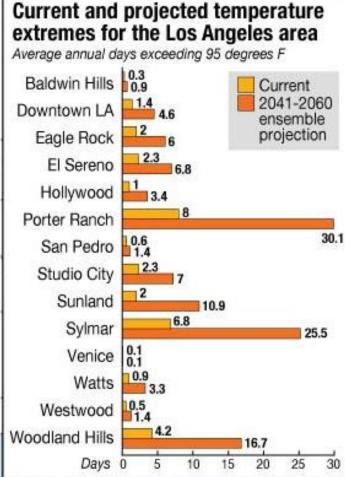
Temperature

2012 WAS THE SECOND MOST EXTREME YEAR ON RECORD FOR THE NATION

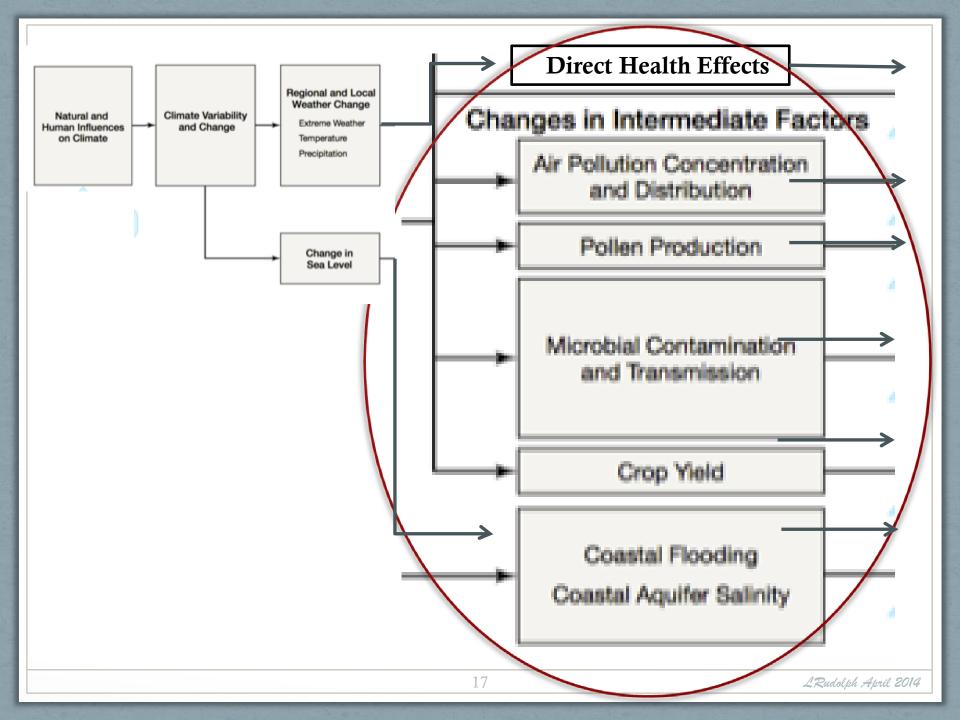








UCLA LARC 2012



Higher Temperatures Worsen Air Pollution

Ozone versus Temperature Ozone versus Temperature R²=0.80 160 160 120 California Ozone Standard Standard Ozone Standard

Fresno, 2003-2005



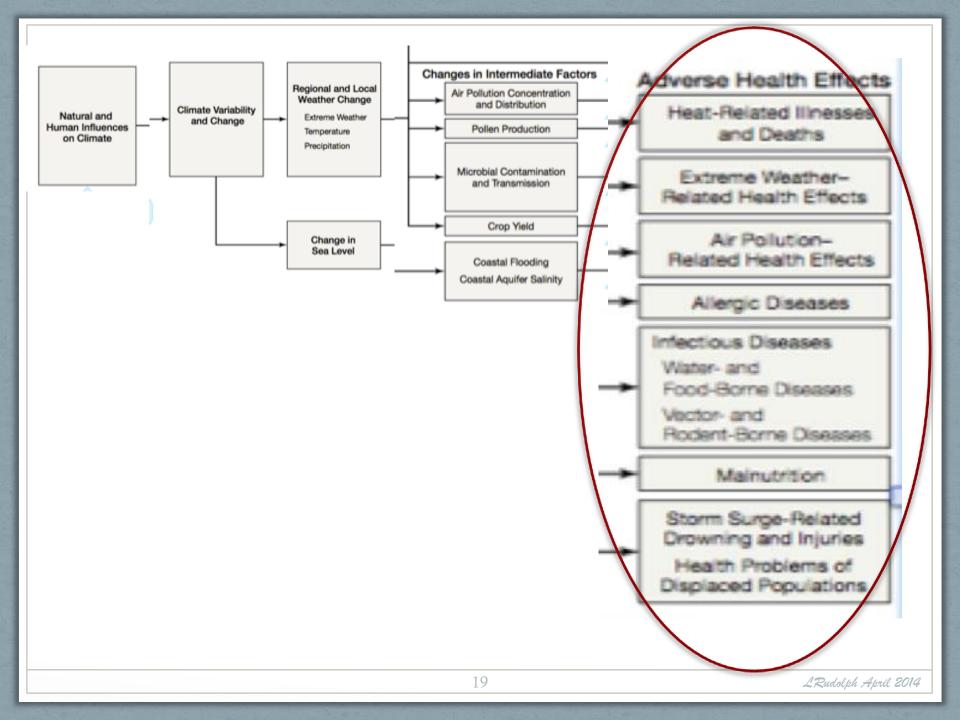
Riverside, 2003-2005







Photo: Tudor Van Hampton / ENR















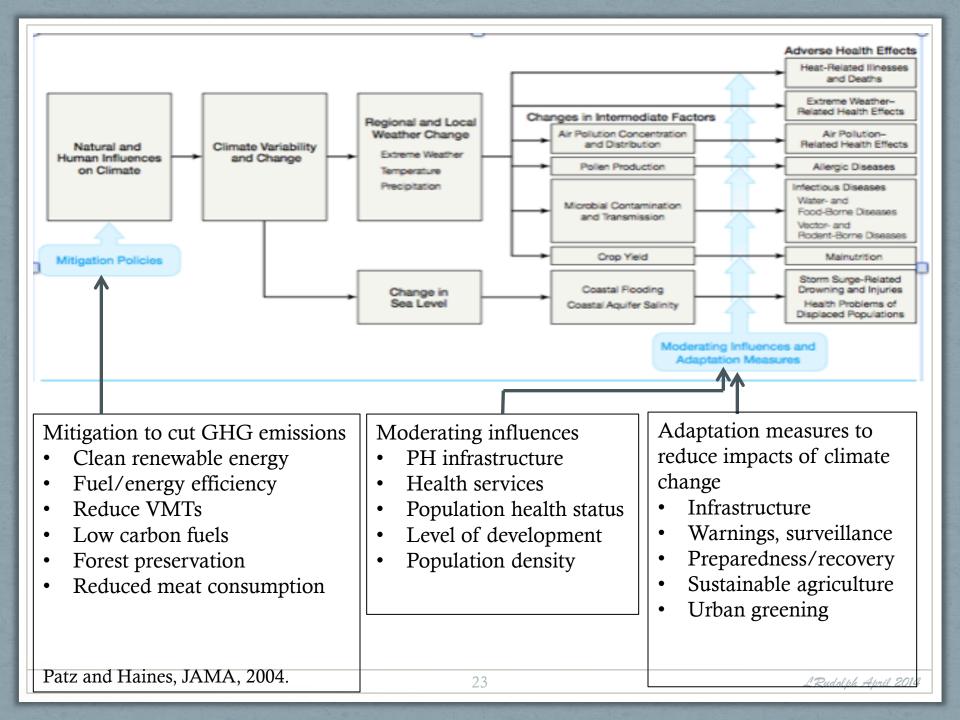




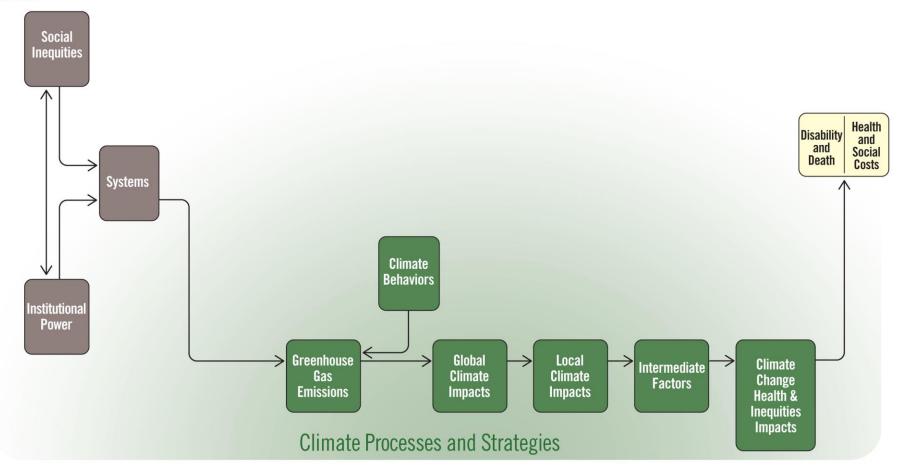
Health-Care Costs of Climate Events

Climate-related health stressor	Premature Deaths	Hospitalizations	Total Health-care Costs \$\$ (thousands)
Ozone pollution	795	4,150	6,534,642

Knowlton, Health Affairs, 2011

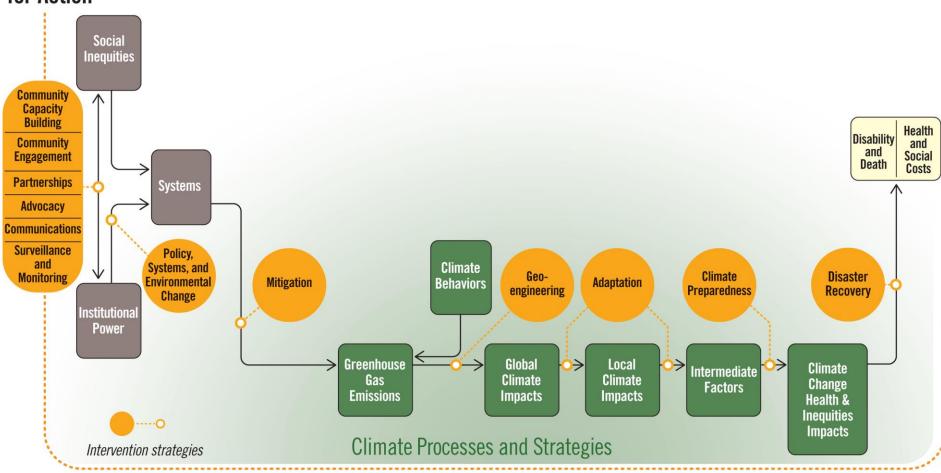


Climate Change and Health: A Framework for Action



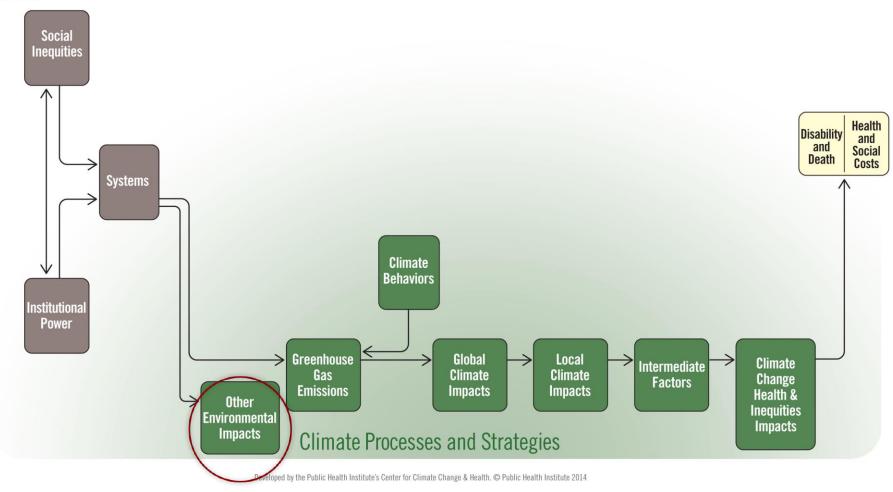
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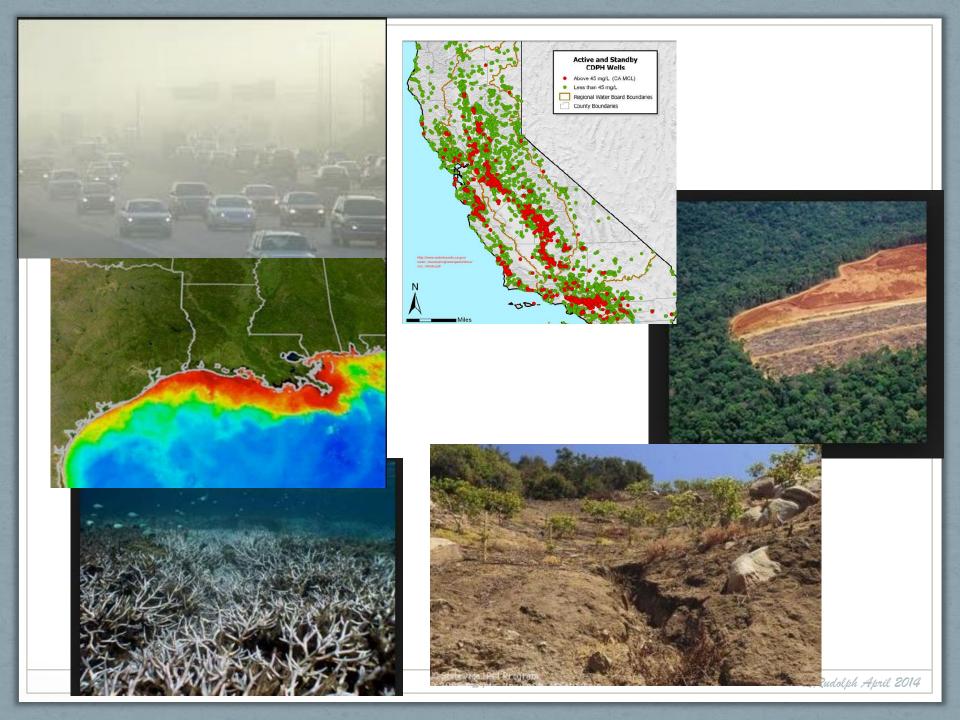


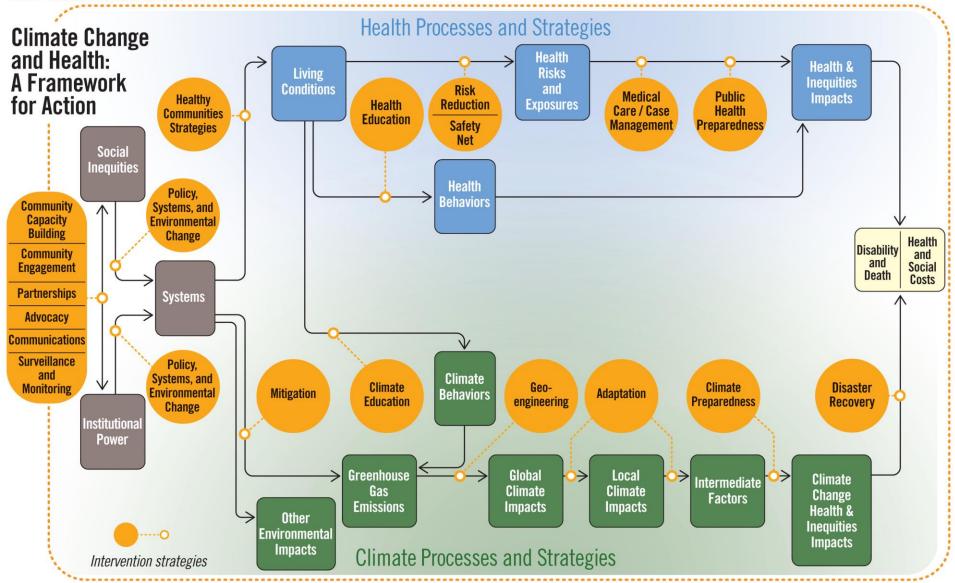
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Vulnerability & Resilience

Vulnerability

- the degree to which geophysical, biological and socio-economic systems are susceptible to, and unable to cope with, adverse impacts of ecological or climate change
- human populations at higher risk, due to both environmental and individual factors

Resilience

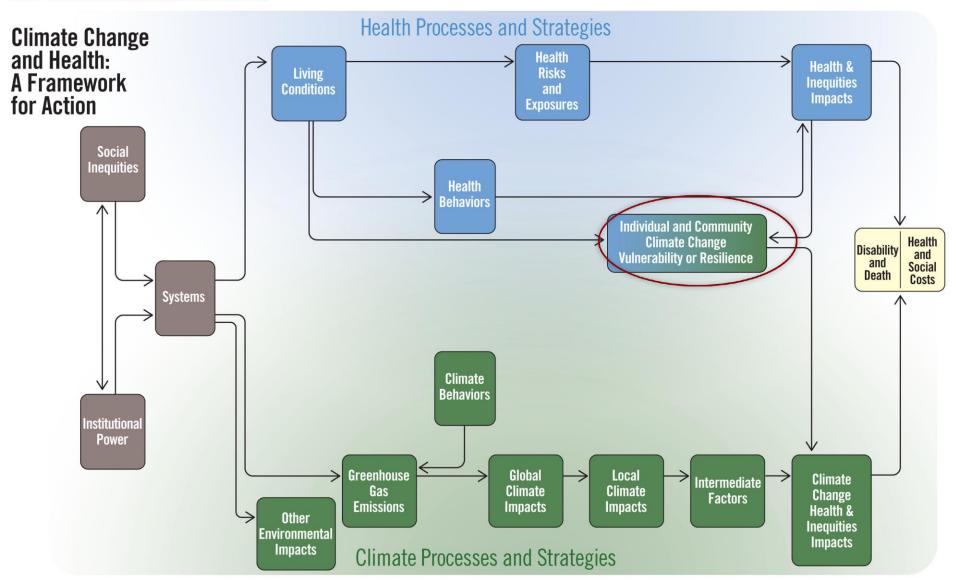
- the capacity of an ecosystem to respond to a disturbance for example a flood or drought or pest invasion by resisting damage and recovering
- the capacity of an individual, community, or institution to dynamically and effectively respond to shifting climate impact circumstances while continuing to function and prosper
- Characteristics of resilience or vulnerability co-exist at the same time in any community or individual.
- Together, the intersection of resources, including social connection, coping mechanisms, exposures, and susceptibility that will determine the extent to which climate change impacts health and well-being.

Individual & Community Climate Vulnerability & Resilience

- Population health status
- Public health infrastructure
- Government function
 - Health, social services
- Food systems

- Infrastructure
 - Transportation, housing
- Economic status
- Social support
- Population density





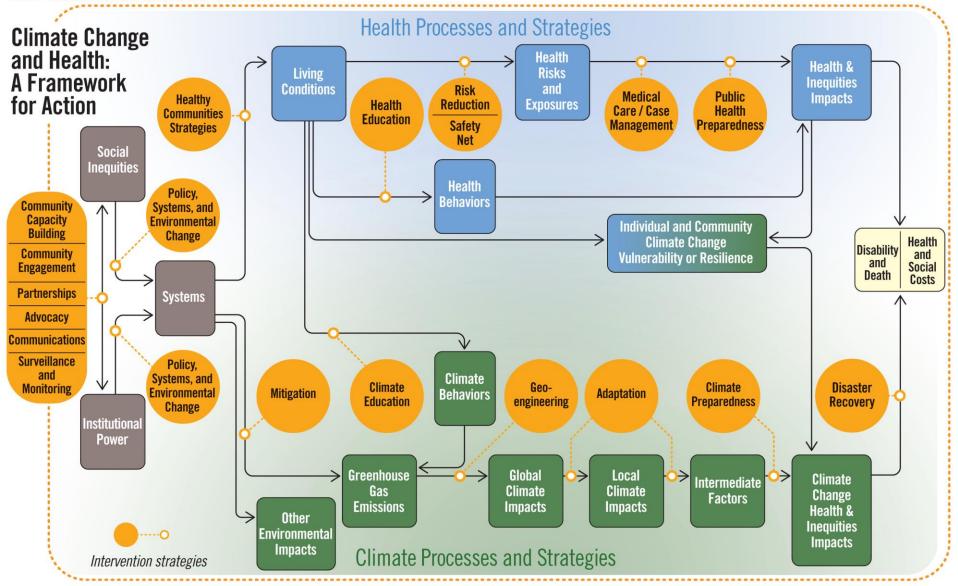
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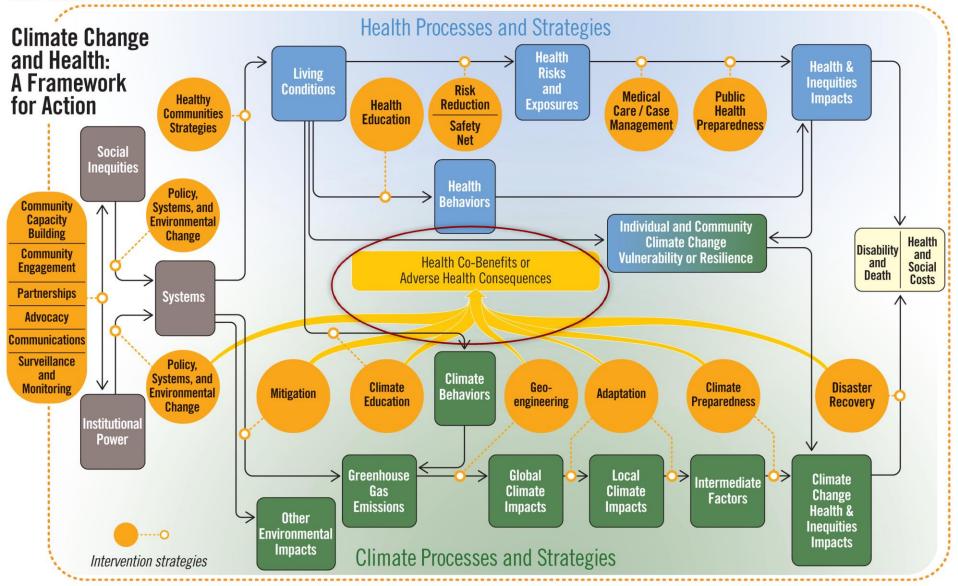








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Active Transportation Co-Benefits

- Reductions
 - Air pollution
 - Noise
 - Infrastructure costs
 - Community severance
 - GHG emissions

- Increases
 - Physical activity
 - Social capital

- Reductions
 - Respiratory disease
 - Cardiovascular disease
 - Diabetes
 - Depression
 - Osteoporosis
 - Cancer Stress
- Avoidable increases
 - Bike/ped injuries

Co-benefits of Sustainable, Local Food Systems

Reductions

- GHG emissions
- Pesticide use
- Synthetic fertilizer use
- Food miles
- Antibiotic use
- Water pollution
- Soil erosion
- Biodiversity loss
- Meat consumption
- Unsustainable H2O consumption

Increases

- Access affordable healthy food
- Rural community strength
- Agricultural land preservation

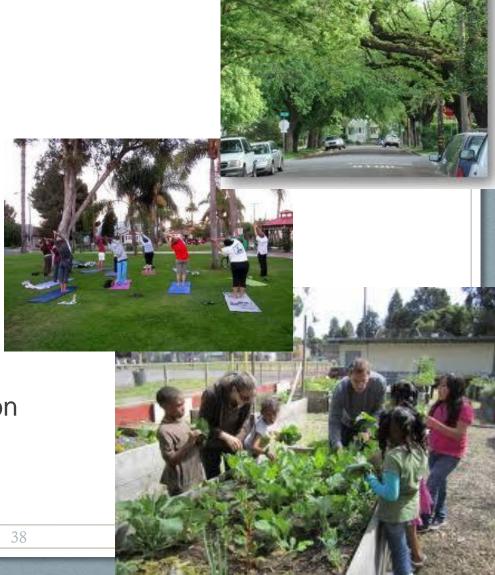
Reductions

- Obesity
- Cardiovascular disease
- Cancer (breast, prostate, colorectal)
- Type II Diabetes
- Antibiotic resistance
- Pesticide illness



Heat Resilience Co-Benefits

- Urban greening
 - Places to be active
 - Healthy food access
 - Reduce storm water run-off
 - Decrease flooding risk
 - Replenish groundwater
 - Improve aesthetics
 - Reduce crime
- Reduce heat island effect
 - Reduce heat illness risk
 - Decrease energy consumption
 - Lower energy costs
 - Reduce air pollution



Climate Change and Health

- Climate change has direct impacts on health & well-being
- Climate change is a threat multiplier
 - Climate change exacerbates existing health challenges
- Climate change effects the systems on which human life depends air, water, food, shelter, security.
- Climate change disproportionately impacts vulnerable populations and disadvantaged communities
- Co-benefits offer many opportunities to simultaneously improve health and address climate change

Mitigation - IPCC 5th Report

- Human-caused CAPS continue to increase (1970-2010);
- Current actions are not consistent with keeping temperature increase to less than 2°C
- Without additional measures, project 3.7 to 4.8°C increase in global mean temperature in 2100 (high confidence)
- Require substantial cuts in emissions by mid-century through large-scale changes in energy systems and possibly land use
- Delaying more robust GHG emissions reductions through 2030 will substantially increase difficulty of transition, costs, and narrow options

 http://www.ipcc.ch

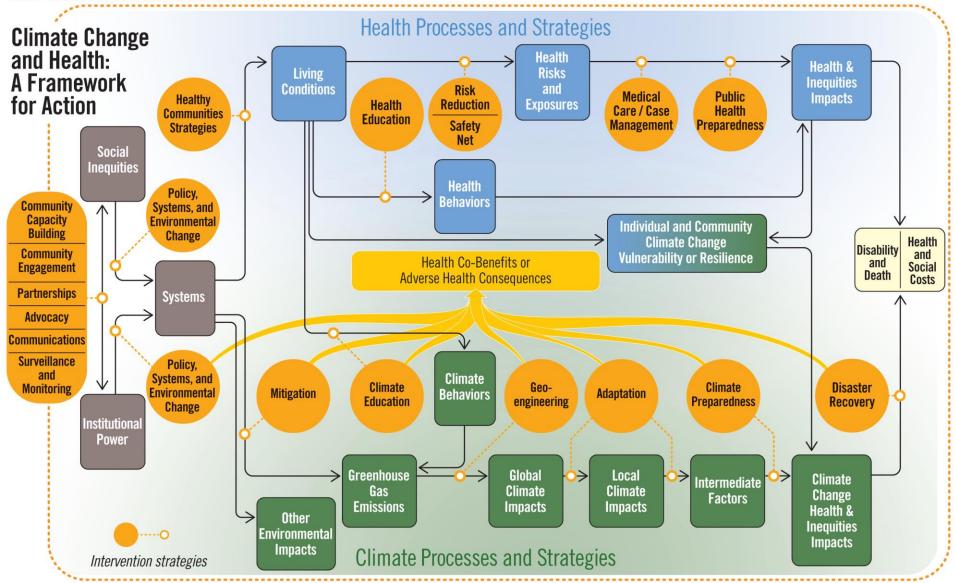
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Public believes climate change is happening & wants government to act now

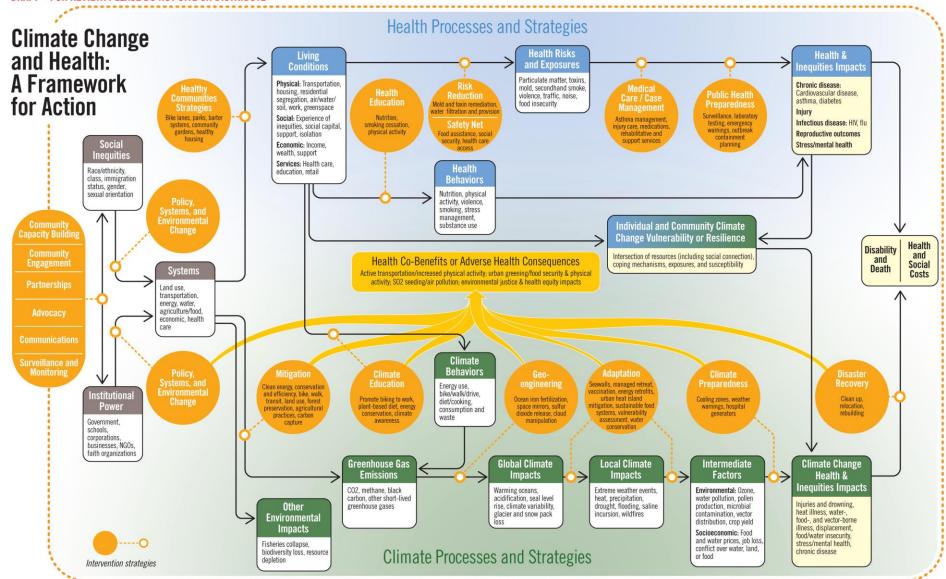
•	There is scientific consensus for climate changeRepublicansTea Party supportersAfrican-Americans	62% 69% 58% 86%
•	Effects happening now	54%
•	Willing to assume costs to address climate change	88%
•	Believe climate change preparedness create jobs	60%
•	Local government and states should act	82%

http://ecoamerica.org/wp-content/uploads/reports/ecoAmerica TrendReport Summer13.pdf

- Climate change is a public health emergency
- It is our professional and moral responsibility to act now.



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Thank you.

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