**The Health Argument for Climate Action**

**A COP26 Special Report**

***Scope and Purpose of the Report***

In 2018, WHO produced a Special Report on Climate Change and Health on the occasion of the COP24 UN climate conference, and at the request of the COP23 President, Fiji. [The report](https://www.who.int/publications/i/item/cop24-special-report-health-climate-change) provided an overview of global knowledge, resources and tools on the interconnection between climate change and human health and made a series of recommendations to policy makers and UNFCCC negotiators.

In 2021, WHO, in collaboration with the WHO-civil society working group and an extensive range of partners, aims to produce an update of the COP24 report to reflect the increased evidence, urgency, and availability of solutions to maximize the health co-benefits of tackling climate change and avoid the worst health impacts of the climate crisis.

The goals of the COP26 Special Report on Climate Change and Health are to:

1. Present a summary of the current state of knowledge on the interlinkages between climate change and health;
2. Take stock of progress made on implementing ambitious action on climate and health, since the adoption of the Paris Agreement in 2015;
3. Refine and expand a set of recommendations for UNFCCC negotiators and policymakers on maximizing the health co-benefits of tackling climate change and avoiding the worst health impacts of the climate crisis;
4. Present a set of case-studies, key messages and other resources that can be used to further the climate and health agenda, and integrate health across different priority sectors and themes;
5. Present the COP26 health flagship Initiatives and strengthen efforts to mainstream the health dimensions of climate change, both within the UNFCCC process and with the larger public.

The report will be based on contributions from a wide range of health professionals, academic experts, civil society representatives, governmental and inter-governmental agencies, to ensure it reflects the views and ongoing work of the wider health community. The consultative approach to this report aims to ensure representation from across sectors, regions and population groups, and particular care will be taken to ensure the voices of the most vulnerable communities are included.

The report will be launched during the 26th Conference of the Parties ([COP26](https://ukcop26.org/)) to the UNFCCC, due to take place in Glasgow on 1 - 12 November 2021, and as part of the [2021 Global Conference on Health and Climate Change](https://www.who.int/news-room/events/detail/2021/11/06/default-calendar/2021-global-conference-on-health-and-climate-change) that will be convened at the margin of COP26.

***Annotated Outline***

**Introduction**

The introduction to this report will provide some overarching context on the developments on climate and health that have taken place since the adoption of the Paris Agreement in 2015, including by highlighting:

* Climate change is the biggest global health threat of the 21st century[[1]](#endnote-1), and the Paris Agreement is potentially the strongest public health agreement of the century[[2]](#endnote-2);
* Climate commitments by governments are still way off track, and the level of commitments needs to multiply in ambition by 3-5 times to reach the Paris Agreement goals[[3]](#endnote-3);
* No continent, country or community is immune from the health impacts of climate change[[4]](#endnote-4);
* The health benefits far outweigh the costs of meeting climate change goals[[5]](#endnote-5),[[6]](#endnote-6),[[7]](#endnote-7);
* Climate risks to health are growing, yet most countries are not acting fully on their own plans to safeguarding human health from climate change impacts, and the lack of prioritized funding is a key barrier[[8]](#endnote-8);
* COVID-19 is the greatest global shock in decades. It has laid bare deep socioeconomic inequalities and our vulnerability to health threats, including climate change. Both COVID-19 and the climate crisis will have to be tackled together if we want to ensure governments and communities can recover from the pandemic by building greener, more resilient, and more just societies (cf. WHO Manifesto for a green, healthy recovery from COVID-19)[[9]](#endnote-9);
* Health professionals are both trusted and committed messengers, with a strong grasp of the fundamentals of climate change.[[10]](#endnote-10) A growing body of evidence suggests that providing people with information about the health harms of climate change, as well as solutions to address them, can increase public support for the actions needed to reduce emissions[[11]](#endnote-11),[[12]](#endnote-12).

**Key Recommendations**

Short (visual) summary of the key recommendations highlighted throughout the report. This could include:

* A set of recommendations from the health community on how a healthy recovery from COVID-19 can drive an ambitious Paris Agreement renewal

*cf. Healthy Recovery Letter[[13]](#endnote-13); WHO Manifesto[[14]](#endnote-14)*

* Recommendations for UNFCCC negotiators on how to mainstream health throughout the UN climate change framework. Including by:
  + maximising the health co-benefits of climate actions and avoiding the worst health impacts of the climate crisis;
  + overcoming the main barriers to enhanced action on climate and health, such as the lack of finance;
  + building climate-resilient health systems.

*cf. recommendations from COP24 report, COP25 health asks[[15]](#endnote-15); recommendations From WHO Health and Climate Change Survey Report; COP26 Key Messages on Climate Change and Health[[16]](#endnote-16); WHO review of health in the NDCs[[17]](#endnote-17); WHO quality criteria for NAPs[[18]](#endnote-18)*

**Health impacts of climate change**

Brief overview of the direct and indirect pathways of climate-sensitive health risks (tailored to non-health audience). Summary of the interlinkages between climate change, air pollution, energy use, unsustainable finance, ecosystem degradation, adaptation and resilience, and health.

*cf. Outcome of the 2021 Regional Consultations on Climate and Health; Research GAP report on climate and health (in production); 2021 workshop outcomes of Wellcome Trust Health and Climate Network; WHO/UNFCCC Health and Climate Change country profiles[[19]](#endnote-19); COP26 Key Messages on Climate Change and Health; WHO capacity building material (UNITAR course);*

**Cross-Chapter BOX on air pollution**

Text box on air pollution and short-lived climate pollutants (SLCPs), as an example of the intricate connection between climate change and health impacts. Including:

* the ways in which air pollutants are linked to both health effects and climate change;
* the near-term health and climate benefits from reducing air pollutants;
* air pollution as a political catalyst for near-term, local, bipartisan action on both climate and health;
* examples of recent progress on tackling air pollution by different cities and sectors, and how these contribute to WHO’s aspirational goal of reducing the number of deaths from air pollution by two-thirds by 2030[[20]](#endnote-20).

*Cf. new WHO estimates of air pollution burden[[21]](#endnote-21) (tbc); UN Clean Air Initiative[[22]](#endnote-22) (tbc); BreatheLife campaign[[23]](#endnote-23); Powering Past Coal Alliance[[24]](#endnote-24)*

**Health co-benefits of climate action**

Summary of the state of knowledge on health co-benefits of climate action, including:

* an overview of the range of interventions and their associated benefits across several sectors (transport, housing, land-use, etc.) and areas of action (mitigation, adaptation)[[25]](#endnote-25);
* a range of case studies of recent co-benefit assessments and their implications on policy making;
* an overview of existing tools and methods to assess health co-benefits[[26]](#endnote-26).

*Cf. findings of WHO expert group on health co-benefits; WHO country co-benefit studies; COP26 Key Messages on Climate Change and Health; WHO Urban Health Initiative[[27]](#endnote-27); CarbonH tool[[28]](#endnote-28) (in development)*

**Cross-Chapter BOX:** **Building climate-resilient health systems**

Outline of WHO’s and the health community’s approach and best practices to improve the resilience and adaptive capacity of health systems to deal with the adverse health effects of climate change.[[29]](#endnote-29) Entry points for COP26 and the UNFCCC process to accelerate climate-resilient health systems. Including:

* the operational framework for building climate resilient health systems;
* health in adaptation plans and strategies;
* the current state of adaptation, existing gaps and barriers to health adaptation;
* the COP26 Flagship Health Initiative on building climate-resilient health care facilities;
* a selection of case studies on health adaptation.

*Cf. COP26 Flagship Health Initiative; Quality Criteria for Health in NAPs; WHO guidance for climate resilient and environmentally sustainable health care facilitates[[30]](#endnote-30); Operational framework for building climate resilient health systems[[31]](#endnote-31); WHO guidance on Vulnerability and Adaptation Assessments[[32]](#endnote-32)*

**Prescriptions for a Healthy & Green Recovery from COVID-19**

Outline of the WHO Manifesto prescriptions and actionables for a healthy and green recovery from COVID-19, including a stocktaking of progress made by governments and other stakeholders on implementing these prescriptions thus far. This chapter will highlight some best practices and “triple win” interventions for climate, health and economies.

* Prescription 1. Protect and preserve the source of human health, Nature
* Prescription 2. Invest in essential services, from water and sanitation to clean energy in healthcare facilities
* Prescription 3. Ensure a quick and healthy energy transition
* Prescription 4. Promote healthy, sustainable food systems.
* Prescription 5. Build healthy, liveable cities.
* Prescription 6. Stop using taxpayers money to fund pollution.

*Cf. Actionables to the WHO manifesto; COP26 priority areas; Global Recovery Observatory[[33]](#endnote-33); Energy Policy Tracker[[34]](#endnote-34); Global Subsidies Initiative[[35]](#endnote-35);*

**The Health Argument for an ambitious COP26**

Chapter laying out concrete recommendations and targets for increased ambition on climate and health within the UNFCCC process. Including:

* Inclusion of COVID-19 recovery in climate processes
* Health in climate plans (NAPs, NDCs and LT-LEDS)
* Health adaptation and resilience efforts (NAPS, Adaptation Committee, Loss & Damage)
* Finance for climate and health (Standing Committee on Finance, long-term finance goal, Health Safeguards in Carbon Markets)
* Leveraging health benefits of climate action (Response Measures)
* Monitoring progress on climate and health (Global Stocktake, Biannual Reporting)
* Other elements: sustainable land use for biodiversity, nutrition and health (Koronivia programme); gender (GAP); indigenous peoples (LCIPP); capacity-building (PCCB, ACE); sustainable development (SDGs)

*Cf. WHO capacity building material (UNITAR course); WHO review of health in NAPs and NDCs; Special Initiative on Climate change and Health in SIDS; WHO-UNFCCC 2021 Health and Climate Change Global Survey (in production)[[36]](#endnote-36)*

**Cross-Chapter BOX on The Health Argument for a post-2020 Global Biodiversity Framework**

Highlighting opportunities to catalyze ambitious climate action through nature-based solutions, in an effort to reduce health challenges faced by populations particularly vulnerable to climate change and biodiversity loss. This box will draw on:

* The role of One Health and the link between nature degradation and pandemics;
* WHO recommendations for mainstreaming biodiversity for nutrition and health;
* Embedding health in Nature-based solutions;
* The emerging WHO Operational Framework for biodiversity and health.

*Cf. IUCN Global Standard for Nature-Based Solutions[[37]](#endnote-37); Post-2020 Global Biodiversity Framework[[38]](#endnote-38); WHO Special Report on Health and Nature-Based Solutions (in production), Leaders Pledge for Nature[[39]](#endnote-39); The Dasgupta Review[[40]](#endnote-40); UN System of Environmental-Economic Accounting[[41]](#endnote-41); Q&A on Biodiversity and Infectious Diseases[[42]](#endnote-42); WHO publication on Biodiversity and Human Health[[43]](#endnote-43); WHO publication on Mainstreaming Biodiversity for Nutrition and Health[[44]](#endnote-44); WHA report on biodiversity and Health[[45]](#endnote-45); Biodiversity, Climate, One Health and Nature-Based Solutions Expert Group[[46]](#endnote-46)*

**Case Studies on Climate Change and Health**

Series of case studies to showcase the collective progress that is being made, by the health community and allied actors, in recovering from COVID-19 while tackling the climate- and environmental impacts on health. Including:

* Case studies highlighting the different ways in which the health community is taking ambitious climate action, including through adaptation and mitigating actions in the health sector;
* Case studies from across health-determining sectors and COP26 Priority Action areas: Adaptation & resilience, Nature, Energy transition, Zero carbon road transport, and Finance;
* Case studies from across a wide variety of geographic regions and population groups, with a strong focus on the most vulnerable regions and groups, including Small Island Developing States.

*Cf. Outcome of the 2021 Regional Consultations on Climate and Health[[47]](#endnote-47); COP26 Case Studies on Climate Change and Health[[48]](#endnote-48); Lancet Pathfinder Initiative[[49]](#endnote-49); Special Initiative on Climate change and Health in SIDS[[50]](#endnote-50); NHS net-zero commitment[[51]](#endnote-51); Race to Zero Healthcare Challenge[[52]](#endnote-52); COP26 Flagship Health Initiative*

**Mobilizing the global community for climate and health action**

Very brief outline on the role of health professionals in driving action on climate and health. Including:

* Why a positive framing of the health co-benefits of mitigation is the most effective way to build support for climate actions[[53]](#endnote-53);
* The main opportunities and barriers for health professionals to be active climate advocates[[54]](#endnote-54);
* A set of expert recommendations on communicating the health arguments of climate action;
* Opportunities for expanded engagement of other groups around the health arguments for climate action, including youth, financial actors, urban planners, conservationists, climate advocates and others.

*Cf. WHO Civil Society Working Group[[55]](#endnote-55); Healthy Recovery Letter; COP26 Flagship Health initiative on* *mobilizing health professional voices (tbc); Survey of health medical associations; “Did You Know” WHO Advocacy series[[56]](#endnote-56); Youth engagement on Pre-COP "All4Climate - Italy2021” in Milan[[57]](#endnote-57)*

**Cross-Chapter BOX on WHO-civil society Working Group on climate change and health**

Sharing the 2019-2021 work of the WHO-civil society Working Group to Advance Action on Climate Change and Health[[58]](#endnote-58), as an example of radical collaboration in the health community.

*Cf. Regional consultations; GAP research report on climate and health; Healthy recovery letter; 2021 Global Conference on Health and Climate Change[[59]](#endnote-59)*

**Recommendations**

Overview of the key recommendations highlighted throughout the report. Expanding on the summary of recommendations at the start of the report.

**Annex – Tools and Resources on Climate and Health**

Extensive list of tools, resources and initiatives on climate change and health (with a strong focus on concrete tools, thereby largely excluding case studies, publications, information websites and research projects).

*Cf. WMO-WHO resource portal on climate and health; Compendium of WHO and other UN guidance on health & environment; European Climate Health Observatory[[60]](#endnote-60); Lancet Pathfinder Initiative; WHO SEARO Advocacy Toolkit on Climate Change and Health; WHO Health and Climate Change Online Interactive Data Dashboard; Urban Health Initiative tools; Heat Health Information Network tools[[61]](#endnote-61)*

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