SEA/RC62/R2       CLIMATE CHANGE AND HUMAN HEALTH

The Regional Committee,

   Aware of the findings of the 2007 Fourth Assessment Report of the Intergovernmental Panel on Climate Change (IPCC) on the anthropogenic nature of global warming and the climate implications thereof, and alert in particular to the direct and indirect harm that climate change has and will have on the health of the local communities in the countries of South-East Asia,

   Recognizing that there is an urgent need for action by the national governments, and in particular the health sector, to deal with the impact on climate-sensitive health determinants,

   Recalling the 2008 New Delhi Declaration on the impacts of climate change on human health, the World Health Assembly resolution WHA61.19 on climate change and health, and the Regional Framework for Action to Protect Human Health;

   Recognizing the various efforts undertaken by national authorities in Member States and by the health sector, as well as by WHO in the South-East Asia Region, to prepare and implement national and regional climate action plans,

   Considering that there is a critical need to increase the awareness on the climate change impact on health, to improve the capacity of the health sector to respond, to obtain evidence-based information on the relationship between climate change and health outcomes, and to translate research results into concrete action,

   Recognizing the current challenges such as the poor research capacity, and limited data quality, low performance of epidemiological and environmental surveillance systems, the lack of gender- and age-sensitive databases, the meagre baseline data on climate-sensitive disease, the use of non-standardized assessment methods, the challenges in attributing disease burden to climate change, the uncertainty of research data due to projections on greenhouse gas emissions, climate-forcing factors, demographic trends, and the lack of forums for collaborative transboundary research;

   Noting the urgent need of economic estimations of increased health costs linked to climate change, in particular for health conditions related to occupational heat stress and losses in labour productivity,

   Considering that climate change could lead to more pest pressure on crops and corresponding indiscriminate use of pesticides, which could increase both resistance to insecticides and direct exposure of agriculture workers and the general population to toxic chemicals through air, food and water,
Aware that the impact of climate change will vary from country to country and location to location within the country and depend significantly on pre-existing vulnerability levels and disease burdens, and that therefore effective preventive and adaptive action will need to be developed and implemented with the active participation/leadership of local communities,

Further aware that responding to the challenges posed by climate change to health can only be overcome by fostering partnerships and effectively collaborating across the full range of the health sector including governmental, nongovernmental and especially community-based actors,

Conscious of the fact that the robust capacity to respond to climate change threats by the health sector can effectively be achieved by the allocation of additional funding,

Having considered the report and recommendations of the Technical Discussions on “Protecting Health from Climate Change”,

Endorses the recommendations contained in the report, and

1. **RECOMMENDS** Member States to:
   
   (a) Accelerate the implementation of climate change and health-related actions as committed to in the 2008 New Delhi Declaration;
   
   (b) Appoint and allocate resources for the functioning of a specific climate change and health team in the ministries of health and strengthen strategies for inter-departmental coordination;
   
   (c) Develop a communication strategy to increase the awareness of climate risks to policy-level officials within and outside the health sector, health professionals and health workers, non-profit NGOs, community organizations, corporate and business sectors, and the media;
   
   (d) Increase awareness of the health consequences of climate change, the implications for the health system, the urgent need for action and for developing appropriate policies within and outside the health sector;
   
   (e) Build up the capacity of health professionals and health workers, also of professionals in other related sectors, to comprehend the impact and challenges posed by climate change to health and the need to proactively collaborate and in a timely manner identify and address the impacts and challenges posed by climate change to human health, and national health systems;
   
   (f) Collaborate with national authorities to introduce climate change and health dimensions into educational curricula at all levels, in particular medical and public health schools, to strengthen the capacity of professionals in all sectors to understand and contribute to the response to climate change;
   
   (g) Develop and implement a prioritized national agenda for applied research and training on selected essential topics to assess the scale and nature of health vulnerability to climate change, making use of the best-performing available assessment tools, with the aim to inform health planning and prepare action plans to reduce the burden of disease and the economic impact of climate change;
   
   (h) Map the available resources (including human resources), identify ongoing programmes and national research institutions, networks and partnerships available and necessary to conduct priority studies, using a standardized research methodology and ensuring that research findings/results are disseminated in a timely, efficient and user-friendly manner;
(i) Strengthen the surveillance of climate-sensitive health determinants and health outcomes to improve the efficacy of early warning systems and increase the availability of reliable and active monitoring of climate change-related health risks for risk assessment purposes;

(j) Actively support the empowerment of local communities to become more climate change-resilient, fostering cross-disciplinary partnerships and collaboration with other key sectors, such as environment, agriculture and education, as well as with nongovernmental organizations, in particular with youth groups and consumer organizations;

(k) Recognize vulnerable groups such as women, children, the aged and the underprivileged when developing and implementing preventive and adaptive measures, which should also enhance health equity and the welfare of these groups;

(l) Promote and support community leadership and participation in preventive measures that strengthen health systems and integrated adaptation actions that reduce the adverse health impacts of climate change at the local, national and global levels;

(m) Ensure closer synergy and collaboration between health scientists and practitioners and meteorologists, supporting efforts to strengthen regional cooperation to share relevant climate information that can improve health decision-making;

(n) Collaborate with other sectors to assess the health co-benefits and potential negative consequences deriving from current and planned prevention and adaptation measures undertaken outside the health sector, taking into consideration synergies with trends such as rapid urbanization, population growth, and industrialization;

(o) Provide resources so that health representatives can be fully engaged in development and implementation of national climate action plans, and contribute as well to international forums such as the relevant bodies of the United Nations Framework Convention on Climate Change (UNFCCC), in order to advocate that priority be given to addressing health issues in the realms of both adaptation and mitigation;

(p) Prepare and implement a national plan to reduce the carbon footprint of the health sector; and

(q) Develop a strategy to fund health-related climate action plans; and

2. REQUESTS the Regional Director to:

   (a) Identify and include all relevant climate change and health implications in the 2010-2011 action plans;

   (b) Ensure that health and climate change dimensions are included in the efforts to revitalize the primary health care (PHC) agenda and programmes aimed at health systems strengthening;

   (c) Recommend to Member States of the Region to mainstream climate change–related health issues into the health sector reform agenda;

   (d) Create and update an inventory of the ongoing research programmes and relevant expertise in the Region;

   (e) Strengthen regional networking and cooperation to exchange and share evidence-based data and information on climate-sensitive diseases and health problems and on best coping practices through existing mechanisms such as the Inter-Agency Standing Committee (IASC) Task Force on Climate Change;
(f) Create a mechanism to discuss the findings and future plans to avoid duplication;

(g) Address health issues related to climate change by supporting the development and use of tools and methodologies to assess health and health systems vulnerability;

(h) Strengthen local skills to find solutions to health threats posed by climate change through capacity development involving local communities and using robust monitoring and evaluation mechanisms;

(i) Attract potential partners to engage them in networking with WHO’s efforts in the domain of common interest;

(j) Identify existing WHO collaborating centres in the Region that could undertake research in priority areas and shortlist institutions to become new WHO collaborating centres in the SEA Region in the area of human health and climate change.