

Managing the health risks of climate change

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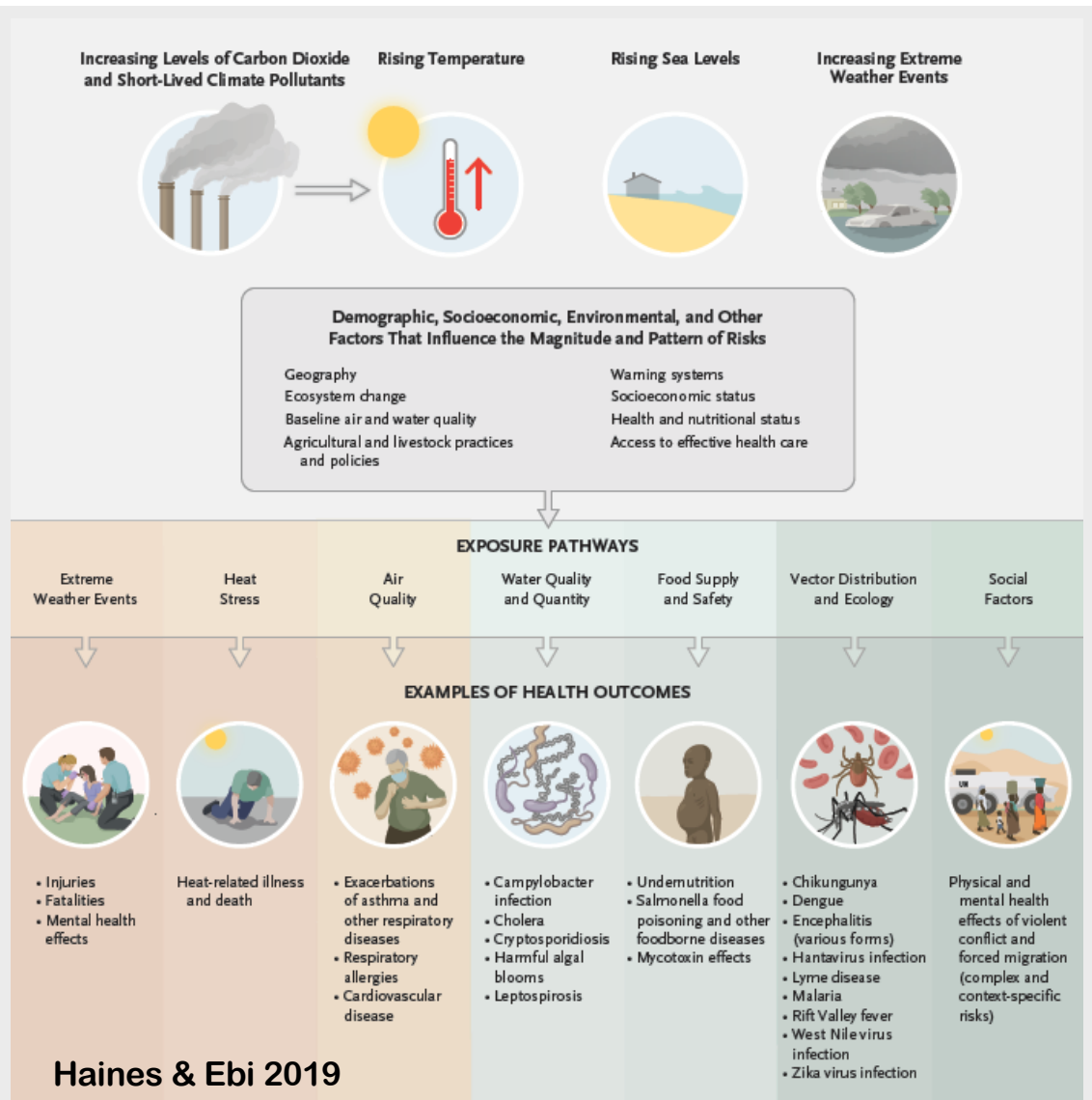
DEPARTMENT OF GLOBAL HEALTH
UNIVERSITY *of* WASHINGTON



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UNIVERSITY *of* WASHINGTON



IPCC 2022



Key conclusions of the IPCC 2022 chapter on human health

Observed impacts: *climate change is adversely affecting the physical health of people globally and mental health of people in assessed regions*

- Extreme heat events
- Vector-borne and zoonotic diseases
- Water and food-borne diseases
- Some mental health challenges
- Health services disrupted by extreme events such as floods

Projected risks

- Extreme events
 - Population exposure to heatwaves: increase with additional warming, strong geographical differences in heat-related mortality
- Food-borne, water-borne, and vector-borne diseases: increase under all levels of warming without additional adaptation
- Mental health (including anxiety and stress): increase in assessed regions

Exposure and vulnerability vary across populations

COMMUNITIES OF COLOR
Some communities of color living in risk-prone areas face cumulative exposure to multiple pollutants. Adaptation plans that consider these communities and improve access to healthcare help address social inequities.

OLDER ADULTS
Older adults are vulnerable to extreme events that cause power outages or require evacuation. Checking on elderly neighbors and proper emergency communication can save lives.

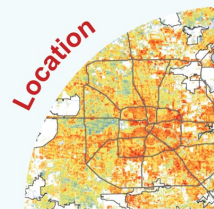
CHILDREN
Children have higher risk of heat stroke and illness than adults. Adults can lessen risk by monitoring exertion and hydration.

LOW INCOME COMMUNITIES
Low income families are at risk of physical and mental illnesses during flooding and in crowded shelter conditions. Comprehensive disaster management can improve resiliency for people with limited resources.

Heat and Health Equity



- Historically redlined communities (BIPOC and low-wealth communities) are often hotter than other neighborhoods.
- Access to cooling centers is more limited in some areas.



Social and Racial Factors



- Certain populations are more vulnerable to extreme heat and have less access to healthcare.
- Socially isolated individuals may have less access to cooling centers.



Economics

sts and the pairs limit the ford air-conditioning.

1 residents often es that provide tion against at.



Compound Risks



- COVID-19 protocols reduced the accessibility and effectiveness of cooling centers.
- Disadvantaged populations are more at risk for heat-related illnesses during power outages.

US NCA4 2018

US NCA5 2023

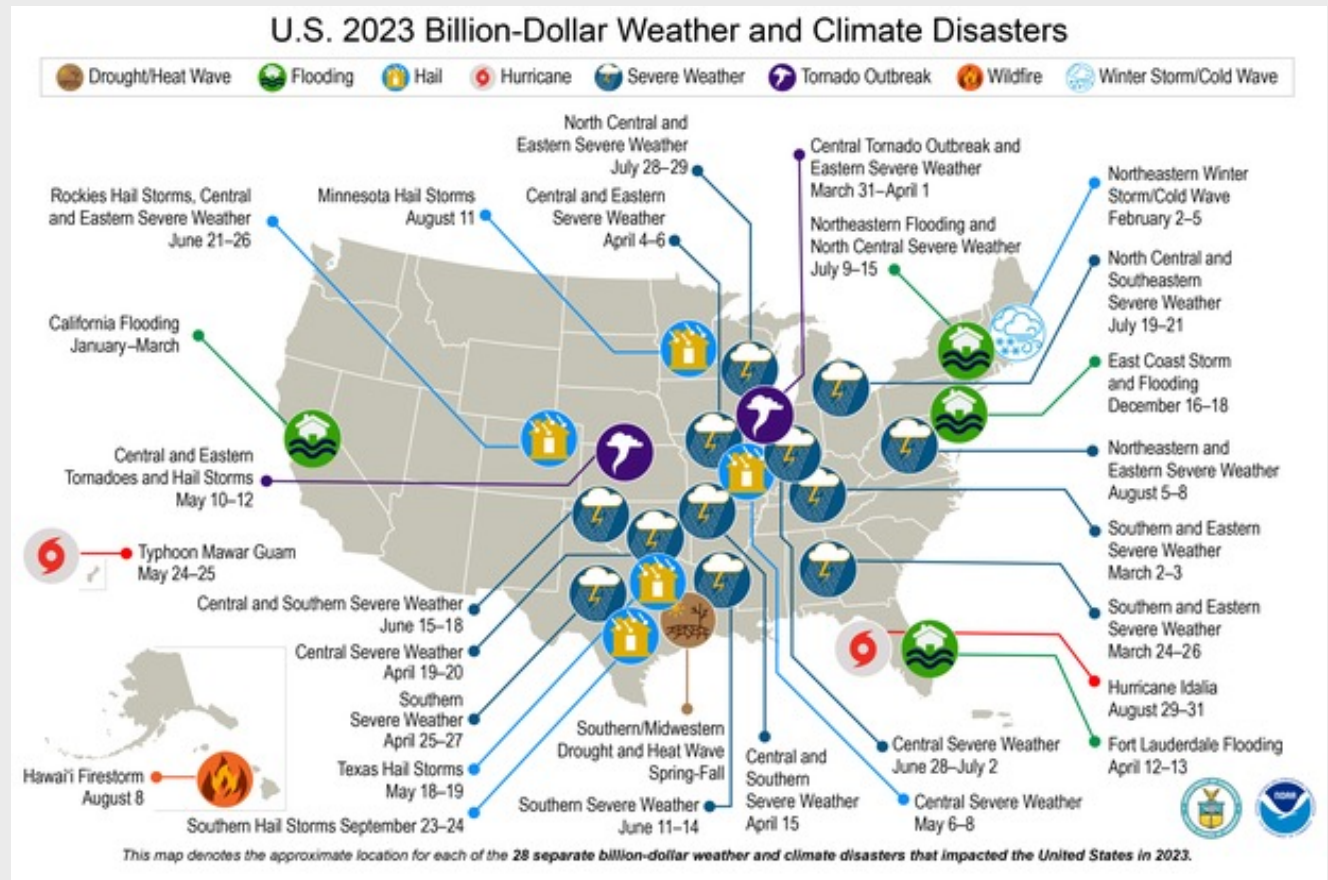
2023 significant economic loss events

USD 93 billion
disaster losses in
2023

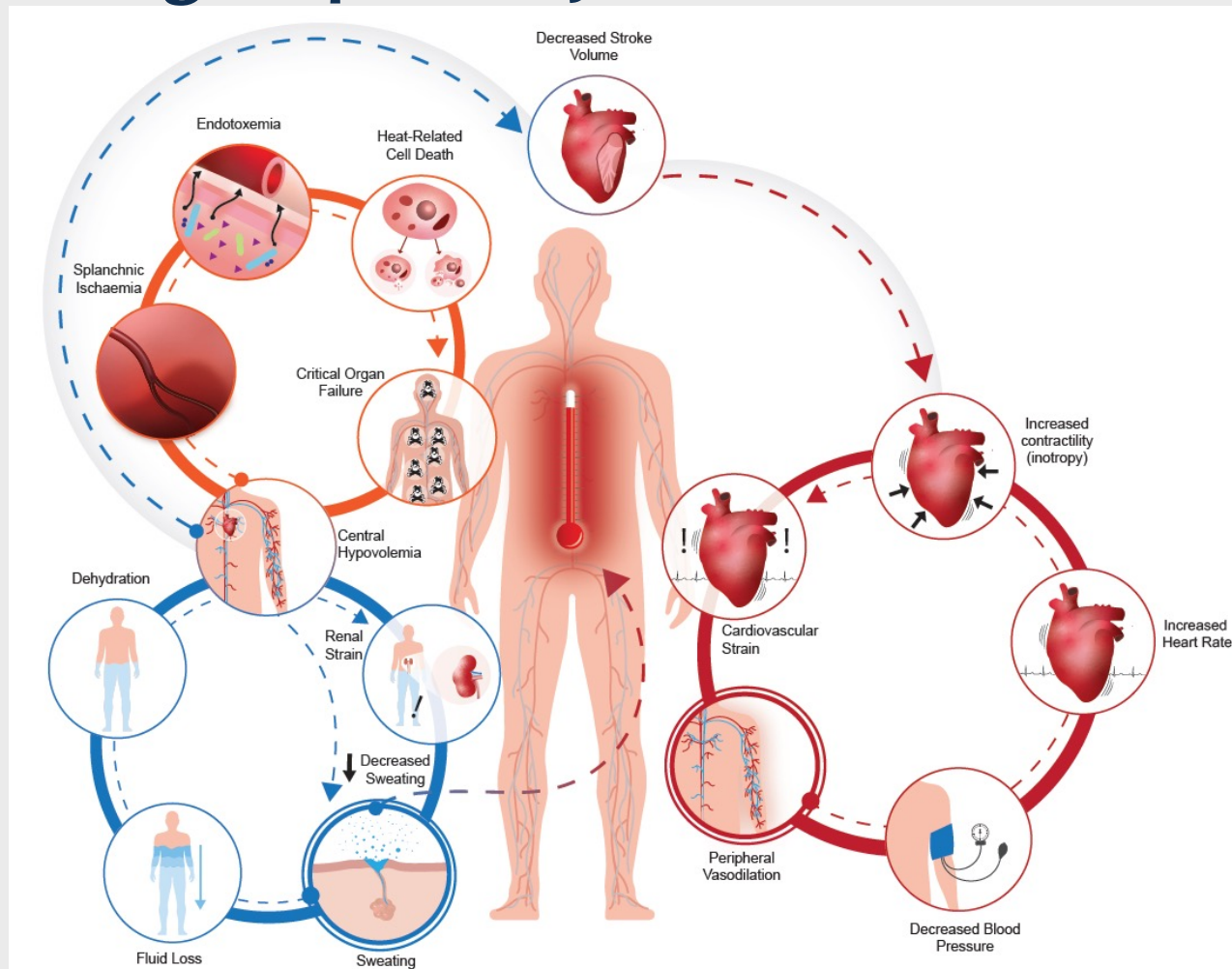
28 separate events

*492 direct or
indirect fatalities*

*>47,000 died in
heatwaves in Europe*



Physiological pathways of human health strain

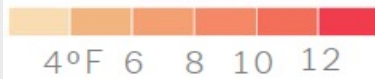


Exposure of vulnerable populations to heatwaves

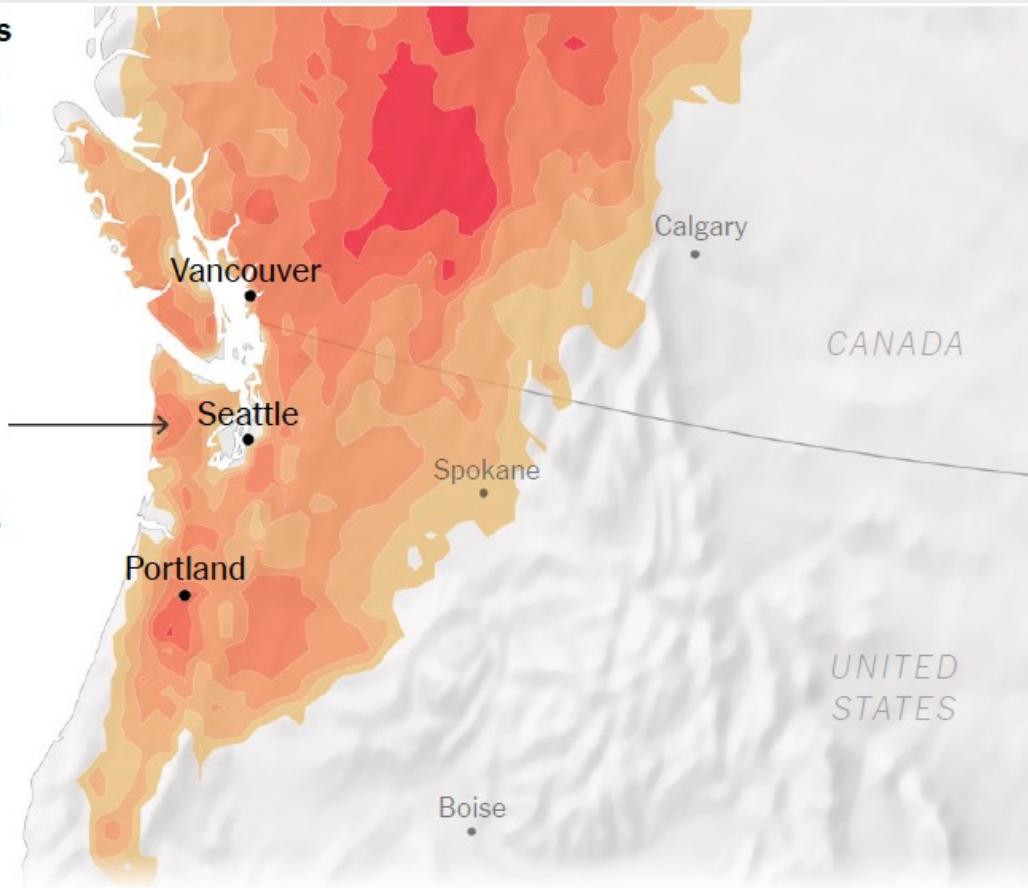
- In 2013-2022, infants (children younger than 1) and people older than 65 years experienced, on average 108% more heatwave days than compared with 1986-2005
- Compared with 1986-2005, the number of heatwave days increased 94% globally
 - For infants, an increase of 4.4 days per year on average
 - For adults over 65 years, an increase of 4.8 days per year on average
- Combined with demographic changes, total person-days of exposure increased 134% for infants and 228% for older adults

<https://www.worldweatherattribution.org>

By how much the record was broken in June compared to the highest temperatures in 1950-2020



This year's historic heat wave in the Pacific Northwest broke previous records by more than 10 degrees.



Source: ERA5 reanalysis (Copernicus/ECMWF) by Geert Jan van Oldenborgh.

Sustainable and accessible ways to keep cool

Mitigating climate change is vital, but inevitable rising temperatures means that identifying sustainable cooling strategies is also important. Strategies at the individual scale that focus on cooling the person instead of the surrounding air can be effectively adopted, even in low-resource settings.



Electric fans

- + Can provide effective cooling for young healthy adults up to 42°C in 50% humidity
- Effectiveness is reduced with low humidity, and in older adults (>65 years), unless accompanied by self-dousing
- Increases dehydration, but can be offset by drinking an extra glass of water per h



Self-dousing

- + Can reduce heat strain and dehydration up to 47°C if dousing is sufficient to keep the skin wet
- + Can be used during power outages
- Low compatibility with high clothing coverage



Foot immersion*

- + Can reduce dehydration and thermal discomfort in hot and humid conditions
- + Can be used during power outages
- Risk of slips and falls

* Feet immersed above the ankles in 20°C water



Wet clothing

- + Provides high evaporative heat loss without needing to sweat
- + Can be used during power outages
- Clothing must be re-soaked roughly every 60 min



Electric fans can be used below these temperatures irrespective of humidity:

39°C

Healthy young adults (aged 18 to 40 years)

38°C

Healthy adults (aged over 65)

37°C

Over 65s taking anti-cholinergic medication



Evaporative coolers

- + Can cool air temperatures in dry conditions
- Minimal effect in high humidity
- Risks creating mosquito breeding sites without proper maintenance



Misting fans

- + Lowers air temperatures in hot and dry conditions
- Must be used in well ventilated or outdoor areas otherwise humidity increases offset any benefit
- Risk of slips and falls



Ice towels*

- + Can reduce core temperature and cardiovascular strain in conditions up to 45°C
- Requires access to ice
- Labour-intensive to prepare

* Crushed ice wrapped in a damp towel applied to the neck and chest



Cold water ingestion

- + Can provide internal cooling
- + Water should be ingested at a temperature that is most palatable (~10°C) to ensure optimal hydration
- If person has already started sweating, not effective at lowering core temperature

Read the full paper: Jay O, Capon A, Berry P, et al. Reducing the health effects of hot weather and heat extremes: from personal cooling strategies to green cities. *The Lancet* 2021. Published online August 19

Sustainable cooling strategies to protect health in heat-vulnerable settings

Heat extremes and hot weather are harming health. While mitigating climate change is vital, the inevitable rise in global temperature is expected to exacerbate these harms in future, and identifying opportunities for applying sustainable cooling strategies in heat-vulnerable settings is also important

	Aged care homes	Workplaces	Schools	Playing sports	Mass gatherings	Refugee camps	Slums
Individual-level strategies							
Electric fans	● ¹	●	●				
Self-dousing	●	●	●	●	●	● ²	● ²
Foot immersion	●						● ²
Drinking cold water ³	●	●	●	●	●		
Optimising clothing	●	● ³	●	● ⁴	●	●	●
Evaporative coolers	●	●	●				
Ice towels	●			●			
Wet clothing	●			●		●	

1-to be used up to 38°C; 2-if water sanitation allows; 3=at a temperature that is most palatable (eg, ~10°C); 4=without compromising any required protective equipment

Building-level and urban-level strategies

Adequate natural ventilation	●	●	●	●		●	●
Improved construction materials	● ⁵	●	●	● ⁶		● ⁷	● ⁸
Outdoor misting fans				●	●		
Rooftop sprinklers	●	●	●				
Shaded areas	●	●	●	●	●	●	●

5=heat-reflective window glass; 6=playing surfaces that minimise heat retention and emitted radiation; 7=breathable tents; 8=insulating roofs and walls

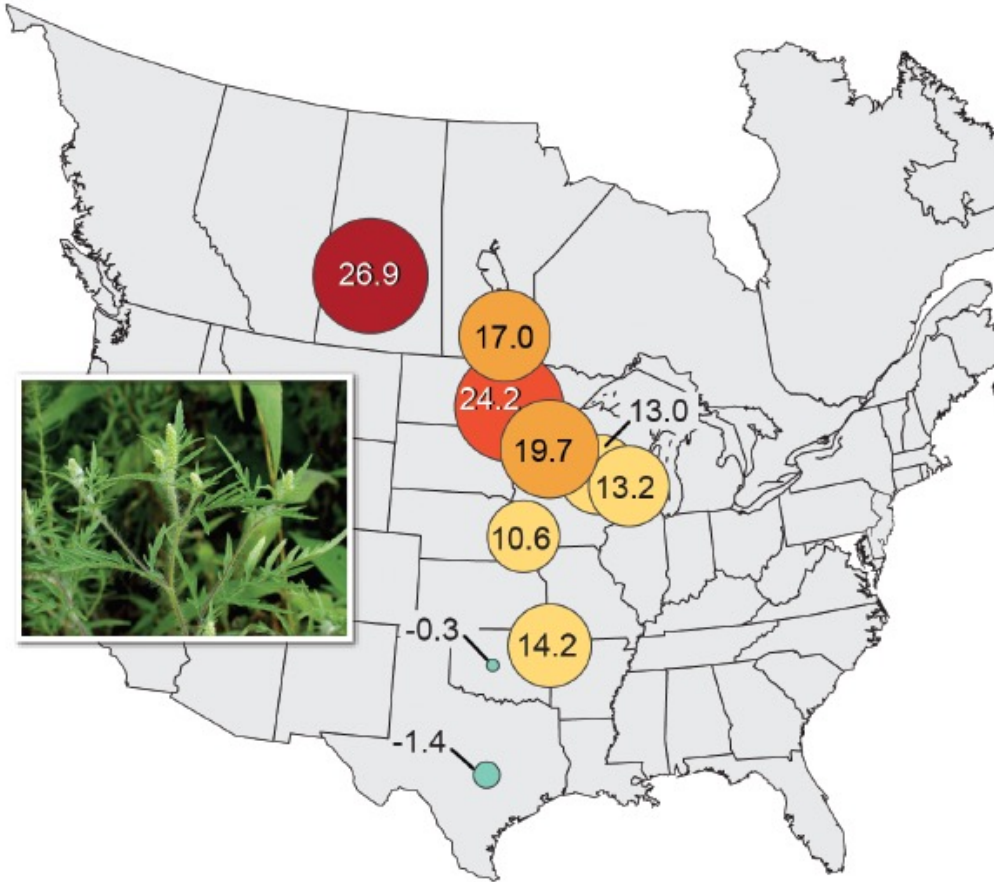
Other strategies

Extra physical activity breaks		●		●			
Hydration monitoring	●	●					

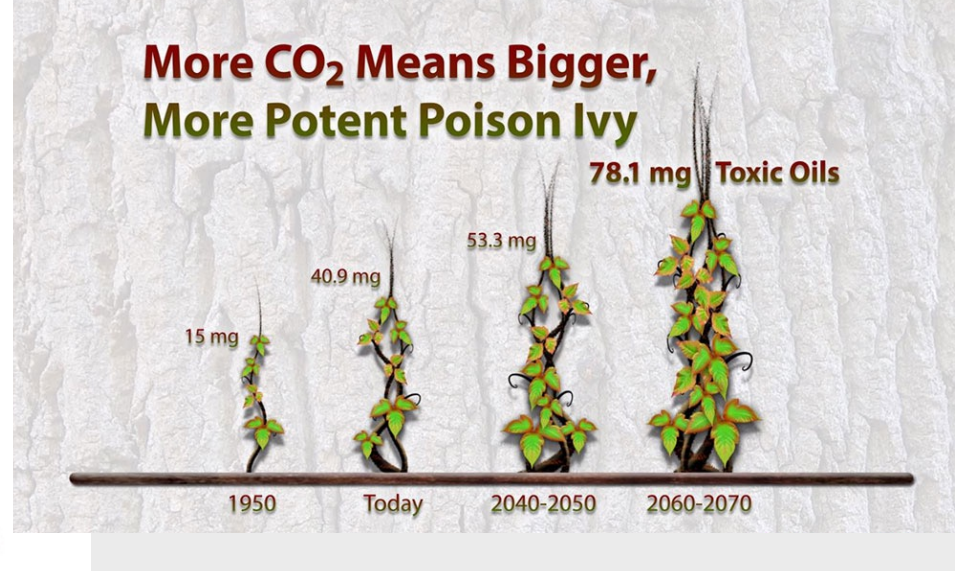
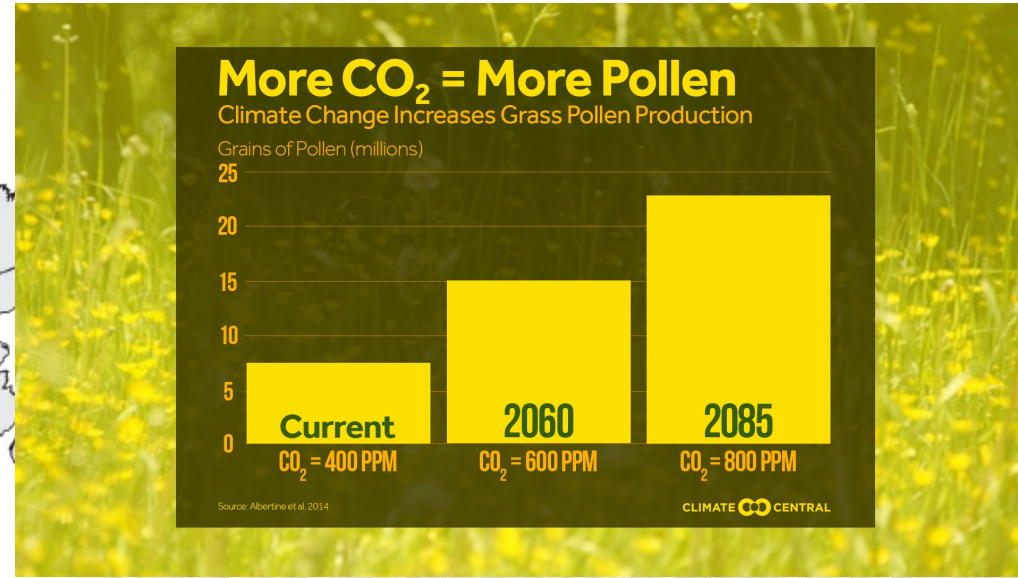
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Jay et al. 2021

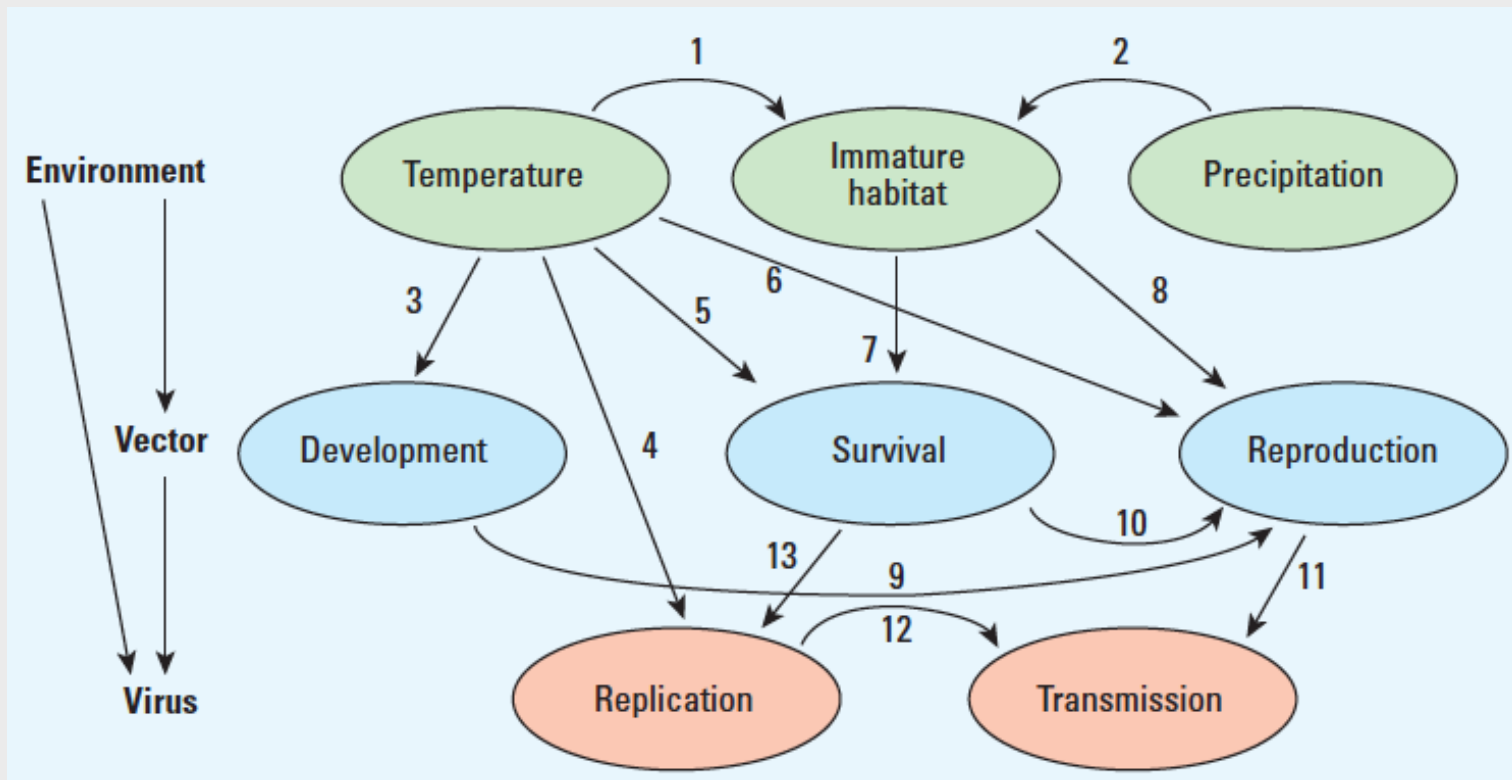
Ragweed Pollen Season Lengthens



Change in Ragweed Season Length (Days)

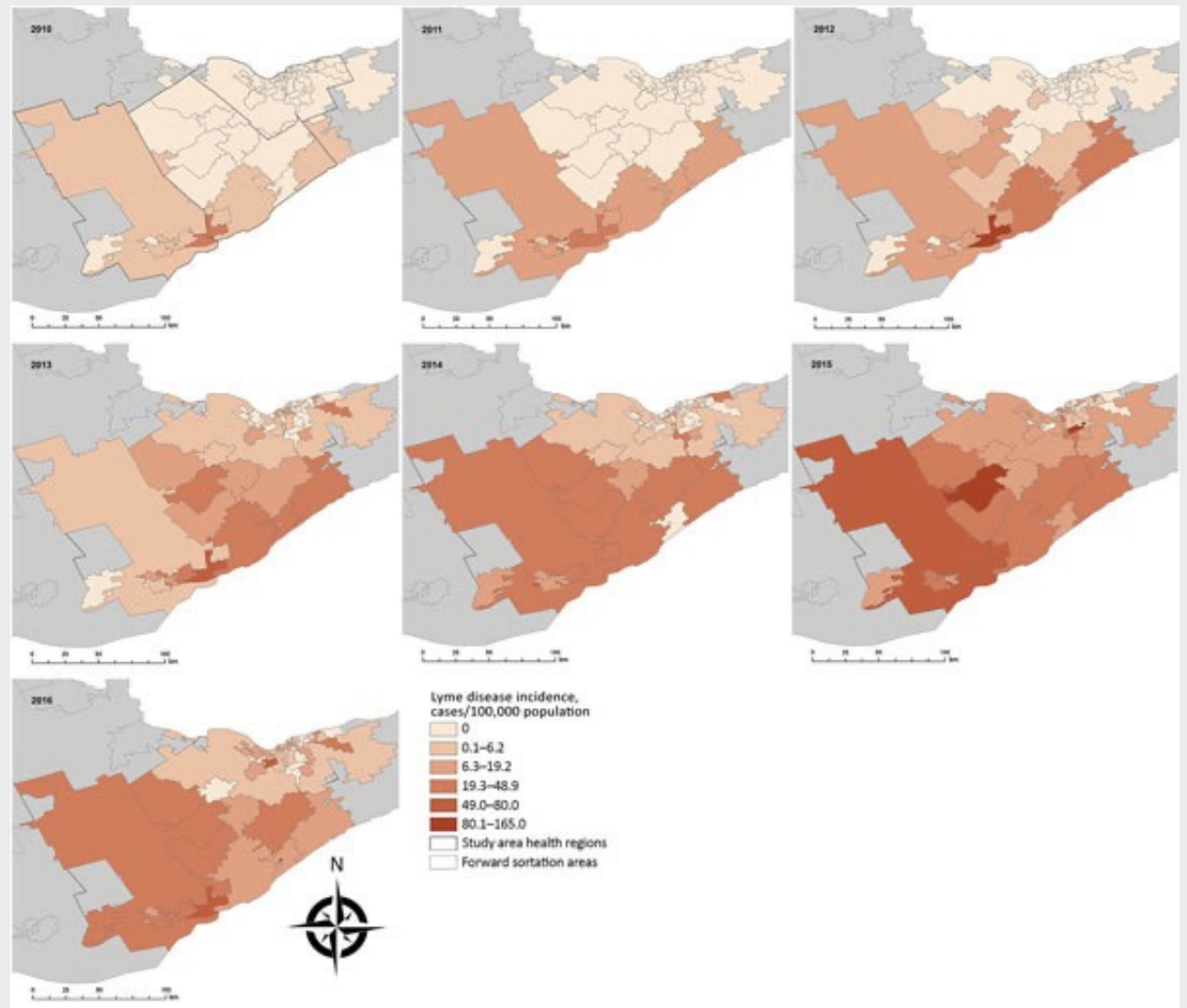


Biophysical influences on dengue ecology showing the interactions between climate variables, vectors, and the virus



Spatiotemporal spread of human Lyme disease incidence, 2010-2016, three public health units in Eastern Ontario

Kulkarni et al. 2019

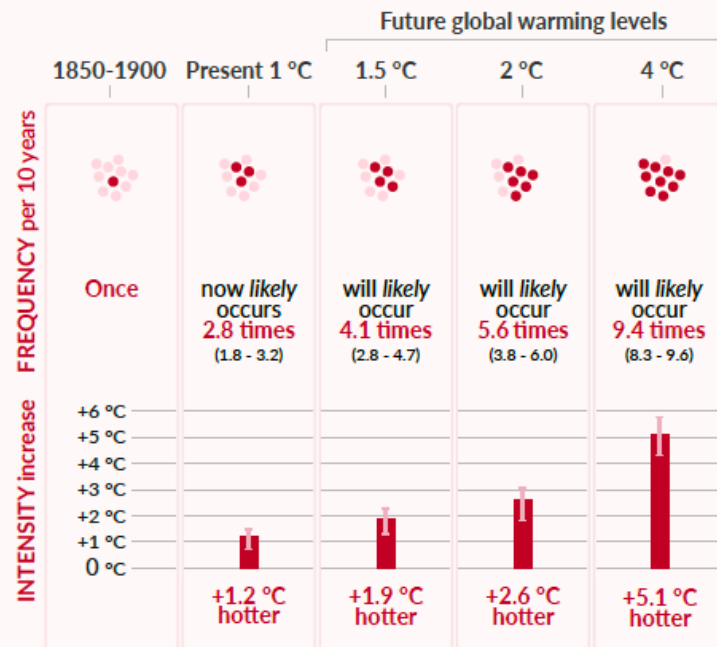


Projected changes in extremes are larger in frequency and intensity with every additional increment of global warming

Hot temperature extremes over land

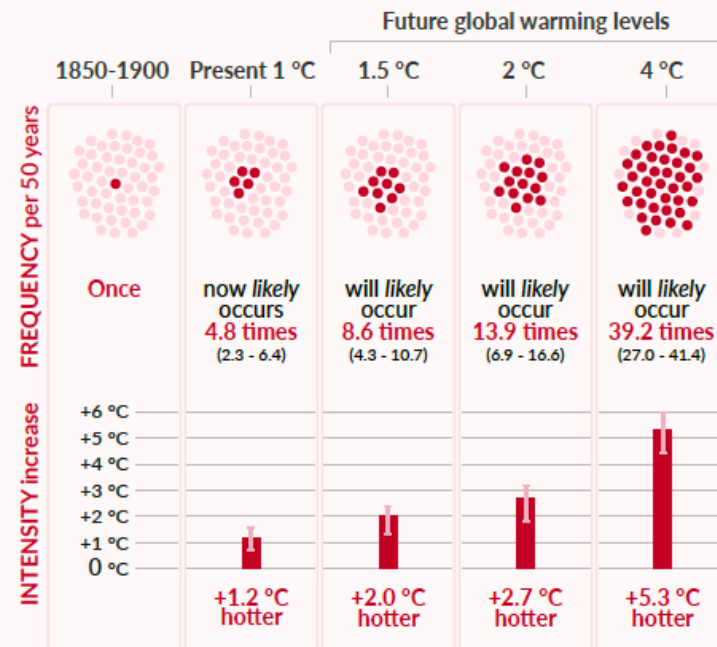
10-year event

Frequency and increase in intensity of extreme temperature event that occurred once in 10 years on average in a climate without human influence



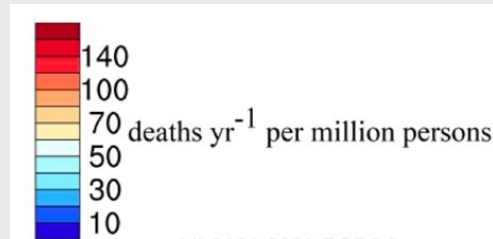
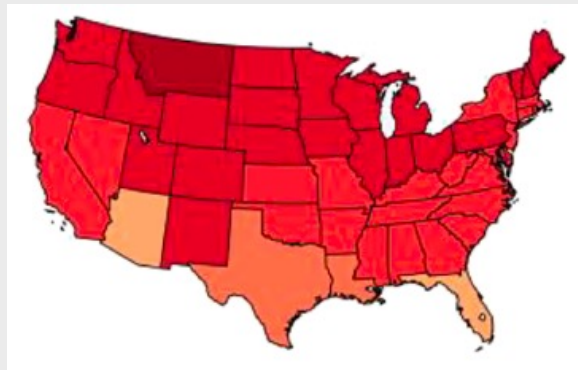
50-year event

Frequency and increase in intensity of extreme temperature event that occurred once in 50 years on average in a climate without human influence



Projected annual heat-related deaths in 2091-2099

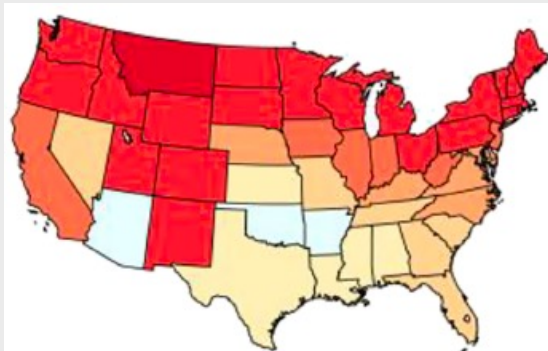
No adaptation; high emissions



No adaptation; low emissions



Adaptation; high emissions



Adaptation; low emissions

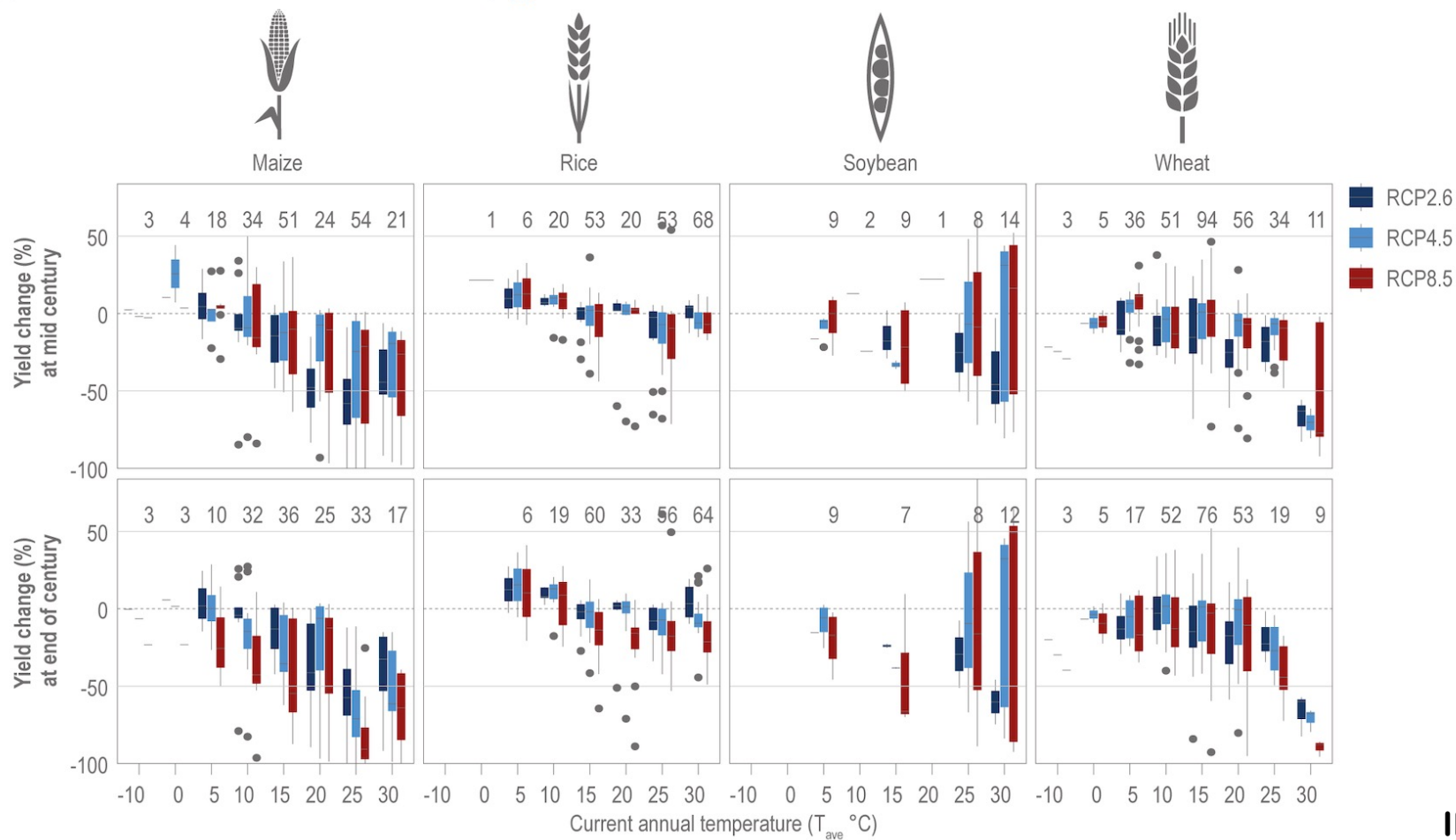


Shindell et al. 2020

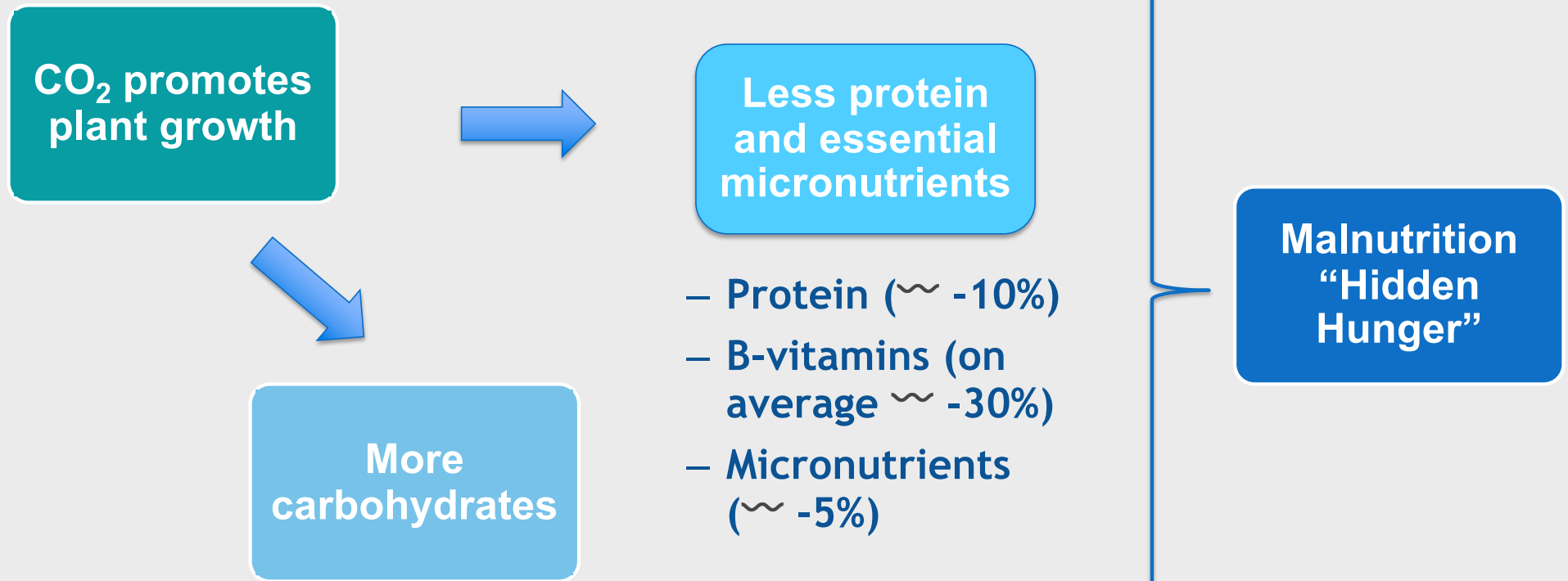
Projected yield changes relative to the baseline period (2001–2010) without adaptation and with CO₂ fertilization effects

(a) As a function of current annual temperature (T_{ave})

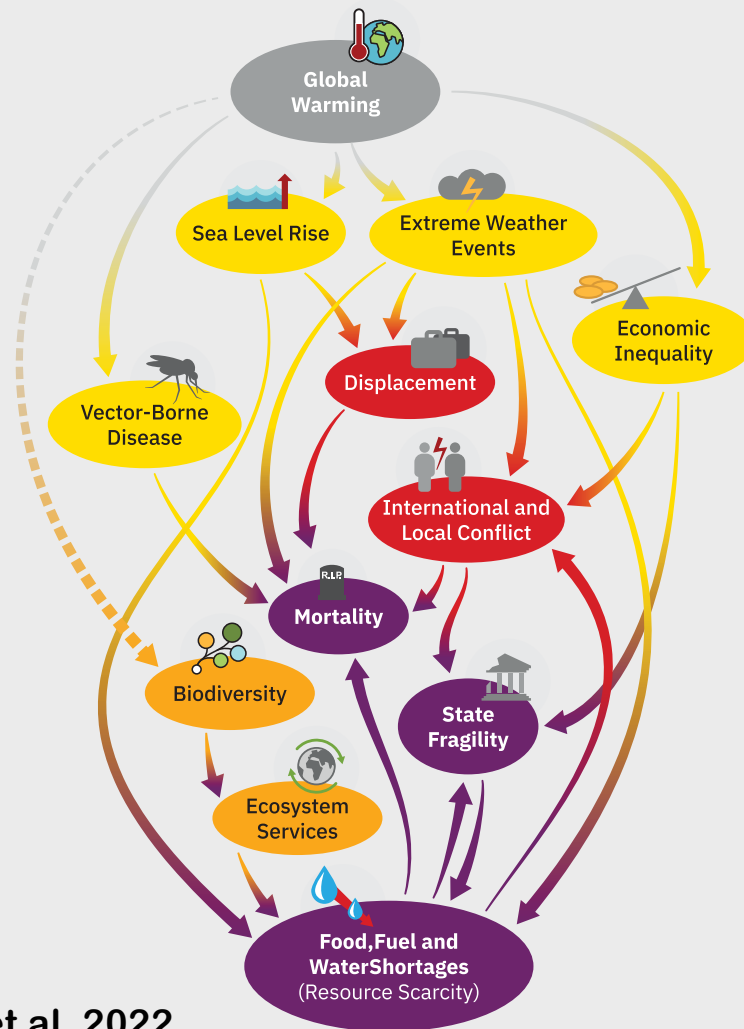
Numbers are the number of simulations



Higher CO₂ concentrations alter the nutritional quality of C₃ plants



Cascading global climate failures



Kemp et al. 2022

Semenza et al. 2022

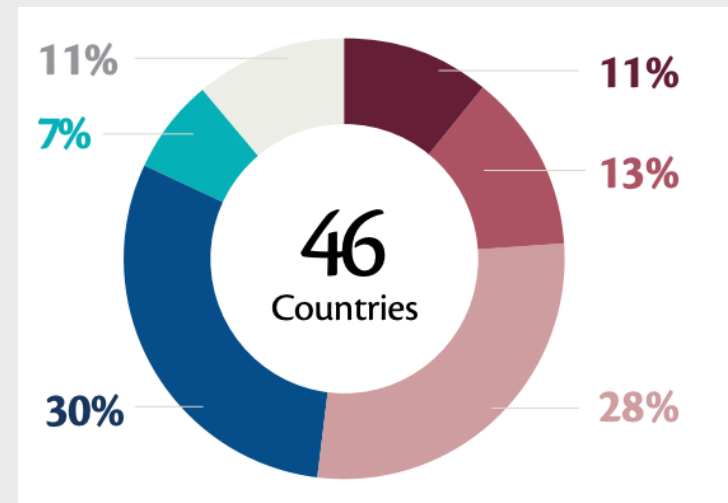
- Extreme temperatures, droughts leading to crop failures and undernutrition increasing vulnerability to infectious diseases
- Floods, storms, and droughts leading to displacement increasing infectious disease outbreaks, including dengue and leishmaniasis

Effective adaptation options include

- **Strengthening the resiliency of health systems**
 - **Protect against exposure to climate hazards, particularly for those at highest risk**
 - **Heat Action Plans that include early warning and response systems**
 - **Improve access to potable water, reducing exposure of water and sanitation systems to flooding and extreme weather and climate events, and improving early warning systems**
 - **For mental health, improve surveillance, access to mental health care, and monitoring of psychosocial impacts from extreme weather and climate events**
 - **Integrated adaptation approaches that mainstream health into food, livelihoods, social protection, infrastructure, water and sanitation policies**
- ** Major constraint is limited investment**

National health and climate change strategies

- In 2021, 49 of 95 countries reported having a national health and climate change strategies or plans in place
 - 48 had completed a V&A
 - Of which, 18 reported that the findings strongly influenced health policy
 - Only 9 reported that the findings strongly influenced resource allocation
 - Implementation remains a challenge, as well as equity issues – e.g., inclusion of gender considerations is limited



- Very high (action is being taken on most or all of the plan/strategy priorities)
- High (action is being taken on a majority of the plan/strategy priorities)
- Moderate (action is being taken on some of the plan/strategy priorities)
- Low (limited action is being taken on the plan/strategy priorities)
- None (no action is currently being taken on the plan/strategy priorities)
- Unknown

Co-benefits – early health gains from wise climate moves

Shifting 5% of short urban car trips to bicycles in New Zealand would save annually

- 22 million liters of fuel
- 116 deaths due to increased physical activity (vs. 5 extra road crash deaths)
- \$200 million in health costs



ANZJPH 2011



Mental Health Impacts of Climate Change: An Overview

Susan Clayton

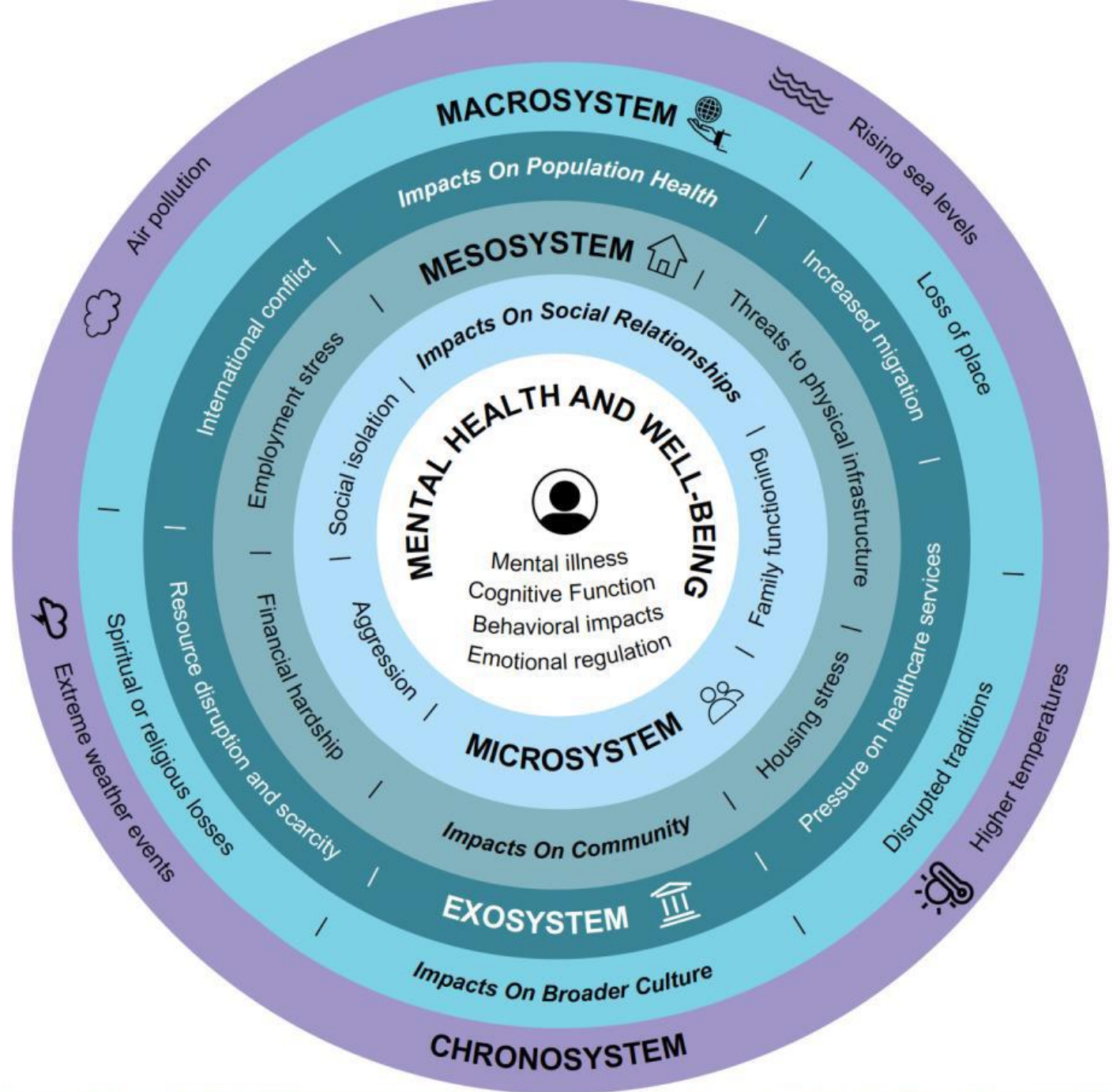
Presentation for the Northwest Mental Health Technology Transfer Center

29 August 2024



THE COLLEGE OF
WOOSTER

How does climate change affect mental health?



Thinking broadly about climate change

- Acute events
 - Storms, wildfires, floods
- Chronic changes
 - Increased heat, rising sea levels, changing patterns of precipitation, loss of biodiversity, impaired air quality
- Indirect impacts
 - Displacement, threats to physical health, threats to economic wellbeing
- Impacts of perceptions
 - Existential anxiety about an uncertain future





Acute impacts: extreme weather events

- PTSD, depression, general anxiety
- Suicide
- Misuse of drugs and alcohol
- Sleep disorders
- Domestic and interpersonal violence

E.g., 2017's Hurricane Maria in Puerto Rico

More than 1/5th needed mental
health services

13% increased use of medication
for emotional problems

Suicide increased by 18%

The rate of PTSD doubled



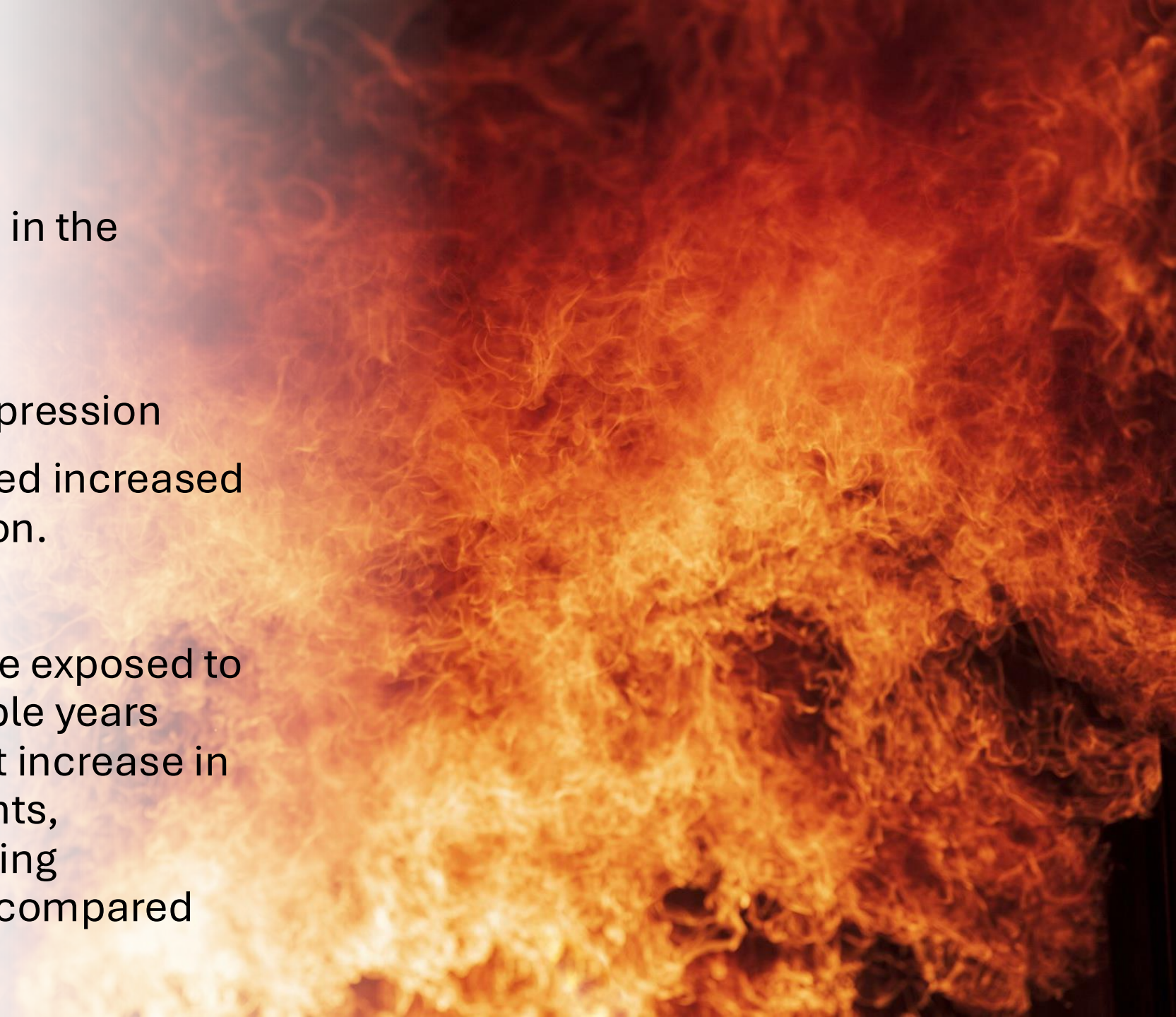
Impacts of wildfire

Among those directly exposed in the California Camp fire of 2018:

- 3x rate of PTSD
- 1.5-2x rate of anxiety and depression

Indirect exposure also predicted increased levels of anxiety and depression.

A study of over 7 million people exposed to California wildfires over multiple years found a statistically significant increase in prescriptions of antidepressants, anxiolytics, and mood-stabilizing medications in the fire period compared with the prefire baseline.



Impacts can last.

One year after the 2016 Alberta wildfire:

- 15% probable PTSD
 - 15% depression
 - 15% anxiety
 - 8% substance misuse
 - 38% mental health problems overall
-
- Significantly elevated over baseline

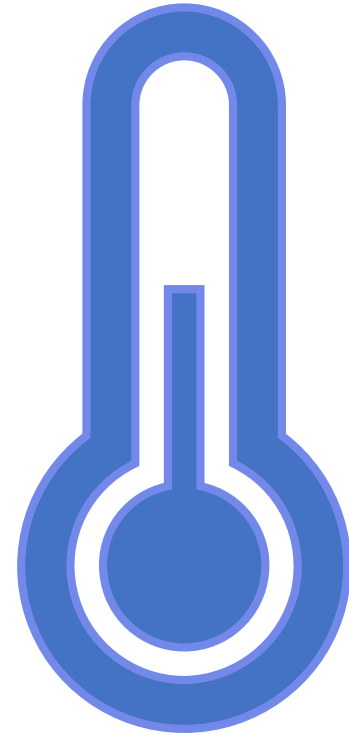
Chronic changes and mental health

Higher temperatures associated with

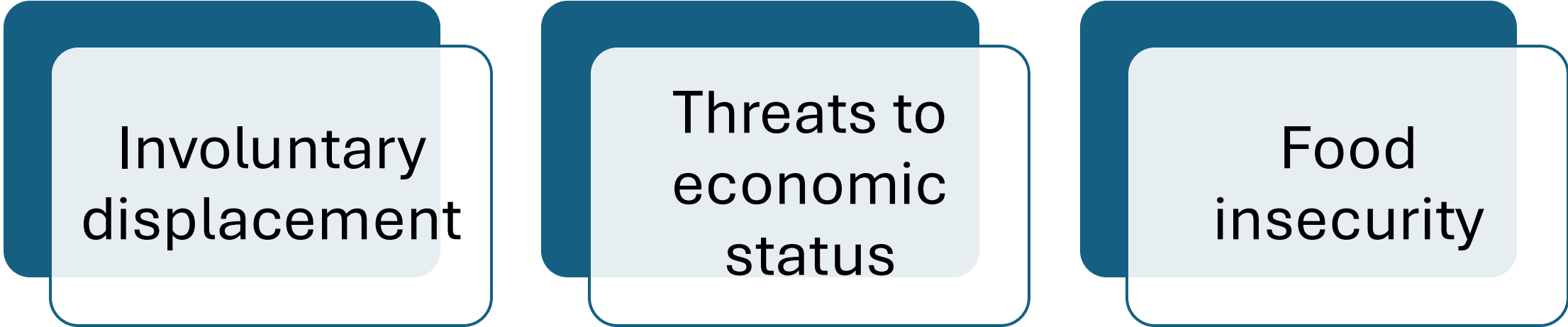
- Increases in suicide
- Increases in psychiatric hospitalization
- Increases in aggression
- Decreases in happiness and positive mood
- Impact on physical and mental functioning

Air pollution: fine ambient particles (PM2.5) linked to

- Cognitive decline
- Neurodegenerative diseases such as Alzheimer's and Parkinson's



Indirect impacts of climate change



Involuntary
displacement

Threats to
economic
status

Food
insecurity

+

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○

Impacts of migration

- Refugees experience stressors over the pre-flight, flight, and exile periods.
- Immigrants are at increased risk of psychosis
- This is true even among second-generation immigrants.

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Impacts of economic insecurity

- Those with the lowest incomes are 1.5 to 3 times more likely than the rich to experience depression and anxiety
- Causality can be inferred from the impacts of a loss of income (from, e.g., bad harvest or job loss) and of antipoverty programs that provide financial support.
- Poverty experienced in childhood or in utero increases risk to cognitive development and adult mental illness

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Impacts of food insecurity

- Food insecurity is associated with worse mental health worldwide, independent of SES.
- Food insecurity among children is associated with higher lifetime rates of depressive symptoms.
- Food insecurity is related to lower positive wellbeing and lower life satisfaction even after controlling for household income and country differences.

Vicarious awareness

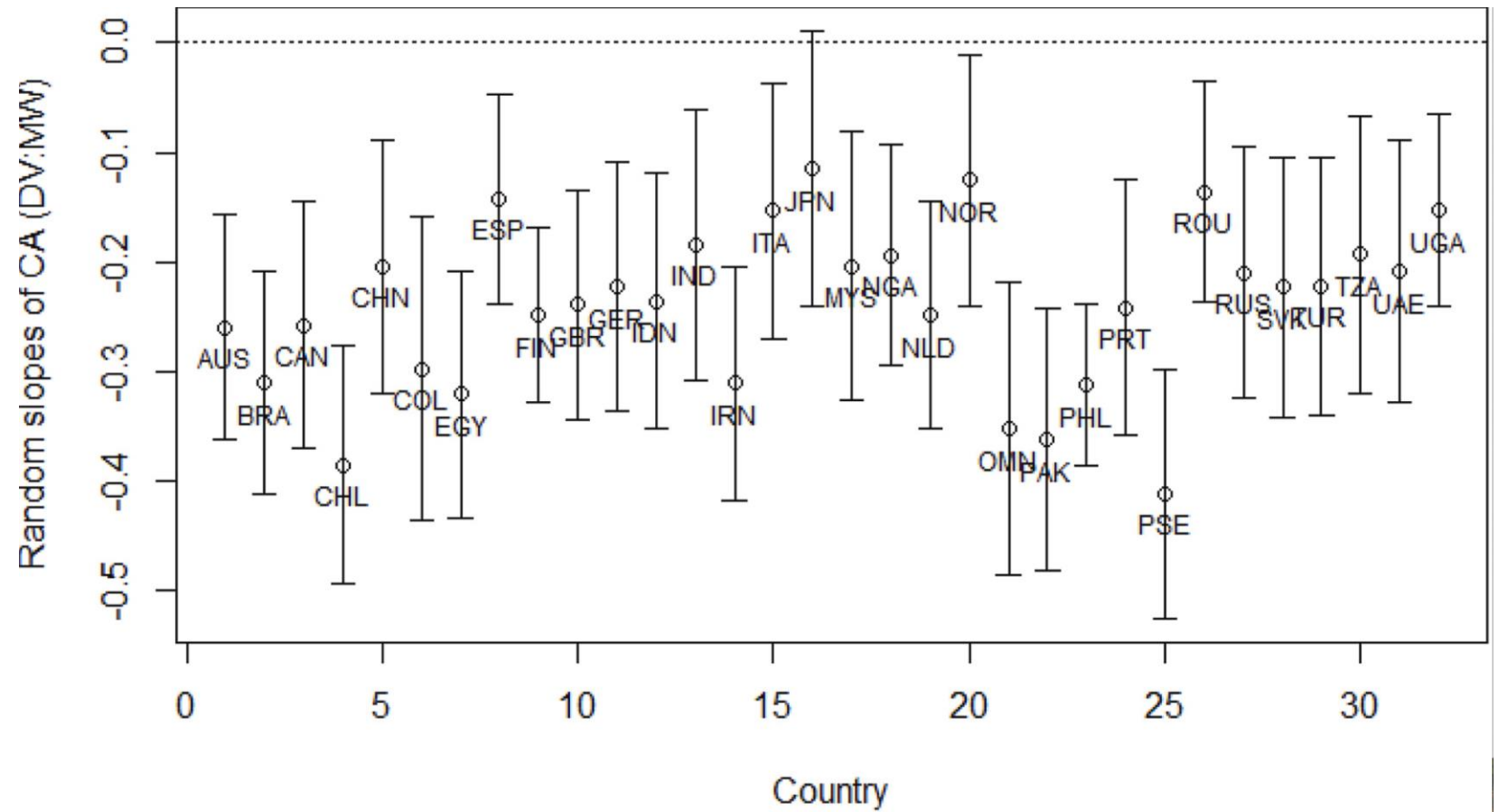
“my feelings had almost a physical manifestation – I felt stress, panic”

“I was depressed and disempowered... I stopped eating properly”

“I would get to the stage where I would freeze”

Climate anxiety and mental health

- About 20% of people reported functional impairment due to climate anxiety in US studies
- Climate anxiety is associated with standard clinical measures of anxiety and depression
- There is a negative relationship with WHO-5 wellbeing index



Thinking broadly about mental health

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Climate change also impacts cognitive functioning

- Heat interferes with learning and cognitive performance.
- Prenatal stress from heat or extreme weather increases preterm birth, which is associated with cognitive deficits.

Social relationships are also part of health and wellbeing

Individual behaviors and decision-making can be impaired by stressors and anxiety

+

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Perceptions of climate change may affect behavior

Planning for the future in a sample of 15,000 U.S. youth:

- 69% said “climate change will influence where I choose to live”
- 64% said “climate change will influence my plans for the future”
- 60% said “I question whether the work I put into my education will matter”
- 58% said “I question whether the work I put into my career, job, or vocation will matter”
- 52% said “I’m hesitant to have children”

Negative effects are not inevitable.

- Mitigation: behavior, technology, and policy changes that reduce the emissions of CO₂ and/or increase uptake of emissions
 - Communicate risks to public health
 - Develop evidence-based interventions for behavior change
- Adaptation: Strategies to reduce mental health risks
 - universal access to mental health care
 - mental health training and responses integrated into pre- and post-extreme event responses
 - culturally-appropriate, climate-specific and place-specific mental health resources, including nature-based therapy
 - attention to impacts on diverse communities

Promoting resilience



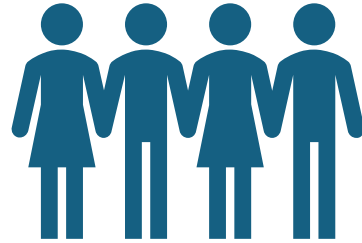
Individual mental health:

Emotion-focused coping

Problem-focused coping

Meaning-focused coping

Promoting resilience



Collective well-being:

Social support

Education

Policies that fund mental health care

The mental health field can prepare

1

Provide professional training on the impacts of climate change

2

Educate the public

3

Advocate for better mental health funding

4

Advocate for mitigation

5

Research and implement evidence-based interventions

6

Examine and acknowledge their own experiences and emotions

7

Adopt sustainable clinical practices



Climate Change &
MENTAL HEALTH



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August

2024

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“The scientific *evidence is unequivocal*: climate change is a threat to human well-being and the health of the planet. Any further delay in concerted global action will miss the brief, rapidly closing window to secure a liveable future.”



Global warming
has caused
*dangerous and
widespread*
disruption in
nature...

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An aerial photograph showing a multi-lane road completely submerged in floodwater. The surrounding area, including trees and buildings, is also inundated. The sky is overcast and grey.

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INTERGOVERNMENTAL PANEL ON climate change



... and climate change is affecting the lives of *billions of people*, despite efforts to adapt.

A line of women in a field, some holding mugs, engaged in agricultural work. The women are wearing colorful headwraps and traditional clothing. They are standing in a line, leaning forward, and holding small mugs. The background shows a line of trees under a cloudy sky.

Climate change has
already impacted the
health of

*millions of
people*

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3.3 – 3.6 billion people live
in hotspots of
high vulnerability
to climate change.

Those reliant on
the environment
for subsistence
and livelihoods

Underlying
physical or
mental health
challenges

Those facing
socioeconomic
inequities and
marginalisation

Vary by gender,
age, occupation,
and other
characteristics

Two *examples* from Canada

Wildfires
in Alberta



Ecoanxiety in
the Arctic



Wildfires impact our *Health*

ipcc

INTERGOVERNMENTAL PANEL ON climate change



WMO



UNEP

Wildfire smoke can be *deadly*

In Canada:

- Short term smoke exposure: 54–240 deaths per year
- Long term exposure: 570–2500 deaths per year
- Plus non-fatal cardiorespiratory health outcomes

Matz, et al. "Health impact analysis of PM_{2.5} from wildfire smoke in Canada (2013–2015, 2017–2018)." Science of The Total Environment 725 (2020): 138506

How much does this *Cost?*

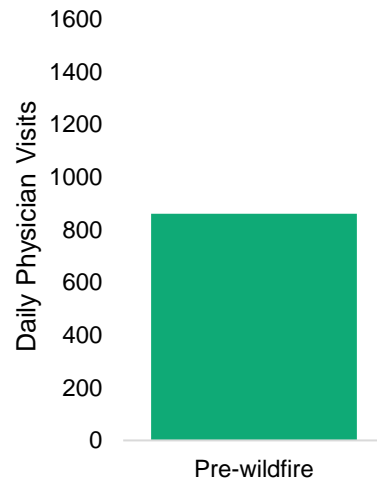
In Canada:

- Acute health impacts: \$410M–\$1.8B per year
- Chronic health impacts: \$4.3B–\$19B per year
- Largest economic impacts in BC and Alberta
- Most expensive Canadian disasters?

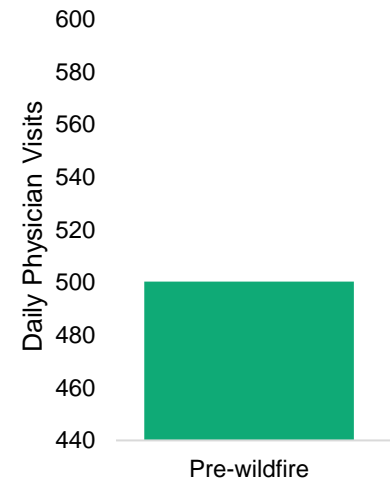
Matz, et al. "Health impact analysis of PM_{2.5} from wildfire smoke in Canada (2013–2015, 2017–2018)." Science of The Total Environment 725 (2020): 138506

What does this look like in *Alberta?*

All-cause respiratory



All-cause cardiovascular



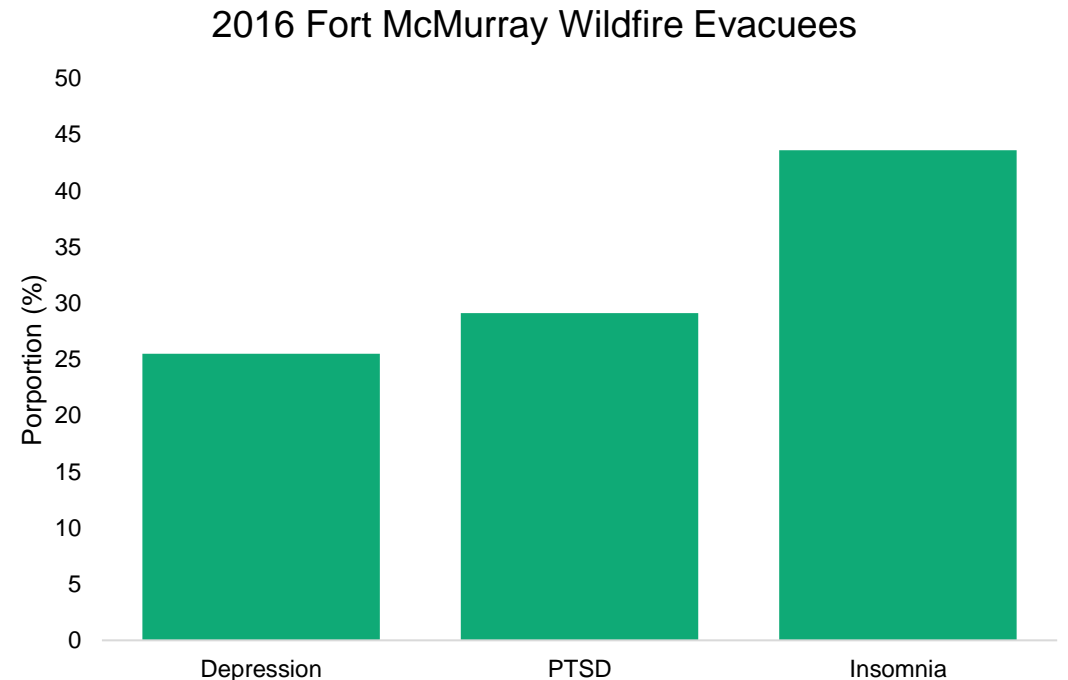
Mahsin et al, (2022). Respiratory and cardiovascular condition-related physician visits associated with wildfire smoke exposure in Calgary, Canada, in 2015, International Journal of Epidemiology, 51(1): 166–178

Diverse and serious *mental health* impacts

**2016 Fort McMurray
wildfire**

**88,000 people abruptly
evacuated**

**Attributed to climate
change**



Mental health impacts for our kids

Increased tobacco use (10% → 13%)

Increased suicidal thinking (4% → 16%)

Increased moderately severe depression (9% → 17%)

27% probable anxiety

probable alcohol or substance use disorder (15%)

37% probable PTSD

31% probable depression

Lower self-esteem and quality of life scores

46% of students met criteria for one or more probable diagnosis of PTSD, depression, anxiety, or alcohol/substance abuse, whether or not they were present at the fire

Brown et al. (2019). Significant PTSD and other mental health effects present 18 months after the Fort McMurray wildfire. *Frontiers in Psychiatry*.10.

Brown et al. (2019). After the Fort McMurray wildfire there are significant increases in mental health symptoms in grade 7-12 students compared to controls. *BMC Psychiatry*. 2019;19(1).

Mental health impacts for our kids

Greater impact from fires

= greater adverse mental health impacts

1.5, 2.5, and 3.5 years after the wildfire

= mental health worsened

Brown et al. (2019). Significant PTSD and other mental health effects present 18 months after the Fort McMurray wildfire. *Frontiers in Psychiatry*.10.

Brown et al. (2019). After the Fort McMurray wildfire there are significant increases in mental health symptoms in grade 7-12 students compared to controls. *BMC Psychiatry*. 2019;19(1).

Brown et al. (2021). Mental health symptoms unexpectedly increased in students aged 11–19 years during the 3.5 years after the 2016 Fort McMurray wildfire. *Frontiers in Psychiatry*, 12.

Two *examples* from Canada

Wildfires
in Alberta



Ecoanxiety in
the Arctic



ARCTIC CONTEXT

*“The ice is no longer predictable, it is not stable, **people don’t trust it**”*

*“...**accidental death** through changes in ice conditions and weather conditions”*

*“**people are jeopardizing their lives** going out on unstable elements”*



David Borish

Complex *mental health* responses

Loss of cultural continuity, disruptions to intergenerational knowledge transfer

Loss of place-based identities and connections (i.e., solastalgia)

Emotional reactions
(e.g., sadness, fear, anger, distress and anxiety)

Mental health outcomes
(e.g., depression, post-traumatic stress disorder and generalised anxiety)

Experiences with grief and loss
(i.e., ecological grief)

Drug/alcohol use, family stress, domestic violence, suicide ideation

Two *examples* from Canada

Wildfires
in Alberta



Ecoanxiety in
the Arctic



Adaptation *Examples*

Within the health sector:

- Heat plans
- Early warning systems
- Mental health services in emergency response

Outside of the health sector:

- Improved food security
- Green spaces
- Climate cafes

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WMO



UNEP

Effectiveness of many mental health treatments are understood; but, there is limited evidence evaluating these interventions within the context of climate change



Mental health risks
are becoming more
complex and,
therefore, *more
challenging to
manage.*

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thanks!

ANY QUESTIONS?

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