

WHY IS COP28 SUMMIT FOCUSING ON HEALTH?

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December 03, 2023 04:01 am | Updated 04:01 am IST

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123 governments endorsed the COP28 Declaration on Climate and Health on December 2, 2023. Photo: X/@DrTedros

The story so far: On December 3, for the first time in 28 years of climate change negotiations, the climate-health nexus will take centre stage at the [United Nations Conference of Parties \(COP28\) summit](#) in the UAE. [Unabated greenhouse gas emissions](#) are triggering extreme weather events, air pollution, food insecurity, water scarcity and population displacement, which in turn, are altering the trajectory of vector-borne diseases. And Africa, Asia, South and Central America, and small island states, which have contributed the least to climate change, are bearing the brunt. Addressing these issues, on December 2, 123 governments endorsed the [COP28 Declaration on Climate and Health](#).

The 'groundbreaking [Health Day at COP28](#)', as COP28 president Sultan Ahmed Al Jaber put it, is expected to pose two questions: how public health can become resilient to climate change, and who will finance this transformation. India also highlighted the intricate link between climate change and public health during the health talks held under its G-20 presidency this year. In September, Dr. Al Jaber spoke in the backdrop of the New York Climate Week: "The connection between health and climate change is evident, yet it has not been a specific focus of the COP process — until now. This must change." Health is not a stranger to climate change talks. The United Nations Framework Convention on Climate Change (UNFCCC) recognises the health impacts of climate change. "Health events have been held at COP for several years, including at the WHO Health Pavilion, but this is the first time there has been an official 'Health Day'," says Jess Beagley, policy lead at the Global Climate and Health Alliance (GCHA). This is also the first time there will be a health inter-ministerial meeting, with ministers of health, environment, finance and other types of ministries joining in. While the Declaration text is final, the health ministers will be able to add supplementary comments during the meeting.

However, a "Health Day in itself doesn't necessarily mean that health will be reflected in the negotiations," said Dr. Jeni Miller, executive director of GCHA. "One of the things we need to see to determine whether this is truly a 'Health COP' is whether the focus on health carries on to negotiations," she said.

The COP28 UAE Declaration on Climate and Health includes dialogue on mitigating emissions, health sector adaptation to climate change, mainstreaming of health into climate policies and the sticky question of climate financing for health.

The Declaration, however, doesn't mention fossil fuels. It recognises the need for climate mitigation, "strengthening research on the linkages between environmental and climatic factors and antimicrobial resistance"; and "intensifying efforts for the early detection of zoonotic spill-overs" to prevent future pandemics. It does not mention pollution-related harms or identify 'fossil fuels' — coal, oil and gas — as a driver of health threats, or emphasise the need to end fossil fuel dependence. Fossil fuels are seen as the largest contributor to global climate change.

British epidemiologist Sir Andy Haines at the briefing said that a commitment to phasing out fossil fuels and transitioning to renewable energy would be an important health outcome. "If we move from fossil fuels to renewable energy, for instance, we reduce preventable deaths of air pollution as well as reduce the risk of dangerous climate change."

Most G-20 countries, including wealthy industrialised nations responsible for the majority of historic greenhouse gas emissions, have failed to centre health in their climate action, as per a 2023 analysis by the GCHA. Low-and middle-income countries like Burundi and Congo were found to be better at engaging with health concerns in their Nationally Determined Contributions (NDCs). "This is likely to reflect the undeniable links between health and environment — and disease and climate change — which cannot be ignored in these countries whose populations are enduring the most severe health impacts of climate change," Ms. Beagley explained. Changing weather patterns and rising temperatures are altering the life cycle of vector-borne diseases such as dengue and malaria, which disproportionately impact poorer, marginalised groups (the spread of dengue has increased in India over the last two decades, research shows).

Then there is the matter of finance. Health crises triggered by warming climate are expected to chart a financial toll of around \$2-4 billion annually by 2030. Another estimate shows that 40% of climate-related poverty would be due to direct health impacts, as people's income, productivity and health costs would soar. Dr. Al Jaber had called on private financial institutions to plug this need and "contribute generously" to the Green Climate Fund. On December 2, the Green Climate Fund, the Asian Development Bank, the Global Fund and Rockefeller Foundation pledged a new \$1 billion finance pledge for climate and health. "This \$1 billion sum is a tremendous addition to current levels of climate and health finance," said Ms. Beagley. "It is also key that funding for climate and health be truly new and additional, and not pulled from other key areas...that are vital to protecting health, such as water and sanitation, food security, and humanitarian action." Developing countries had earlier asserted the need for grant-based international public finance that doesn't add to their debt burden. However, the Declaration endorses climate-health funding from "domestic budgets, multilateral development banks, multilateral climate funds...", along with philanthropies and private sector actors.

In India, particulate air pollution is said to be the "greatest threat to human health", and heat-related deaths may kill an additional 10 lakh people annually by 2090, according to data. India scored 2/15 points in the 2023 GCHA scorecard that assessed India's inclusion of clean air in its national climate commitments. India's NDCs thus far have focused on reducing emissions intensity, transitioning to non-fossil fuel sources and creating additional carbon sinks. Experts, including Amref Health Africa CEO Dr. Githinji Gitahi, emphasised that health has to be woven across streams at the COP negotiations — which includes discussions on clean water, clean air and sustainable cities.

"Stakes are really high — we need to see progress on one of the root causes of climate change... we will be looking at [a fossil fuel phase-out] as one of the metrics of whether this has been a 'Health COP' or not," said Dr. Miller. Other metrics include a just transition to renewable energy, commitment to reducing emissions, and grant-based climate financing.

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