1 London School of Hygiene and Tropical Medicine

2 Centre on Climate Change and Planetary Health, London School of Hygiene and Tropical Medicine

Cite this as: *BMJ* 2023;383:p2938
http://dx.doi.org/10.1136/bmj.p2938
Published: 13 December 2023

COP 28: Ambitious climate action is needed to protect health

Liam Smeeth,[1] Andy Haines[2]

Climate change is increasingly impacting health through diverse pathways including the effects of heat, floods, and droughts, increased infectious disease risks, declining crop yields, and increasing poverty.[1] The 28th meeting of the Conference of the Parties to the United Nations Framework Convention on Climate Change (abbreviated to COP 28) was the largest so far with almost 100 000 registered in person attendees. It brings together delegates from nearly 200 countries in an attempt to craft an agreement that would keep alive the rapidly receding prospect of limiting global average temperature increases to 1.5°C above pre-industrial levels. COP 28 has been controversial for several reasons, notably because the COP President Sultan Al-Jaber is head of the Abu Dhabi National Oil Company, and the conference has been attended by about 2400 delegates from fossil fuel companies.[2] A major obstacle is that some fossil fuel producing countries are emphasising the potential to continue burning fossil fuels using carbon capture technologies that are untested at scale.

This year is on track to be the hottest on record,[3] and according to the latest UN Emissions Gap report, the world is currently on track for 2.5-2.9°C above pre-industrial levels this century, if Nationally Determined Contributions (NDCs) made under the Paris Agreement are implemented.[4] Under this scenario, the impacts on health would be catastrophic, with vulnerable communities and populations that have the least resilience left facing the greatest risks. Much more ambitious actions at scale are needed to tackle the climate crisis and protect health.

COP 28 was the first to have an official health day. This is long overdue because, as the WHO Director -General Tedros Adhanom Ghebreyesus has pointed out: "...health stands as the most compelling reason for taking climate action...for too long, health has been a footnote in climate discussions", "Much like we can't address lung cancer without acknowledging the impact of tobacco, it's undeniable that over 75% of greenhouse emissions stem from oil, coal, and gas, which not only harm our planet but pose a grave threat to human health."[5] Organisations representing more than 40 million health professionals have endorsed the WHO call for ambitious climate action for health.[6] Under the WHO ATACH programme 72 countries have committed to achieving sustainable low carbon health systems.[7]

More than 140 countries have signed up to the COP 28 health declaration, although some large emitters are still missing. The declaration expresses "grave concern about the negative effects of climate change on health" and mentions the importance of policies that "maximize the health gains from mitigation and adaptation actions and prevent worsening health impacts from climate change." [8] Notably, it fails to mention the need to phase out fossil fuels to achieve the Paris Agreement targets and to prevent over five million premature deaths annually from ambient air pollution from burning fossil fuels.[9] While the declaration is a step forward towards integrating health considerations into climate policies, health is still not a focus of the negotiations themselves.

What can be done to protect and improve human health in the face of climate change? There are two complementary approaches, adapting to the change that cannot be prevented and mitigation—cutting the emissions of greenhouse gases (GHGs), principally carbon dioxide and methane. Adaptation to climate change and increased resilience to its effects are certainly vital but will not tackle the underlying drivers. To achieve this, a rapid and equitable phase-out of fossil fuels will be critical, together with food systems transformation to make healthy, sustainable dietary choices widely available. It is primarily the responsibility of the high income nations to take the lead on cutting emissions to reduce the damaging global effects of their high levels of economic activity and accumulated wealth. Many of the populations that are being most damaged by climate change contributed little to producing those changes, with the top 10% of emitters being responsible for 48% of GHG emissions.[10] This emphasises the need for a just and equitable transition, including universal access to clean renewable energy. US$1 billion has been committed to climate health interventions by major funders so far.[11] Wealthy countries have also pledged over US$700 million to a loss and damage fund directed towards the damage from climate change impacts suffered by low-income countries, although this amount is probably a tiny fraction of the funding needed.[12] The Global Stocktake, approved by COP 28 participants proposes: "Transitioning away from fossil fuels in energy systems, in a just, orderly, and equitable manner, accelerating action in this critical decade, so as to achieve net zero by 2050 in keeping with the science," but also proposes accelerating the uptake of "carbon capture and utilization and storage." [13] This represents a compromise between different nations and indicates the need for much more ambitious action to cut emissions.

There is growing evidence that climate change mitigation actions have near-term (co-) benefits for health, particularly from reduced air pollution, healthier diets, and increased physical activity.[14] A new Climate and Health Evidence Bank, hosted by the Pathfinder Initiative, showcases evaluated examples of actions implemented across different sectors including energy, housing, transport, and food as well as nature-based solutions.[15] Further

examples of climate actions with measured health benefits are needed to inform and inspire change.

Increased awareness of the impact of climate change on human health and the health benefits of climate action could help motivate the ambitious actions needed to tackle the drivers of climate change, commensurate with the scale of the challenge.

Competing interests: none declared

Provenance and peer review: commissioned, not peer reviewed.

1 Cissé G, McLeman R, Adams H, etal. Health, Wellbeing, and the Changing Structure of Communities. In: *Climate Change 2022: Impacts, Adaptation and Vulnerability. Contribution of Working Group II to the Sixth Assessment Report of the Intergovernmental Panel on Climate Change*. [H.-O. Pörtner, D.C. Roberts, M. Tignor, E.S. Poloczanska, K. Mintenbeck, A. Alegría, M. Craig, S. Langsdorf, S. Löschke, V. Möller, A. Okem, B. Rama (eds.)] Cambridge University Press, 2022: -170, doi: 10.1017/9781009325844.009.

2 https://www.reuters.com/business/environment/fossil-fuel-phase-out-put-table-cop28-climate-talks-2023-12-05/ (accessed December 10th, 2023)

3 https://climate.copernicus.eu/copernicus-november-2023-remarkable-year-continues-warmest-boreal-autumn-2023-will-be-warmest-year (accessed December 10th, 2023)

4 United Nations Environment Programme (2023). Emissions Gap Report 2023: Broken Record – Temperatures hit new highs, yet world fails to cut emissions (again). Nairobi. *https://doi.org/*doi: 10.59117/20.500.11822/43922 .

5 */https://healthpolicy-watch.news/first-ever-cop28-health-day-unfolds-amidst-uproar-over-cop-presidents-fossil-fuel-remarks/* (accessed December 10th, 2023)

6 Uniting for health and climate action https://www.who.int/teams/environment-climate-change-and-health/call-for-climate-action (accessed December 10th, 2023)

7 Alliance for Transformative Action on Climate and Health (ATACH). https://www.who.int/initiatives/alliance-for-transformative-action-on-climate-and-health/country-commitments (accessed December 10th, 2023)

8 COP28 UAE Declaration on climate and health https://www.who.int/publications/m/item/cop28-uae-declaration-on-climate-and-health (accessed December 10th, 2023)

9 Lelieveld J, Haines A, Burnett R, etal. Air pollution deaths attributable to fossil fuels: observational and modelling study. *BMJ* 2023;383:e077784. doi: 10.1136/bmj-2023-077784. pmid: 38030155

10 Chancel L. Global carbon inequality over 1990-2019. *Nat Sustain* 2022;5:-8. doi: 10.1038/s41893-022-00955-z.

11 Bhattacharji C. COP28: 124 Countries Commit to Milestone 'Declaration on Climate and Health */https/healthpolicy-watch.news/cop28-health-and-climate-declaration/https://healthpolicy-watch.news/cop28-health-and-climate-declaration/(accessed* December 10th, 2023)

12 Standing in Solidarity with those on the frontline of the climate crisis: A Loss and Damage Package for COP 28 https://assets-global.website-files.com/605869242b205050a0579e87/655b50e163c953059360564d_L%26DC_L%26D_Package_for_COP28_20112023_1227.pdf (accessed December 10th, 2023.

13 https://unfccc.int/sites/default/files/resource/cma2023_L17_adv.pdf?download (accessed December 13th 2023)

14 Whitmee S, Green R, Belesova Ket al, Pathways to a healthy net-zero future: report of the Lancet Pathfinder Commission. November 20, 2023 *https://doi.org/*doi: 10.1016/S0140-6736(23)02466-2.

15 https://climatehealthevidence.org/ (accessed December 10th, 2023)