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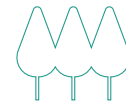
Driving change

High-level policy recommendations

“Governments, international agencies, and civil society all must act to put health care on the track to zero emissions, build resilience, and protect people’s health from climate change.”

Dr. Esperanza Cabral, former Secretary of Health, the Philippines





Government action

Health care has an opportunity to be a climate leader, and by doing so, achieve not only a healthier planet and a healthier society, but also better health outcomes. By embracing this Road Map—the four country type trajectories, the three pathways, and the seven priority action areas discussed in the previous chapters—the sector can begin to chart a course to zero emissions that is just and equitable. This, in turn, could provide leadership to help drive and accelerate the broader societal transformation necessary to protect public health from climate change.

To get there, the entire sector must mobilize and transform itself, while working in collaboration with other sectors of society to navigate into the future. The following are a series of high-level recommendations.

Health care has an opportunity to be a climate leader. By doing so it can foster both planetary health together with better health outcomes.

National and sub-national health authorities control numerous policies and financial levers that are essential for health care decarbonization. High-level actions that they can take include:

PUT CLIMATE INTO HEALTH CARE POLICY

Declare climate change a health emergency: All governments can start by issuing a declaration that the climate crisis is a health emergency and requires concerted national and global action. The declaration can commit health authorities to taking action to prepare health systems for the impacts of climate change and prevent greenhouse gas emissions by addressing their own climate footprint.

Zero emissions commitments: Ministries of health and national health systems can make similar public commitments to the one made by the United Kingdom's NHS, which signaled its intent to reach net zero by 2045 and has released an initial action plan to do so.¹¹⁵ Health ministries and government health services, as well the hospitals and health systems under their jurisdiction, can also participate in a global, health sector-wide initiative to take climate action: the Health Care Climate Challenge, which supports hospitals and health systems in a growing list of more than 34 countries to prevent climate emissions, build resilience, and take leadership action.¹¹⁶ Those hospitals, health systems, and government health services ready to commit to net zero can join a collaboration between the Challenge and the UNFCCC, which is a health care component of the Race to Zero Campaign—the largest ever global coalition of net zero initiatives—by making a commitment to 50% emissions reduction by 2030 and zero emissions before 2050.¹¹⁷

National road maps and measurement tools:

In order to establish and implement a systematic decarbonization policy, governments at all levels need to develop their own road maps. These road maps



should include establishing the ability to measure, track, and report on the sector’s full footprint at the national level using granular national data. The road maps should also include an action plan for implementing decarbonization strategies across the three pathways and seven action areas described in the previous chapter and the capacity to track progress over time using a standardized approach.¹¹⁸ National and subnational health systems should provide individual facilities and groups of hospitals a similar capacity so that they may take action for decarbonization from the bottom up.¹¹⁹

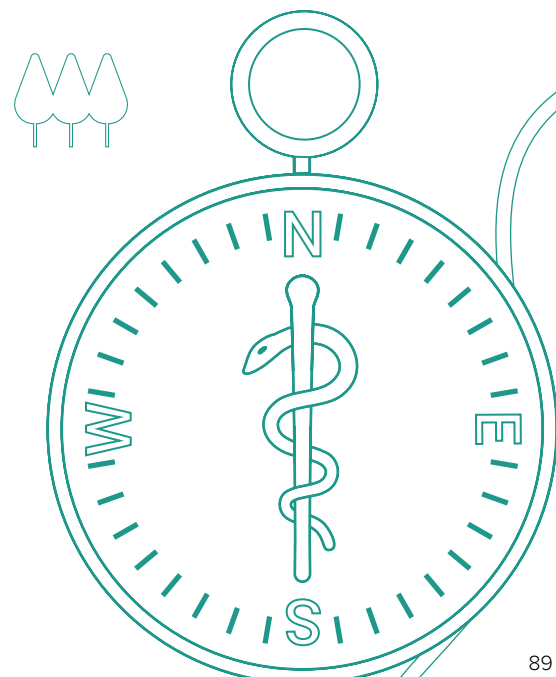
Legislative and regulatory action: A series of laws, rules, and regulations specifically govern health sector activity in every country. These regimes usually do not take climate into account and often can be revised to reduce emissions while protecting health and maintaining the quality of care. A thorough climate review of health care legislation and regulations at the national and subnational levels, together with a set of specifically tailored policy recommendations, can help accelerate decarbonization and resilience. Governments should also estimate the overall financial benefits and/or costs of implementing such policies and set up the appropriate financing mechanisms to cover them. These can include earmarked budgetary resources and a pipeline of bankable projects that in some cases can be financed through bilateral and multilateral cooperation.

PUT HEALTH CARE INTO CLIMATE POLICY

Nationally determined contributions: Under the Paris Agreement, every nation must make a NDC—a voluntary commitment to emissions reduction—and strengthen that commitment over time. In the lead up to the global climate negotiations in Glasgow in late 2021, Argentina, which established health as a crosscutting issue its NDC submission to the UNFCCC, also became the first nation to include health care decarbonization in an NDC. The Argentine NDC calls

for an assessment of greenhouse gas emissions from the health care sector and the establishment of measures to reduce those emissions.¹²⁰ Other governments can build on Argentina’s initial efforts and make pledges to implement climate-smart health care as part of their global climate commitments.¹²¹

National and subnational climate policy: The implementation of government climate policy, of both the legislative and regulatory variety, is usually embedded in and executed by a series of different entities, including environment, energy, finance, agriculture, and foreign ministries. Many of these policies affect or have the potential to impact health and the provision of health care. Conversely, the health sector has the potential to affect these policies. Following the approach of health in all policies, the health care sector should work closely with all relevant sectors to assure that governments develop strong cross-sectoral climate policies that protect public health from climate change while supporting health care decarbonization and resilience.



United Nations and other international organizations

A wide array of United Nations agencies, international financial institutions, and bilateral cooperation agencies or large foundations that provide health development assistance all need to play an important role in aligning and simultaneously achieving global health and global climate goals.

The United Nations Framework Convention on Climate Change (UNFCCC): Under the leadership of its high-level climate action champions, the UNFCCC has developed a set of climate action pathways that outline the sectoral visions for a 1.5-degree climate-resilient world by 2050 and set out actions needed to achieve that future. These pathways provide an overview of the transformational actions and milestones needed for system transformations within sectors.¹²² Through the work of the high-level champions, the UNFCCC can adopt this Road Map, or a modified version of it, as a health care climate action pathway that encourages the sector to move toward zero emissions in the context of the Paris Agreement. The UNFCCC secretariat can also encourage national governments to include health care decarbonization in their NDCs.

United Nations agencies: The World Health Organization (WHO), the UN Development Program (UNDP), the UN Environment Program, and other UN agencies have a crucial leadership role to play in advocating and accelerating the decarbonization of the health care sector. WHO can provide essential policy and technical guidance to ministries of health around the world, particularly in low- and middle-income countries, where the transition to zero emissions and resilience must be accompanied by simultaneously addressing other pressing health needs, including UHC.¹²³ UNDP is playing a leading role in implementing climate-smart health care on the ground, through its Solar for Health initiative,¹²⁴ and through its leadership in addressing the climate footprint of the global health care supply chain in collaboration with other UN agencies¹²⁵ and Health

Care Without Harm.¹²⁶ Both of these initiatives can be scaled up to support climate-smart health care.

International financial institutions and bilateral cooperation agencies: Institutions like the World Bank, regional development banks, bilateral aid agencies, and large foundations that provide significant support for health development in low- and middle-income countries will also need to play a central role in shaping health care policy, investment, and overall health development strategies. These strategies will need to align countries' commitments to the Paris Agreement with the imperative of developing the health sector, achieving UHC, and attaining the Sustainable Development Goals. To do so, these multilateral development banks and aid agencies must integrate climate-smart principles and strategies into their health aid, lending, and policy guidance.¹²⁷ Those branches of these institutions funding climate mitigation and adaptation, as well as climate-focused financial mechanisms like the Green Climate Fund and the Global Environment Facility, should similarly integrate health care decarbonization and resilience into their programs.¹²⁸

The private sector

The private sector presence in health care manifests a multitude of forms. Be it nonprofit, religious, and for-profit corporations owning and running health facilities and systems, or companies that produce most all the goods in the global health care supply chain, the private sector is omnipresent even in publicly run health care systems. It has a central role and responsibility to play in aligning health and climate imperatives.

Government regulation can and must play a central role in establishing a framework for private sector transition to decarbonization. This includes oversight of private health care systems and facilities, as well as that of manufacturers and suppliers of everything health care consumes. Health systems—both public and private—can also aggregate their demand for products and thereby influence manufacturers and suppliers to change their production and distribution practices. At the same time, privately owned health facilities and the health care industry more broadly must respond to the climate crisis, take responsibility, demonstrate leadership, and move toward zero emissions.

Private and nonprofit health care systems and facilities: Hospitals and health systems run by nonprofit corporations, religious organizations, and for-profit companies all should set ambitious targets for decarbonization, taking action along the three pathways and seven action areas discussed in the previous chapter. They should also pair their decarbonization efforts with resilience initiatives that bolster infrastructure, engage with multisectoral systems, and support equitable community health and wealth. They should collaborate with and support public health authorities and systems, as well as civil society to build a sector-wide approach.

Similar to government-run hospitals, they can participate in a global health care movement to take climate action through the Health Care Climate Challenge, which supports hospitals and health

systems in a growing list of more than 34 countries working to prevent climate emissions, build resilience, and take leadership action.¹²⁹ Those hospitals and health systems ready to commit to net zero can join a collaboration between the Challenge and the UNFCCC which is a health care component of the Race to Zero Campaign discussed above.

Manufacturers and suppliers: As discussed in the previous chapter, there are a series of actions that suppliers and manufacturers can and should take to decarbonize their manufacturing, packaging, and transport of products used in health care. Health care systems' demand can incentivize this, while agile companies can anticipate and help propel the transformation that is now underway. These companies can also, if they so choose, exert leadership. They can join the effort to advocate for the decarbonization of the broader society and economy, particularly the electrical grid, on which most of their factories depend. They can produce products that are highly energy efficient and/or zero or low emissions when they are deployed in a health care setting, which contributes to the reduction of health care facilities' climate footprint and reduces energy costs. Finally, they can innovate and design their products for a circular economy that minimizes waste and fosters reusability.

Health insurance and health finance: Health insurance payers (private or public) and financial investment companies are important influencers in the sector and can leverage their clout to support climate-smart health care. Actions payers can include setting reimbursement schedules to favor cost-effective, low-emissions interventions that produce equal or better health outcomes over more carbon intensive actions. Health care finance can set climate-smart criteria for health care construction, infrastructure, and purchasing capital goods. Public and private health systems and health companies can also divest their investment portfolios currently sunk into fossil fuels and instead invest in clean, healthy, renewable energy.

Civil society

Civil society in the health sector is as vast as it is diverse. It ranges from the tens of millions of doctors, nurses, public health professionals, and other health care workers to their professional associations, a broad network of health researchers and academia, and local, national, and global health advocacy organizations.

This panoply of health actors is a critical element to mobilize the health care itself to decarbonize and become resilient while achieving climate justice and health equity. Many health professionals work in the health facilities themselves and are important voices advocating for change. Others work at organizations that can influence hospitals and health professionals at national or even global levels. Health care professionals can deploy a time-honored health sector science-based approach to research and document problems and solutions. Additionally, they can organize for change by building off decades of experience taking on the scourges of HIV-AIDS, big tobacco, and now COVID-19.

At the same time, civil society in the health sector must play a central role in accelerating decarbonization in the broader economy and society. The health voice—the voice of doctors and nurses—is the most trusted voice in most cultures. That trust has only grown during the COVID-19 pandemic.

As we begin to move beyond COVID-19, health professionals in every country must now turn their attention and help lead the sector in warning their societies about the next looming crisis—one that is already upon us and which will increasingly take on emergency proportions. They must call for a rapid transition from fossil fuels and industrialized agriculture to clean renewable energy and sustainability. They must do so to protect public health from the climate crisis and help lead the health care sector itself to chart a course to zero emissions and drive change that will achieve health equity and climate justice.



A final word

Transformational change often does not occur in a linear fashion. Rather, it happens rapidly and with little warning. We are living under the looming shadow of such radical change in the form of an accelerating climate emergency. At the same time, we can draw hope from a world that is becoming more aware of this existential threat and rapidly accelerating its response, setting the stage for transformational change in the direction of decarbonization. It is a race against time and a race against ourselves. We must urgently forge this burgeoning drive for change into an all-inclusive worldwide movement for healthy people on a healthy planet. The health sector must help lead the way.

