

Climate, health and inequalities: Exploring public health responses to interlinked issues

Webinar #5 – 28 May 2020

Key messages

- The current health crisis is an opportunity to “build back better”, taking steps to address the broader environmental and climate crisis, and to ensure more sustainable and resilient health systems and societies.
- Tackling (environmental) health inequalities should be at the core of the recovery efforts, and the public health sector can play an important role, adopting a Health in All Policies approach.
- It is important for the public health sector to actively engage stakeholders across sectors at local, national and EU level, to ensure the current momentum continues and health, climate and inequalities are at the centre of debates.

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The COVID-19 pandemic has affected us all. Whilst it has raised many challenges, it is also an opportunity to build on a sense of shared purpose and create societies that are responsive to population needs. It is clear that the current health, environmental, and inequalities crises that we are facing should not be seen as conflicting, but rather that more than ever, it is necessary to employ a holistic approach to jointly attain common objectives of better health, a protected environment, and reduced inequalities. On 28 May 2020, EuroHealthNet organised a webinar for its partnership of public health agencies and health authorities to explore how to address these issues.

The aim was to

- Explore the links between environmental, health, and health inequalities challenges, and the role of the public health sector in helping to address them;
- Learn about EU-level actions, and discuss how EuroHealthNet members can feed into them;
- Provide examples of initiatives that are addressing these joint challenges at national and regional level in different European countries, and foster an exchange amongst members.

Introduction

Caroline Costongs, Director EuroHealthNet

- Caroline opened the webinar by stressing that in the short term, the focus is on addressing the COVID-19 pandemic. But this crisis, which emerged from the interaction of humans with the environment, has also made us realise our fragility, and highlighted the pressing need to act on environmental degradation and the climate crisis, at the risk of facing huge consequences on people's health and wellbeing in the long term.
- It is important that we understand that the COVID-19 crisis is showing again that the more disadvantaged and vulnerable communities are suffering the most. This is mainly due to having less resources to cope and benefiting the least from the given responses.

Panel – Exploring public health responses to interlinked issues: Climate, health, inequalities

Three panellists provided insights on initiatives and experiences at the European level, and three shared experiences at national and regional level. The summary below includes each panellist's key points, as well as links to resources which they shared.

Ingrid Stegeman, Programme Manager at EuroHealthNet

- Whilst we are fighting the immediate impacts of COVID-19, it is important to remember that we were already in the midst of a bigger crisis, the environmental and the climate one, on which urgent action is also needed. This is a challenge but also an opportunity. The WHO recognised this in their "[Manifesto for a healthy recovery from COVID-19](#)", which states that we need to make sure that

the measures taken to address the COVID-19 pandemic lead to a healthy recovery, and also address the broader environmental crisis.

- Between 2016-2019, EuroHealthNet coordinated the [INHERIT](#) research initiative, which focused on fostering actions and initiatives that address environmental challenges as well as promote our health and help to reduce inequalities (a “triple-win”). A lot of the learning from INHERIT can help to address the COVID-19 crisis. It highlighted for instance the need for greater cross-sectoral collaboration, to design and implement policies that integrate the triple-win, to engage people in positive visions of the future, and to encourage communities to find solutions that are tailored to their needs.
- At EU level, there seems to be a momentum to act on the health and environmental crises in integrated ways. This is exemplified for instance in the [EU Recovery Package](#) (unveiled on the 27th of May 2020), as well as in the European Green Deal, which aims to make our economies more sustainable, and to ensure that no person/no place is left behind in this transition (e.g., plans for a Just Transition Fund). The Green Deal also includes a proposal for a European Climate Pact, a non-legislative initiative that encourages regions, local communities, citizens and also businesses and schools to come together and take action on tackling the environment crisis in areas like sustainable transport/buildings or green initiatives. EuroHealthNet will reply to the consultation on this initiative (deadline 17 June), including ideas from this webinar.
- The COVID-19 crisis is bringing health to the central stage. It is important to consider: how can we ensure to be better prepared for next crises at the same time as we address underlying factors that are damaging our health in the first place?; but also: What role can we, as the health sector (and health authorities), play in ensuring we stop damaging the planetary systems?

Resources:

- H2020 [INHERIT](#) initiative (2016-2019), coordinated by EuroHealthNet. The [INHERIT Policy Toolkit](#) brings together many of the key findings.
- More information on EU Green Deal initiatives can be found [here](#), as well as in EuroHealthNet member briefings on the European Green Deal (January 2019), and the Just Transition Fund, Climate Pact and Climate Law (May 2020). Both can be accessed in the [members’ section](#) of the EuroHealthNet website.
- EuroHealthNet’s response to the EU Climate Pact consultation is available [here](#). Another consultation, on the EU strategy on adapting to climate change, is currently open to public consultation (deadline 20 August). It is accessible [here](#). EuroHealthNet is preparing a response.

Matthias Braubach, Technical Officer at WHO European Centre for Environment and Health

- The WHO has been working a lot on environmental health inequalities. It has prepared an assessment report for the WHO European Region, covering inequalities that relate to housing, urban conditions, basic services (i.e., water, energy), work settings, and injuries. Country-based data shows that:

- Environmental inequalities occur in all countries, and have persisted in many countries over the years and sometimes even increased. Vulnerable population groups are exposed to 5 times more environmental risks than others; in extreme situations up to 10 times.
- Injury risk is associated with social economic deprivation, notably poverty and low income.
- Inequalities are increasing in almost all countries regarding energy poverty, damp housing, and noise perception, representing a common challenge.
- Related to COVID-19 lockdowns, one of the main concerns related to climate change and equity are heat waves. This requires information campaigns to communicate specific messages, such as: how to cope with the heat, how to cope with the risks, and behave accordingly. A WHO webinar has addressed this, and includes guidelines.
- In terms of the role of the health sector in addressing environmental health inequalities, at the end of 2019 the WHO launched a resource package, which provided information on how to measure health inequalities, how to mitigate and act on them, and guidelines to inform health authorities. It is crucial to push for 'Health in All Policies', to make sure that health is considered in urban planning, in transport policies, etc. Health sectors cannot do a lot on their own, but they can provide evidence on health outcomes and related costs; they can lobby for prevention at local implementation level as well as national governance level. The health sector can foster cross-sectoral action, and position climate change as a central challenge for public health, also emphasising and supporting in particular equity-sensitive monitoring and surveillance to identify disparities. It is also crucial to target interventions to disadvantaged groups/areas, to collaborate with social and environmental authorities to identify health determinants and to consider equal environmental living conditions as a core value for every city and for every country.

Resources:

- [Environmental health inequalities in Europe. Second assessment report](#)
- [Country profiles on environmental health inequality](#)
- [Environmental health inequalities resource package \(2019\)](#)
- [Preparing for a long, hot summer with COVID-19](#)

Brigit Staatsen, Senior researcher in environmental epidemiology at the Dutch National Institute for Public Health and the Environment

- The current COVID-19 crisis may trigger more sustainable and resilient health systems. In the Netherlands, approx. 200 healthcare institutions and companies collaborate on a "Green Deal Sustainable Health Care" initiative, which aims to reduce CO2 emissions. The COVID-19 crisis has shown that one of the main weaknesses of the current health system relates to supply chains. In the Netherlands this led to increased attention regarding the recycling of protective materials (e.g., mouth masks). An evaluation of the footprint of these materials is currently ongoing.
- In the Netherlands the lockdown led to a huge reduction of emissions. Cities are working on COVID-proof mobility plans, providing more space for pedestrians/cyclists and less space for vehicles in city centres. On the other hand, fear of contamination in public transport may force commuters to

use cars instead of public transport. Other opportunities include the fact that the airline sector seems to be more open to work on a reduction of emissions, and government support to companies in the scope of the economic crisis could be made conditional on sustainability targets.

- COVID-19 has increased awareness about behaviour and inequality. RIVM has set up a COVID behaviour unit, which is conducting a literature review, large populations surveys, and interviewing individuals who live in disadvantaged circumstances. Survey data from the first lockdown period (April, 90.000 respondents) suggests that a large percentage are adhering to government guidelines. Staying at home, keeping distance and not visiting elderly were seen as challenges. One third reported feeling depressed and lonely, although 13% feel less stress. 50% reported being less physically active. A second survey (May, 53.000 respondents) shows that individuals find it more difficult to keep physical distance; data shows a positive relationship between trust on measures and compliance. This data is informing how best to communicate to the public.
- Finally, the COVID-19 crisis has led to more visibility for RIVM (frequent presentations in national press briefings, weekly presentations in parliamentary committee), including among citizens. There is also more attention for public health research and expert-knowledge and integrated assessment of impacts on health and wellbeing.

Resources:

- [Research on the novel coronavirus in the Netherlands](#)
- [RIVM behavioural research](#)
- Article in EuroHealthNet Magazine: [Applying behavioural science in the battle against the coronavirus](#)

John Howie, Organisational Lead for Place at Public Health Scotland

- The idea of “place” has become popular, as it is an accessible concept allowing national and local politicians, organisations, businesses and communities to engage in discussions about their environments and how to improve them, simplifying complex concepts of public health and environment.
- A shift in power is necessary to ensure that “places” are influenced by those who live, work and learn in them – it is particularly important to ensure that vulnerable populations have the opportunity for an equal voice and the ability to make choices and influence their environments.
- How can we do this? One practical way is the application of place-making tools, such as the Place Standard Tool, which was launched in 2015, designed by public health scientists, architects and planners, currently operational across 13 countries in Europe. Public Health Scotland is aiming for a WHO accreditation this year.
- The Place Standard Tool is based on 14 themes, with questions and prompts for people to respond to (which align with the Sustainable Development Goals). It aims to identify what works well and what improvements are needed. It also provides opportunities to educate communities, politicians, businesses and organisations to new ideas. It allows decision-makers to see the benefits of using a place-based approach, as they use the results to generate needs-led investments.

- In Scotland, there is a legal obligation for municipalities to engage with their communities. Place is one of six public health priorities.
- In terms of recovery and future preparedness, we can construct our COVID-19 response with the application of place-based tools, ensuring that communities have a say and that those in power deliver change in a careful and systematic way.

Resources:

- [Place Standard Tool](#)
- Article in EuroHealthNet magazine: [Talking “place” – a public health conversation for everyone?](#)
- Further details from Public Health Scotland on [power, place & health](#), and [health inequalities](#).
- [Scotland’s Public Health Priorities](#)

Giovanni Gorgoni, CEO at Puglia Regional Strategic Agency for Health and Social care (Italy)

- Giovanni introduced the ClimActions initiative, which is led by the Lazio Region Epidemiology Department (DEP) and funded by the Italian Centre for Disease Control. The project targets six urban areas: Turin, Genoa, Rome, Bologna, Bari and Palermo, reaching over five million inhabitants (representing 24% of the Italian population living in urban areas). It is premised on the fact that cities are at the forefront of fighting climate change and must play a leading role in identifying adaptation and mitigation actions.
- Over 50% of the world population lives in urban areas, cities consume two thirds of the total energy, and are responsible for over 70% of the global CO2 emissions. Urban areas are at high risk of suffering the most devastating effects of the climate change, due to extreme weather events (e.g., heat waves, hurricanes, floods, sea level rise, etc).
- ClimActions will propose evidence-based solutions and interventions to municipalities to mitigate heat waves in urban areas (with associated benefits for health and greater liveability). A recent WHO review has shown that urban green spaces have the potential to prevent chronic diseases such as diabetes, cardiovascular diseases, or mental health disorders. Therefore, having green urban indicators integrated with population and land use data has the potential to foster cultural change in stakeholders operating in urban environments, which leads to more effectively tackling environmental risks, and to increased population awareness.
- ClimActions has four pillars: create innovative tools to support decision-making processes in large urban areas (e.g., using GIS data); integrate population, environmental and health data; implement case studies regarding mitigation measures on the urban heat island effect; experiment with new green infrastructure and urban planning in critical areas in the city.

Anne Stauffer, Director Strategy and Campaigns at Health & Environment Alliance

- The voice of the health sector is needed more than ever in the recovery from the COVID-19 crisis. Early this week a call was signed by 40 million health professionals to the G20 leaders on the need for a healthy and a sustainable recovery. It is important for the health sector to continue such engagement – in not just health but environmental issues too – in the coming months. This will be

key to ensure we “build back better” and reach a green economy and a truly health promoting and sustainable environment.

- Our engagement is needed at all levels. At EU level, the Commission’s recent Multi-Annual Financial Framework and Recovery fund proposals are steps in the right direction (recognition of health as a pillar, of the need to step up EU action in health and health investment, focus on the EU Green Deal). We need to ensure that health and the Green Deal are central to all the many recovery instruments that will come (and include green conditionalities). It is also important for the health sector to engage with the national level, and there are opportunities to strengthen health sector collaboration with progressive majors at a city level (e.g., C40 cities).
- Tackling inequalities needs to be at the core of the recovery debate and efforts. Vulnerable groups are disproportionately affected by climate change, pollution, etc. We need to take this into account when implementing measures (e.g., concerning affordability, for instance of e-vehicles).

Resources:

- EU long-term budget 2021-2027: [Commission Proposal May 2020](#)
- [C40 pledge on green recovery](#)

Q&A

Alba Godfrey, Project Officer at EuroHealthNet, grouped questions together in three themes:

- Is there a lack of globally legally binding mechanisms and instruments to make sure that environmental factors are included in the rapid first line response to crises?
- What are the gaps or areas to focus on to ensure the health focus is really central? Is there anything that the WHO or EuroHealthNet could help with to strengthen this at European level?
- Regarding the urban innovations mentioned during the webinar, how can we make sure that this momentum keeps going even after the peak of the COVID-19 crisis?

Anne Stauffer

- How to keep the momentum going? It is for all of us to raise our voice, to be part of the debate, bringing your views, your experiences, your knowledge. Otherwise the debate will be dominated by economies and companies and not by the health sector.

Giovanni Gorgoni

- This crisis has brought social isolation. In addition, many urban areas do not have access to green areas. ClimActions aims to provide tools to municipalities to re-design urban assets and to encourage green and pedestrian areas.

John Howie

- A very good starting point will be to look at things through a COVID and SDG lens, to see how we can systematically reach the 17 goals, which will help our communities to prepare for any future pandemic.

Brigit Staatsen

- In November 2020 RIVM will publish a Public Health Forecast, which will aim to cover the impacts of COVID-19 in an inclusive way (also linking with the environment), and inform and hopefully activate policymakers on further action.
- In terms of citizen empowerment, our health minister has suggested that young people should provide input on the response, and RIVM is organising a webinar with a youth panel.

Matthias Braubach

- Before applying legally binding regulations, strong and robust evidence is needed – there are still a lot of questions that need to be answered through research.
- The WHO is increasingly engaging with and exploring opportunities at the urban level.
- The recovery should aim to ensure that general health policies and urban design policies are more disaster-proof (for future pandemics also).

Ingrid Stegeman

- We need to make sure health, environment and equity are the focus of policies and responses.
- It is important to embrace positive visions of the future, where citizens can play an important role by supporting this approach. Instruments like the Places Standard Tool can help here by developing a common language to address very complex matters. It is important we use the right tools to engage people and not leave anyone behind.

Follow up

This report is being shared amongst EuroHealthNet members, as a key follow-up to the webinar. Further webinars will be organised in the coming months, to continue the exchange within the EuroHealthNet Partnership.

EuroHealthNet will feed the outcomes of this webinar to the European Commission, notably through public consultations. It has already provided a response to the Commission consultation on the EU Climate Pact, and will also reply to the consultation on adapting to climate change.

EuroHealthNet, with input from its members, will continue to advocate for a green, sustainable, healthy and resilient recovery going forwards throughout the different strands of its work.