



EPHA Response to Consultation: Health Community Input on the WHO's COP29 Special Report on Climate Change and Health

23 September 2024

To: World Health Organization

The European Public Health Alliance ([EPHA](#)) is grateful for the opportunity to provide input on the WHO's COP29 Special Report on Climate Change and Health. We recognise the urgent need to frame climate change as the foremost health issue of our time and support the consistent integration of health considerations into climate action. We commend the WHO for its leadership in tackling these critical issues and endorse the focus on emission reductions, air pollution, and urban centres in climate and health strategies. EPHA also underscores the importance of reducing the healthcare sector's substantial carbon footprint and continuing to empower health professionals as key advocates in climate action. We urge the WHO to continue driving ambitious and concrete measures to decarbonise and enhance the sustainability of the healthcare sector, while mobilising it as a central force in global climate efforts - both crucial to reducing emissions and strengthening resilience to climate impacts.

Our comments focus on expanding the discussion to include food systems beyond the current focus on cities, broadening the perspective on urban environmental health, reassessing key energy sources within the climate-health nexus, and centering considerations on health equity across the report, with energy poverty as a key area for action. We believe that addressing these areas is essential for a holistic approach to mitigating climate change and enhancing global public health.

Food Systems and High Carbon Diets

Scientific evidence underscores that addressing climate change, biodiversity loss, and rising greenhouse gas emissions requires a thorough review of our food systems. Food systems are significant drivers of climate change, impacting the environment through land use, emissions from food production, packaging, and transport. These environmental impacts, in turn, influence dietary choices and public health.

Dietary patterns high in red and processed meats, and rich in sugar, salt, and unhealthy fats, contribute to chronic diseases and environmental degradation. Individuals with lower socioeconomic status globally often face barriers to accessing affordable, healthy, and sustainable food. Climate change exacerbates these barriers by disrupting food availability, leading to less nutritious diets and worsening diet-related health issues. This intensifies social

and economic vulnerabilities, compounding climate-related food insecurity and health disparities among marginalised groups.

The current draft report predominantly focuses on the role of urban food systems in advancing public health and climate change mitigation. However, we urge a broader examination of food systems and food environments from a global perspective. Reforming global food systems to prioritise health and sustainability, and promoting low-carbon diets, is crucial for addressing these interconnected challenges. We recommend that food systems be given greater prominence as a distinct priority area in the report.

For more information on how we are approaching this issue in Europe as part of the Put Change on the Menu Coalition, please refer to [*Shifting Diets for Health and Climate*](#).

Smart Cities and Urban Environmental Health

To maximise the impact of climate-smart urban development, we recommend expanding the focus of the "Smart Cities, Healthy Cities" section to address not only air pollution but also the climate and health co-benefits of tackling water and noise pollution. Improved water management can lower greenhouse gas emissions and enhance resilience to extreme weather events that may lead to water contamination, thereby safeguarding public health. Similarly, addressing noise pollution can significantly improve urban livability while delivering additional climate and health benefits.

For further details on the intersections between noise pollution and climate change, please refer to our paper [*The Intersections Between Climate Change and Noise Pollution*](#).

Energy Choices and Health Impacts

We would also like to highlight that the WHO's classification of natural gas as a clean fuel for cooking is problematic. The use of natural gas, a fossil fuel, to power household appliances remains widespread despite being associated with significant health risks. To provide an example, emissions of nitrogen dioxide (NO₂) from gas cooking appliances, which remain widely used in Europe and worldwide, are linked to adverse health effects. Furthermore, these appliances emit methane, a potent greenhouse gas, even when not in use. EPHA advocate for a unified approach within the health community to phase out all household appliances powered by fossil fuels. COP29 is a key moment to ensure alignment and be vocal in supporting the transition to cleaner alternatives powered by renewable energy, including in the Global North, to fully realise the health and climate co-benefits of this shift.

For further information, please refer to our report [*New Report Exposes the Hidden Health Impacts of Cooking with Gas*](#).

Social Determinants of Health, Inequities and Energy Poverty

EPHA support the WHO's stance that tackling climate change is essential for reducing health disparities. The report currently treats social determinants and inequities as indirect effects of climate change, but we believe they should be recognised as structural drivers throughout its analysis and recommendations. Factors such as income, wealth, racism, and discrimination shape health outcomes and deepen inequities, particularly in the context of climate change. The most marginalised, including racially minoritised groups, migrants, and indigenous communities, bear the greatest health burden despite contributing least to climate change.

Energy poverty exemplifies this inequity. The report should prioritise it as a key area for action that advances climate mitigation, health equity, and social justice. Energy poverty worsens both physical and mental health, creating a vicious cycle of poor health and limited energy access. Low-income households are more likely to depend on inefficient, polluting energy sources, and their restricted access to energy and home improvements exacerbates health disparities and hinders climate action.

For further information on Indoor Air Quality and energy poverty, please refer to our report [*Towards better indoor air quality in the European residential context*](#).

EPHA is committed to advancing public health and environmental sustainability through comprehensive, evidence-based and equitable policies. We hope our recommendations will contribute to a more holistic approach in the COP29 Special Report on Climate Change and Health. Thank you for considering our input.

Yours sincerely,

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ABOUT EPHA

EPHA is a change agent, Europe's leading NGO alliance advocating for better health. A member-led organisation made up of public health NGOs, patient groups, health professionals and disease groups, we work to improve health and strengthen the voice of public health in Europe. Our actions and campaigns reflect our values: equity, solidarity, sustainability, universality, diversity and good governance.

Since formal establishment in spring 1993, EPHA has built a solid network of over 50 members dedicated to providing better health for all. Our mission is to bring together the public health community to provide thought leadership and facilitate change; to build public health capacity to deliver equitable solutions to European public health challenges, to improve health and reduce health inequalities. Our vision is of a Europe with universal good health and well-being, where all have access to a sustainable and high-quality health system: A Europe whose policies and practices contribute to health, both within and beyond its borders.