



14 May 2013

Dr Margaret Chan
Director-General
World Health Organisation

Dear Dr Chan,

As health organisations representing health and health-promotion professionals and health care institutions from around the world, we are writing to you to highlight the urgent concerns of the health and medical professionals and health care workers in relation to the health risks from climate change.

Specifically we would like to alert you to the [DOHA Declaration on Climate, Health and Wellbeing](#), developed during COP 18, the 2012 UNFCCC global climate change negotiations, and signed by over 80 health and medical organisations from 19 countries along with over 1000 individuals.

This Declaration expressed the desire of health and medical organisations around the world for the protection and promotion of health to be made one of the central priorities of global and national policy responses to climate change, and their willingness to engage to make this happen.

The Declaration and its list of signatories (attached) called for:

- The health impacts of climate change to be taken into account domestically and globally
- Investment in climate mitigation and adaptation to be significantly increased on a rapid timescale
- The health sector and the community to be engaged and informed on climate action

It also states:

“Human health is profoundly threatened by our global failure to halt emissions growth and curb climate change. As representatives of health communities around the world, we argue that strategies to achieve rapid and sustained emissions reductions and protect health must be implemented in a time frame to avert further loss and damage.

We recognise that this will require exceptional courage and leadership from our political, business and civil society leaders, including the health sector; acceptance from the global community about the threats to health posed by our current path; and a willingness to act to realise the many benefits of creating low carbon, healthy, sustainable and resilient societies.”

We urge you to raise this issue as a matter of the highest priority in the World Health Organization, and to work with the signatories to this letter to help ensure the health implications of climate change and the opportunities to improve health through emissions reductions are understood and realised by effective action in all WHO member states. For example, the co-benefits of tackling both non-communicable diseases (a major focus of the World Health Assembly this month) and climate change are increasingly well known, and benefit both people and planet.

Given the urgency of the situation, we would be very grateful if you could share the Doha Declaration with other members of the Executive Board during your meeting on May 29-30 as an important contribution from the health sector.

We would be pleased to discuss how we can work closer with WHO global and regional offices and national health ministries to protect and promote global health through climate action.

Yours sincerely,

Climate and Health Alliance (CAHA)

C3 Collaborating for Health

Climate and Health Council (CHC)

FHI 360

Health and Environment Alliance (HEAL)

Healthcare Without Harm (HCWH)

International Federation of Medical Students Associations (IFMSA)

Contact for correspondence: Fiona Armstrong, Convenor, Climate and Health Alliance,
convenor@caha.org.au

Doha Declaration on Climate, Health and Wellbeing

Health and medical organisations from around the world are calling for the protection and promotion of health to be made the one of the central priorities of global and national policy responses to climate change.

The protection of health and welfare is one of the central rationales for reducing emissions in Article One of the United Nations Framework Convention on Climate Change (UNFCCC). Article Four requires all countries to consider the health implications of climate adaptation and mitigation. Yet health is being overlooked in the development of responses to climate change, and its importance undervalued by policymakers, business and the media.

Human health and wellbeing is a basic human right and contributes to economic and social development. It is fundamentally dependent on stable, functioning ecosystems and a healthy biosphere. These foundations for health are at risk from climate change and ecological degradation.

Health as a driver for mitigation and adaptation

The impact of climate change on health is one of the most significant measures of harm associated with our warming planet. Protecting health is therefore one of the most important motivations for climate action.

Climate change is affecting human health in multiple ways: both direct – through extreme weather events, food and water insecurity and infectious diseases – and indirect – through economic instability, migration and as a driver of conflict.

The risks to health from climate change are very large and will affect all populations, but particularly children, women and poorer people and those in developing nations. Urgent and sustained emissions reductions as well as effective adaptation are needed.

Climate action can deliver many benefits to health worldwide. Reducing fossil fuel consumption simultaneously improves air quality and improves public health. Shifting to cleaner, safer, low carbon energy systems will save millions of lives each year. Moving to more active lifestyles and expansion of and access to public transport systems can improve health through increased physical activity and reduced air pollution. Improving insulation in homes and buildings can protect people from extreme temperatures and reduce energy consumption. All of these changes will provide significant economic savings. Climate action that recognises these benefits can improve the health of individuals and communities, support resilient and sustainable development, and improve global equity.

What we seek from climate action

Recognising health in all policies and strengthening health systems globally can advance human rights and help create safe, resilient, adaptable, and sustainable communities.

We call for:

1. The health impacts of climate change to be taken into account domestically and globally

Health impacts and co-benefits to be fully evaluated, costed and reflected in all domestic, regional and global climate decisions on both mitigation and adaptation;

- Health and environmental costs to be reflected in corporate and national accounts;
- Assessment of loss and damage from climate change to include impacts on human health, wellbeing and community resilience, as well as impacts to health care infrastructure and systems;

2. Investment in climate mitigation and adaptation to be significantly increased on a rapid timescale

Priority given to decarbonisation of national and global energy supplies;

- Cessation of fossil fuel subsidies globally and greater funding for renewable and clean technologies;
- Funding for programs to support and protect health in vulnerable countries to be significantly increased;
- Investment in adaptation and mitigation programs that can demonstrate health benefits to be substantially increased;

3. The health sector and the community to be engaged and informed on climate action

The health sector to be engaged and included in the processes of designing and leading climate mitigation and adaptation worldwide;

- National and global education programs to increase public awareness of the health effects of climate change and promote the health co-benefits of low carbon pathways; and
- More inclusive consultation processes in global climate negotiations to reflect the views of young people, women and indigenous people.

Our Future

Human health is profoundly threatened by our global failure to halt emissions growth and curb climate change. As representatives of health communities around the world, we argue that strategies to achieve rapid and sustained emissions reductions and protect health must be implemented in a time frame to avert further loss and damage.

We recognise that this will require exceptional courage and leadership from our political, business and civil society leaders, including the health sector; acceptance from the global community about the threats to health posed by our current path; and a willingness to act to realise the many benefits of creating low carbon, healthy, sustainable and resilient societies.

'You cannot tackle hunger, disease, and poverty unless you can also provide people with a healthy ecosystem' - Gro Harlem Brundtland

Signatories to the Doha Declaration on Climate Health and Wellbeing

[Alderhey NHS Trust](#)
[Architects Designers and Planners for Social Responsibility](#)
[Asian Medical Students' Association](#)
[L'Associació d'Estudiants de Ciències de la Salut](#)
[Australian Association of Social Workers](#)
[Australian Croatian Community Services](#)
[Australian Healthcare & Hospitals Association](#)
[Australian Health Promotion Association](#)
[Australian Medical Students' Association \(AMSA\)](#)
[Ayurvedic Practitioners Association](#)
[Barking, Havering and Redbridge University](#)
[Hospitals NHS Trust](#)
[Benevolent Organisation for Development, Health & Insight](#)
[British Society of Gastroenterologists](#)
[C3 Collaborating for Health](#)
[Cambridge University Hospitals](#)
[Canadian Association of Physicians for the Environment](#)
[Canadian Nurses Association](#)
[Centre for Sustainable Healthcare](#)
[Chainama College of Health Sciences, Zambia](#)
[The Chartered Institute of Environmental Health Climate and Health Alliance](#)
[Climate and Health Council \(UK\)](#)
[Climate Change Adaptation Research Network for Human Health](#)
[Climate Emergency Institute](#)
[CNMSE](#)
[Collège Intermutualiste National](#)
[Curtin University School of Public Health](#)
[Doctors for the Environment, Australia](#)
[Doctors Reform Society of Australia](#)
[European Central Council of Homeopaths](#)
[European Lung Foundation](#)
[European Public Health Alliance \(EPHA\)](#)
[European Public Health Association](#)
[European Respiratory Society](#)
[Fundación Vivo Sano](#)
[Global Advocacy for Physical Activity](#)
[Health and Climate Foundation](#)
[Health and Environment Alliance \(HEAL\)](#)
[Health Care Without Harm](#)
[Healthy Planet UK](#)
[The Humanitarian Centre](#)
[Institute of Public Health in Ireland](#)
[International Council of Nurses](#)
[International Diabetes Federation](#)
[International Federation of Medical Students' Associations \(IFMSA\)](#)
[International Federation of Gynecology and Obstetrics](#)
[International Primary Care Respiratory Group](#)
[International Society of Doctors for the Environment](#)
[International Women's Health Coalition](#)
[Italian Society of Doctors for the Environment](#)
[Jockey Club School of Public Health and Primary Care, Hong Kong](#)
[Kent and Medway PCT Cluster](#)
[Kooweerup Health Service Center](#)
[Liverpool Womens' NHS Trust](#)
[Medical Association for the Prevention of War](#)
[Medical Students for Global Awareness](#)
[Medsin-UK](#)
[National Medical Association, Russia](#)
[New Community Quarterly](#)
[NHS Sustainable Development Unit](#)
[Norwegian Medical Association](#)
[OraTaiao: The New Zealand Climate & Health Council](#)
[Projeto Hospitais Saudáveis](#)
[Public Health Association of Australia](#)
[Réseau Environnement-Santé](#)
[Royal College of Anaesthetists](#)
[Royal College of General Practitioners \(UK\)](#)
[Royal College of Physicians \(UK\)](#)
[Rwanda #YACA](#)
[SAHA Institute](#)
[Soil Association](#)
[South African Academy of Family Physicians](#)
[South African Medical Association](#)
[Umeå Center for Global Health Research](#)
[Victorian Aboriginal Community Controlled Health Organisation](#)
[Whittington Health](#)
[Women's Health East Australia](#)
[Women's Health Loddon Mallee](#)
[Women's Health In the North](#)
[World Cancer Research Fund](#)
[World Diabetes Foundation](#)
[World Medical Association](#)