

The Call to Action on Climate Health and Equity

Remarks as Delivered

June 24, 2019

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Moderator: Rear Admiral retired Boris Lushniak, MD, MPH

- We are here today to declare that climate change is a health emergency. Climate change is already harming the health, safety and wellbeing of every American living today and if it is not addressed, will bring untold harm to all our children and grandchildren.
- The more than 70 leading organizations that have signed onto the statement are calling on government, business and civic leaders to heed this urgent call to action by taking the steps we outline in the Policy Action Agenda for Climate, Health and Equity, which we are releasing today.
- Who are we? We are an unprecedented coalition of organizations representing the entire health sector – doctors, nurses, public and environmental health professionals, health volunteers and hospital systems – who have come together to urge action and endorse this Policy Action Agenda.
- We have four speakers whom I will introduce in a moment. They will speak to you very briefly about the health harms we are witnessing, what must be done to address them, and the many health benefits of climate action. We also have a number of other health professionals who are available to speak with you.
- Before I introduce the speakers, I want to share why I am here today—and why this Policy Action Agenda is so critical:

- First, the changes happening to our warming climate - such as increased frequency of extreme heat events, extreme weather events and air pollution – are harming health in communities across the nation today, and threatening the future health of all of us, but they are harming first and worst the most vulnerable people among us who often have the fewest resources to protect themselves – it's our youngest, oldest, and sickest, and those in low income and communities of color. I have spent my career focused on these inequities and we are proposing solutions that can simultaneously address climate change and turn the tide on health inequities.
- Second, the Policy Action Agenda we are releasing today makes clear that not only are climate change and health linked—the solutions to both are the same. Climate solutions are health solutions and many of our most important health solutions are also climate solutions. Following this policy roadmap will not just protect us from the worst health harms of climate change, but will also lead us to a healthier and more equitable future.
- Finally, we are well aware that we are initiating this effort at an important moment when our Nation's attention is increasingly focused on the most important issues we face and how we should address them. Our goal is to influence this national conversation at this critical moment. We are providing our leaders at all levels and with a meaningful path forward.
- Now I'd like to introduce the first of our four speakers, each of who will speak very briefly and then we will take your questions. The first speaker is Dr. Aparna Bole, who will speak on behalf of the American Academy of Pediatrics.

A focus on patients and equity

Speaker: Aparna Bole, MD, FAAP, incoming chair, American Academy of Pediatrics Council on Environmental Health

- My name is Dr. Aparna Bole, and I am a pediatrician and incoming chair of the American Academy of Pediatrics Council on Environmental Health. The AAP is a non-profit professional organization of 67,000 primary care pediatricians, pediatric medical sub-specialists, and pediatric surgical specialists dedicated to

the health, safety and well-being of infants, children, adolescents, and young adults.

- When I say that I'm a pediatrician, people are often surprised to learn about my work in environmental health and climate change. But **climate change is a public health issue that disproportionately affects children.**
- Climate change is already affecting the health of the children I care for in Cleveland, Ohio – by, for example, affecting our air quality, and causing increasingly frequent extreme precipitation and extreme heat events. I have one young patient who I saw at the end of the school year. He has both obesity and asthma. When I was conducting his physical, I learned that he signed up for summer sports, which was wonderful, but I had to provide a caveat about checking for air quality advisory days and avoiding playing outside on those days because he is at high risk for asthma exacerbation. Even though it was good for his health for my patient to be active and play outside, I had to qualify the risks because we fail to ensure he has safe air to breathe.
- Climate change makes these ozone action days worse and more frequent. In my community, burning fossil fuels contribute to not just asthma exacerbations but also poor birth outcomes like low birth weight and prematurity, both risk factors for infant mortality. Even prenatal exposure leads to neurodevelopmental delays that negatively impact school readiness, which is an important foundation for a child's academic success.
- In the population I serve, **over one in five children has asthma.** One in five. This is over twice the national prevalence of childhood asthma and partly reflects the fact that African American kids are disproportionately affected. We also have unacceptably high rates of infant mortality, and contend with multiple risk factors contributing to kids' decreased school readiness. In short, the health impacts of air pollution affect my patients every day.
- I'm not saying anything new; thousands of scientific studies have provided an overwhelming amount of knowledge about the ways in which air pollution and climate change harms health, especially for children. Across the country today, children are suffering from health consequences of climate change including catastrophic wildfires and damaging hurricanes, and a three-fold increase in vector-borne infections over the last decade.

- As a pediatrician, I am proud to be here to advocate for kids' health by speaking to the short and long-term health consequences of climate change and air pollution on my patients and in my community.

Change how we get energy and move around to tackle climate change and improve health through cleaner air immediately

Speaker: Deborah Brown, Chief Mission Officer, American Lung Association

- Thank you for the opportunity to speak today. The American Lung Association is pleased to support the “Call to Action on Climate, Health and Equity.” Action on climate change is critical to saving lives by improving lung health and preventing lung disease.
- Our annual “State of the Air” report has shown for the past few years that warmer temperatures and changing weather patterns are degrading air quality in large parts of the United States, leading to dangerous upticks in ozone pollution and particle pollution from worsening wildfires.
- To protect the progress we have made in reducing air pollution in the United States, our nation’s leaders at every level must support action to combat climate change immediately.
- The “Call to Action” outlines necessary changes in the energy and transportation sectors that are essential to reducing the emissions that drive climate change. Making these changes will also result in immediate health improvements by reducing other pollutants emitted into the air we breathe. In other words: **what is good for the climate is also good for our health.**
 - Specifically, we support action to rapidly transition away from the use of coal, oil and natural gas to clean, safe, and renewable energy and energy efficiency.
 - Coal-burning power plants emit many harmful and toxic pollutants, including: acid gases; arsenic and other metals that cause cancer; mercury, which can permanently damage babies’ brains, and deadly particle pollution.
 - We must also transition to zero-carbon transportation as quickly as possible. Burning gasoline and diesel fuel releases many harmful pollutants into the air we breathe, including: particulate matter, nitrogen oxides, carbon monoxide and volatile organic compounds (VOCs), as well as carbon dioxide. VOCs can react with nitrogen oxides to produce ozone pollution.

- In addition to transitioning to cleaner vehicles, active transportation like walking and biking will further improve health.
- The transition away from fossil-fuel based energy and transportation will dramatically improve health outcomes, in both the immediate and the distant future.
- Furthermore, while everyone's health is at risk, some populations bear a disproportionate risk burden. Many people living in lower-income communities and communities of color – who are disproportionately suffering from fossil fuel pollution – will also be at increased risk from climate change impacts.
- Changes in our energy and transportation systems can and must immediately benefit these front-line communities.
- Lastly, climate change is a global issue, and requires global cooperation to address. The United States must meet and strengthen greenhouse gas emission reduction commitments and support the Paris Climate Agreement.

Building resilient communities in the face of climate change

Speaker: Dr. Laura Anderko, PhD, RN, Professor and Director, Mid-Atlantic Center for Children's Health and the Environment, Georgetown University School of Nursing & Health Studies

Good morning. My name is Dr. Laura Anderko. I am a public health nurse and professor who serves as Director of the Mid-Atlantic Center for Children's Health and the Environment, one of ten federally funded Pediatric Environmental Health Specialty Units throughout the country. Our goal is to improve reproductive and children's environmental health through education and consultation. There is no fee for our services.

Children are especially vulnerable to the health effects from pollution when compared to adults. Their bodies are still developing, placing them at greater risk for climate-related disease. Research is emerging that links brain damage and learning disabilities with air pollution. These pollutants can cross the placenta during pregnancy, leading to life-long health conditions in children. Our Center is engaged with communities to increase resiliency when confronted with a variety of climate changes, leading to environmental impacts such as air pollution, and

related health effects, ranging from heart disease to asthma.

For example, we are working closely with schools (principals, teachers, families, students) to increase their knowledge about the health hazards of climate change and air quality. We know that as the temperature heats up, air quality goes down. They learn when extreme heat days may be unhealthy for playing outside. We use the EPA Air Quality Flag program which uses colored flags based on the Air Quality Index to provide guidance about safe outdoor activity. In the DC area, most summer days are “orange” flag days, which means they are unfit for sensitive populations (such as those with asthma) to be outdoors. This program helps to increase resiliency and reduce school absenteeism by helping to prepare for these changes (such as limiting time outdoors, and/or bringing rescue inhalers).

An increase in droughts and wildfires in some parts of the US has heightened concerns about not only safety, but the long-term health effects from the toxic air created. The Pediatric Environmental Health Specialty Unit network in partnership with USEPA, created a fact sheet for families about protecting children’s health from wildfire smoke.

These are just a few examples of how communities are responding to climate change to protect their children’s health.

- Protecting and improving our children’s health will depend upon our investment in clean air and a safe, sustainable drinking water supply.
- We must make major climate-targeted investments for state and local health departments to address climate-related community health risks and support healthy public policy that protects our air and water.

Engage the health care sector in climate solutions

Speaker: Jeffrey Thompson, MD, Executive Advisor, CEO Emeritus, Gundersen Health System, chair of the Health Care Without Harm board of directors

- Hospital leaders know that climate change is a health emergency because our hospitals and medical professionals are serving on the front lines.

- In just the past few years, communities across the U.S. have been devastated by climate-related events such as the historic California wildfires, devastating tropical storms and hurricanes that have hit Texas, Florida, North Carolina, and Puerto Rico, and, most recently, floods that put many communities in our heartland under water.
- These devastating events have costs lives and caused pain and suffering for thousands, while also leading to the closure of community hospitals, shortages of essential medical supplies, and billions of dollars in health care damages.
 - In the aftermath of Hurricane Maria, many emergency medicine physicians throughout the U.S. were forced to ration critical IV fluids after the hurricane damaged a major producer of IV bags in Puerto Rico. This shortage persisted for months and into flu season. Imagine having to tell a worried mother that you couldn't give her child fluids that could help him.
 - Last fall, a nurse described her harrowing escape from the fire that engulfed the community of Paradise, CA and the hospital where she worked. Along with other brave staff, many who used their own vehicles, she helped evacuate 280 patients, including elderly, newborn babies, and other critical patients. They barely made it out with their lives and now that hospital is permanently closed, leaving hospital employees without jobs, and no hospital for those hoping to rebuild.
- These are just two examples, but there are many more.
- That's why 23 U.S. health systems, representing 450 hospitals, have made public commitments to address climate change as part of the Health Care Climate Challenge by setting ambitious carbon reduction and renewable energy goals, investing in climate-ready hospitals and resilient communities, and demonstrating leadership to support our economy's rapid transition to a 100 percent clean energy.
- Share Gundersen's story.

- Gundersen was the first health system in the country to be energy independent, relying only on renewable energy sources, and we did it in Wisconsin, which has a climate that requires lots of heating in winter and AC in summer.
- Since 2008, Gundersen Health reduced greenhouse gas emissions by 95% and saved \$17.1 million dollars through energy efficiency.
- We did this to make the air better for our patients to breathe, control our rising energy costs and help our local economy. We believe we have made more progress on all three than anyone else in the country.

- Other health care leaders are demonstrating leadership to address climate change to improve the health of our communities, saves millions of dollars, and create local jobs.

- We also know we cannot do this alone. That's why we're calling on policymakers to work with us if we are to prevent the worst health impacts of climate change. Specifically, we are calling for:
 - Climate change risks and projections to be integrated into all federal, state, and local public health planning and programs, working in close collaboration with hospitals as community anchors.
 - A public-private task force to assess the climate-readiness of our nation's health care system and to recommend strategies and investments to improve it.
 - Policy makers to prioritize investments in our hospitals and health care infrastructure to make sure our facilities are ready to weather the increasing number of severe storms so we can be safe havens for our communities when they need us the most.

- I know the health sector can do much more, and I urge my fellow health care leaders to embrace their ethical imperative to "first, do no harm" and join me in protecting the nation's health and health care delivery from the impacts of climate change. At the same time, the health care sector calls for policymakers to work with us to advance solutions. Together we have tremendous potential to create a health system that truly heals, and healthy, vibrant communities where every child can breathe clean air and has the opportunity to grow up healthy and strong.

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