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HEALTH REPORTER: focus on environmental change, health and development 8 May 2007

produced by the [IDS Health and Development Information](#) team in collaboration with [Eldis](#) and the [DFID Health Resource Centre](#)

This is our monthly email bulletin, bringing together research to inform policy debates on health in developing countries.

The Health Reporter aims to provide readers with a more in-depth look at a particular area of health policy. This month's theme is [environmental change, health and development](#). The bulletin also features summaries of new documents and other additions to the [Health Resource Guide](#)

[Health Reporter archive](#) - an archive is now available on the Health Resource Guide. See previous issues of the Health Reporter at www.eldis.org/health/archive.htm

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Feature: environmental change, health and development

The theme of the 2007 World Health Day and World Health Report is "international health security", focusing on risks to human health that transcend international borders and impact on the collective security of people around the world. The World Health Organization identifies environmental change as a key issue that threatens human health. Climate change, partly the responsibility of human activity, is a significant contributor to environmental change. It has been estimated that human-induced climate change causes 150,000 deaths a year.

The impacts of climate change on human health are multiple and complex. Extreme weather conditions such as heat waves, floods and droughts have direct health effects, and warmer temperatures are changing the spread of insect-borne diseases, putting more populations at risk of diseases including malaria and dengue fever.

Environmental change will also have long-term influences: persistent droughts hinder agricultural production and shrinking glaciers disrupt fresh-water supplies. These harmful effects on food production and drinking water can potentially have far reaching consequences for human health by exacerbating malnutrition and diarrhoea. Malnutrition is already the underlying cause of half of all deaths among children under five; it weakens the immune system and makes diseases worse.

Many developing countries are vulnerable to the health risks arising from climate change because health systems are not well prepared to plan for or cope with emergencies, and increases in disease and malnutrition will strain existing services. Scaling up water and sanitation services can help to reduce some of the health impacts of environmental change, and adaptation measures are required to secure food and water supplies. Ultimately, however, to protect human health in the long-term, the underlying causes of climate change must be addressed. This requires political commitment and financial resources geared towards sustainable development and the protection of ecosystems.

For more information see:

- Eldis resource guide on climate change
www.eldis.org/climate/index.htm
- Centre on global change and health, London School of Hygiene and Tropical Medicine
www.lshtm.ac.uk/cgch/climate.html
- World Health Organization section on climate change and health
www.who.int/globalchange/climate/en/
- United Nations Environment Programme
www.unep.org/

Recommended readings on environmental change, health and development

Global climate change: implications for international public health policy

Authors: Campbell-Lendrum, D.; Corvalan, C.; Neira, M.

Produced by: Bulletin of the World Health Organization (WHO): the International Journal of Public Health (2007)

This article considers the health impacts of climate change and discusses policies and interventions to address these effects. Many of the most important global killers including malaria and diarrhoea are highly sensitive to climatic conditions, yet a comprehensive strategy to support a public health response is lacking. The paper discusses preventative environmental health interventions including scaling up water and sanitation services and providing point-of-use disinfection; and examines integrated measures that address the root causes of vulnerability to natural disasters. Post flooding health effects can be reduced by adequately planned and funded health-sector responses, including interventions to control outbreaks of vector-borne and water-related diseases.

The paper concludes that climate change strains existing weak points in health protection systems and calls for reconsideration of public health priorities. The most effective priorities are likely to be strengthening of the key functions of environmental management, surveillance and response to safeguard health from natural disasters and changes in infectious disease patterns, and a more pro-active approach to ensure that development decisions serve the ultimate goal of improving human health. [adapted from author]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23517>

Climate Change 2007: Climate Change Impacts, Adaptation and Vulnerability. Summary for Policymakers

Authors: IPCC Working Group II of the Fourth Assessment Report

Produced by: Intergovernmental Panel on Climate Change (IPCC) (2007)

This report sets out the key policy-relevant findings of the Fourth Assessment (also known as AR4) of Working Group II of the Intergovernmental Panel on Climate Change (IPCC). The Assessment is of current scientific understanding of impacts of climate change on natural and human systems, how well these systems are able to adapt and their vulnerability. The report addresses issues such as managing freshwater resources, impacts on lake and river systems, food security and agriculture impacts, and human health. AR4 builds on past IPCC assessments and incorporates new knowledge gained since the Third Assessment, completed in 2001.

With regard to current observed effects as well as projected future climate change impacts, the report's findings include:

- many natural systems are being affected by regional climate changes, particularly temperature increases
- it is likely that anthropogenic warming has had an influence on many physical and biological systems
- some regional impacts are difficult to identify due to adaptation processes and non-climatic drivers of change.
- more specific information is now available across a wide range of systems, sectors and regions are now able to be estimated more systematically for a range of possible increases in global average temperature
- Impacts due to altered frequencies and intensities of extreme weather, climate, and sea level events are very likely to change
- some large-scale climate events have the potential to cause very large impacts, especially after the 21st century

Current knowledge with regard to adapting to the impacts of climate change include:

- some adaptation is occurring now, but on a limited basis
- adaptation will be necessary to address impacts resulting from the warming which is already unavoidable due to past emissions
- a wide array of adaptation options is available, but more extensive adaptation than is currently occurring is required to reduce vulnerability to future climate change. The barriers, limits and costs, are not yet fully understood
- vulnerability to climate change can be exacerbated by the presence of other stresses
- future vulnerability depends not only on climate change but also on development pathway
- sustainable development can reduce vulnerability to climate change, and climate change could impede nations' abilities to achieve sustainable development pathways
- many impacts can be avoided, reduced or delayed by mitigation
- a portfolio of adaptation and mitigation measures can diminish the risks associated with climate change
- impacts of climate change will vary regionally but overall they are very likely to imposing costs as global temperatures increase.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC24116>

Climate change futures: health, ecological and economic dimensions

Authors: Epstein, P.R.; Mills, E. (eds.)

Produced by: Center for health and the global environment. Harvard Medical School (2005)

This paper documents a multi-dimensional assessment of climate change, with a particular focus on human health aspects alongside the ecological and economic impacts. The study also ties in the important concept of risk assessment, saying that the insurance industry will be both absorbing risk and, through its pricing and recommendations, helping business and society adapt to and reduce these new risks.

The Climate Change Futures study is comprised of three main elements: trends, case studies and scenarios, which detail and analyse current climate change related consequences for human health, ecological systems and the global economy. The central premise is that climate change will affect the health of humans as well as the ecosystems and species on which we depend, and that these health impacts will have economic consequences. The case studies outline current effects of climate change with regard to infectious diseases such as malaria, Lyme disease and asthma; extreme weather events; and various ecosystems. Economic implications as well as possible near-future impacts are projected for each case. Furthermore, two climate scenarios are developed which examine how the possible impacts of climate change could impose severe strains on the financial sector.

The key points communicated by the report include:

- warming favours the spread of disease
- extreme weather events create conditions conducive to disease outbreaks
- climate change and infectious diseases threaten ecosystems, which provide us with essential resources and constitute our life-support systems
- some impacts of warming and greater weather volatility could occur suddenly and become widespread
- coastal human communities, coral reefs and forests are particularly vulnerable to warming and disease, especially as the return time between extremes shortens
- an increasingly unstable climate could shift and settle into a new equilibrium, allowing a measure of adaptation and the opportunity to rapidly reduce fossil fuel combustion and deforestation
- a well-funded, well-insured programme to develop and distribute a diverse suite of means to generate clean energy offers enormous business opportunities and may present the most secure means of restabilising the climate
- solutions to the emerging energy crisis must be thoroughly scrutinised as to their life cycle impacts on health and safety, environmental integrity, global security and the international economy

The editors hope that the report will not only help businesses avoid risks, but also identify opportunities and solutions. With early action and innovative policies, business can enhance the world's ability to adapt to change and help restabilise the climate.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC20184>

The impact of climate change on the health of the poor

Authors: DFID

Produced by: Department for International Development (DFID), UK (2004)

This DFID key sheet aimed at DFID staff and development partners considers the impact of climate change on the health of the world's poor, and explores tools for adaptation to climate change. Health-related impacts of climate change include: increased water insecurity and food insecurity caused by variations in seasonal rainfall; reduced water quality due to flooding and drought, linked to an increase in water-borne diseases such as cholera and other diarrhoeal diseases; and increased humidity and temperatures, which encourage the spread of vector-borne diseases including malaria and dengue

fever. Extreme climatic events or "shocks" can also disrupt health services through damage to facilities and transport networks.

The key sheet stresses that health vulnerabilities to climate change should be addressed through the strengthening of planning systems, a multisectoral approach, improved preparedness, and a greater emphasis on prevention. Key recommendations include: allocation of additional funds for rebuilding health services and restoring access following climatic extremes; improved water and sanitation networks to prevent disease outbreaks associated with flooding or drought; improved surveillance of disease and use of health early warning systems, based on climate, environmental and population movement data; and continued support for preventative control of vector-borne diseases such as malaria.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC16413>

Climate change and human health: risks and responses

Authors: WHO

Produced by: Climate Change and Health, World Health Organization (WHO) (2003)

This report describes the context and process of global climate change, its actual or likely impacts on health, and how human societies and their governments should respond, with particular focus on the health sector.

It argues that climate change is responsible for 2.4 per cent of all cases of diarrhoea worldwide and for 2 per cent of all cases of malaria, according to the most recent figures available. Moreover, an estimated 150,000 deaths and 5.5 million Disability-Adjusted Life Years (DALYS) were caused in the year 2000 due to climate change.

An extended summary of the report is available online.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC13483>

Africa: up in smoke 2

Authors: Magrath, J.; Simms, A.

Produced by: New Economics Foundation (NEF) (2006)

This briefing brings up to date the original report from the Working Group on Climate Change and Development, "Africa: up in smoke?", released in 2005.

Through a number of short case studies the paper describes the impacts of climate change that are already occurring in different countries and region, and discusses the ability of different communities to adapt to these impacts on their livelihoods. It draws on scientific and qualitative studies as well as anecdotal reports of those affected.

The paper emphasises that the onus is on industrialised countries to take the lead in significant cuts in greenhouse gases, and urgently recommends the need to:

- cut rich-country greenhouse gas emissions
- build on Kyoto to toughen up international efforts post-2012
- support essential adaptation in developing countries, particularly in the poorest countries that have contributed least to causing global warming
- empower poor communities to be part of the climate change solution, and avoid focusing too much on the role of new technology
- reduce vulnerability through disaster risk reduction (DRR)
- reform emergency responses to address the underlying causes of food insecurity and deliver long-term solutions to food crises and insecurity
- tackle poverty by providing rural livelihoods for the most vulnerable and boosting small-scale agriculture

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23177>

Other recommended readings

Civil conflict and sleeping sickness in Africa in general and Uganda in particular

Authors: Ford, L. B.

Produced by: Conflict and health (2007)

This article, published in Conflict and Health journal, reviews the processes by which conflict has contributed to the occurrence of sleeping sickness in Africa. In particular, the paper focuses on sleeping sickness in south-eastern Uganda, where incidence increase is expected to continue. The paper describes the different ways in which conflict increases the risk of individuals contracting sleeping sickness including: degradation of health systems and services; internal displacement of populations; regional insecurity; and reduced access to humanitarian support.

The paper concludes that conflict is an important determinant of sleeping sickness outbreaks in sub-Saharan Africa. In some parts of Uganda, it is likely that two sub-species of sleeping sickness will merge in the absence of immediate and targeted intervention. This will dramatically increase the burden of disease and make controlling the spread more difficult. The authors recommend that to reduce the risk of sleeping sickness in affected countries requires increased international focus on the development of administrative policy, capacity, integration, and infrastructure to implement localised control strategies. In addition, national and international authorities should explicitly integrate consideration of conflict and its impacts into mapping and targeting of regions for priority intervention.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC24097>

Greater DFID and EC leadership on chronic malnutrition: opportunities and constraints

Authors: Sumner, A.; Lindstrom, J.; Haddad, L.

Produced by: Institute of Development Studies (IDS), Sussex, UK (2007)

This report by the Institute of Development Studies and commissioned by Save the Children UK (SC UK) assesses the commitment currently demonstrated by the United Kingdom (UK) Department For International Development (DFID) and the European Commission (EC) to reducing chronic malnutrition. The report finds that whilst chronic malnutrition is widely recognised by both DFID and the EC as crucial to reducing child mortality and morbidity, nutrition is seen as a supporting investment rather than a foundational one. The report identifies 10 reasons for this including: chronic malnutrition is seen as everybody's business and nobody's responsibility; it is difficult to track spending flows on nutrition and to attribute the impact of indirect nutrition interventions on nutrition status.

The report concludes that DFID and the EC could do more on nutrition within the constraints under which they currently operate. In addition, there seem to be several opportunities for SC UK to support DFID and the EC in this regard. For instance the paper recommends that: SC UK lobby to get more nutrition indicators into key institutional reporting requirements; link malnutrition to governance and rights language; and pressure DFID and the EC to undertake a high-profile report on the Economics of Child Undernutrition.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC24220>

Partners in impact: results report

Authors: Global Fund

Produced by: The Global Fund to Fight AIDS, Tuberculosis & Malaria (2007)

This report presents the results, progress and challenges of the Global Fund to fight AIDS, Tuberculosis and Malaria (Global Fund). The report highlights key achievements: Global Fund supported programmes have significantly expanded the delivery of key services with 770,000 people currently on antiretroviral treatment (ART) for HIV, 2 million people on tuberculosis treatment under directly-observed treatment short-course (DOTS), and 18 million insecticide-treated bednets (ITNs) distributed to protect families from malaria. It estimates that between the set up of the Global Fund in 2002 and December 2006 1.25 million lives have been saved.

The report focuses on partnerships and assesses the strengths, weaknesses and areas for improvement. Other areas of

focus include: poverty, health systems and fragile states; the 'human resources for health' gap; flexible implementation; and populations most in need, vulnerable groups and gender issues. The report concludes that it is possible to work with partners to achieve impact against AIDS, TB and malaria. Impact towards the Millennium Development Goals will require a different level of sustainable financing. The potential to achieve impact provides an opportunity to prove the effectiveness of development finance and increase funding for AIDS, TB and Malaria.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC24236>

Poor access to health services: ways Ethiopia is overcoming it

Authors: Chaya, N.

Produced by: Population Action International (PAI) (2007)

This Population Action International research paper describes ways in which Ethiopia is working to improve access to health services and address inequities in health service delivery. The paper highlights two initiatives: a government-led community health service delivery programme that is national in scale; and a locally-developed initiative - Kembatta Women's Self-Help Centre - which has been working to empower women at the individual level and change attitudes towards gender norms that adversely affect health. The paper discusses activities of the centre including: introducing reproductive health curricular into local schools, constructing clinics for maternal and child health and for HIV and AIDS testing, and preparing adults and young people to be community-based health workers and classroom peer educators.

The paper concludes that poor transportation infrastructure and the limited reach of formal public sector health infrastructure prevent poor people and those in remote areas from accessing health services. Strengthening the primary health care system and decentralising health service provision facilitates reaching those living in remote and hard to reach rural areas. At the same time, mobilising, educating and training communities and individuals is empowering to communities and individuals in these communities.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC24238>

Estimated global resources needed to attain universal coverage of maternal and newborn health services

Authors: Johns, B.; Sigurbjornsdottir, K.; Fogstad, H.; et al

Produced by: Bulletin of the World Health Organization (WHO): the International Journal of Public Health (2007)

This paper in the Bulletin of the World Health Organization (WHO) estimates the amount of additional resources that are needed to scale up maternal and newborn health services in order to reach the Millennium Development Goals, specifically goal 5 (to improve maternal health), goal 4 (to reduce child mortality), and goal 6 (to combat HIV and AIDS, malaria and other diseases). Using a costing model based on WHO guidelines, the authors estimate the incremental resource needs for maternal and newborn health care in 75 countries. This includes the costs of care during pregnancy, childbirth, the neonatal period, the postpartum period, and also the costs of post-partum family planning and counselling, abortion and post abortion care.

The results show that a minimum yearly average increase in resources of US\$3.9 billion is needed for a moderate scale-up scenario. When more rapid rates of scale-up are assumed, the minimum yearly cost is US\$ 5.6 billion. The paper concludes that these projections of future financial costs may be used as a starting point for mobilising global resources, and can serve as a goal towards which donors can direct their plans. [adapted from author]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC24120>

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currently has three flagship products:

- Health Resource Guide - www.eldis.org/health
- Health Systems Resource Guide - www.eldis.org/healthsystems
- HIV and AIDS Resource Guide - www.eldis.org/hivaids

The HRC provides access to technical assistance and information for the Department for International Development (DFID UK), and its partners, in support of pro-poor health policies as well as health systems, service delivery and public health topics and programmes.

Eldis currently includes descriptions and links to over 4,500 organisations and over 16,000 full-text online documents covering development and environmental issues. It can be searched or browsed free over the Internet.

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Eldis is funded by DFID, Sida, SDC and NORAD, and hosted by the Institute of Development Studies, Sussex, UK.

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Contact details:

Rebecca Wolfe
IDS Health and Development Information Team
Institute of Development Studies, Sussex
Brighton BN1 9RE, UK

Email: r.wolfe@ids.ac.uk
Tel: 44 1273 877 540
Fax: 44 1273 621202