



**ABU DHABI**  
SUSTAINABILITY WEEK

GLOBAL HEALTH AND  
CLIMATE CHANGE  
**INEXTRICABLY  
INTERLINKED**



# Introduction

Climate change has not only impacted the health of the planet, but of its people as well, as the World Health Organisation (WHO) estimates that 250,000 additional deaths will be caused every year between 2030 and 2050 from malnutrition, malaria, diarrhoea, and heat stress. Its direct cost to health is estimated to reach between US\$2 billion and US\$4 billion a year by 2030, with hunger, drought and disease set to affect tens of millions of people within decades, according to a United Nations assessment that lays bare the dire human consequences of climate change.



In June 2021, Abu Dhabi Sustainability Week gathered experts from government and industry to explore the intersection between climate change

and global health, as well as gender equity within the healthcare sector and how work in these fields has changed since the COVID-19 pandemic.

# ADSW Web Series, June 2021

In the eighth episode of the ADSW Web Series, “Mitigating the Impact of the Climate Crisis on Global Health Challenges”, Tala Ismail Al Ramahi, Associate Director within the Office of Strategic Affairs at the Crown Prince Court of Abu Dhabi, spoke of the timely and critical need to discuss such a topic, as we witness the effects of climate change around the world. And while climate change has been an increasing priority within the global policy agenda, she believes more can be said and done about how critical it is to address the intersection between climate change and global health.

She referred to malaria as one of the oldest and deadliest diseases, devastating families, communities, and countries around the world. In 2019 alone, malaria claimed 409,000 lives and accounts for half of the missed days in African

schools. Through its Reaching the Last Mile campaign, the Crown Prince Court is a proud partner of Malaria No More, with the noble mission to end all deaths caused by malaria. Launched in February 2020, the organisation is focused on ending malaria within our lifetime or sooner. Its specific role is to mobilise the political will, global resources and the innovations to accomplish that goal and live up to its name. “We are making tremendous progress, with huge declines in malaria over the last 20 years,” said Martin Edlund, Founding Member and Chief Executive Officer at Malaria No More.

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## Martin Edlund

Founding Member and Chief Executive Officer at Malaria No More



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One of the ways in which the organisation is working on eradication is through its Forecasting Healthy Futures, a project it developed with the Crown Prince Court and Reaching the Last Mile to accelerate efforts to eliminate malaria and other mosquito-borne diseases, using weather and health data. “It is remarkable how central conversations about climate and health are today, maybe especially in the

context of the COVID-19 pandemic,” Edlund added. “You do not have to look very hard to see the impact of climate and weather change on health.”

He mentioned the WHO, which has a four-part framework for defining these impacts, including extreme heat, natural disaster, variable rainfall patterns, and changing patterns of infection. If climate were considered a disease, it would now

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qualify as the world's deadliest, claiming more than seven million lives annually. It is also estimated that nine in 10 people worldwide already breathe polluted air and pollution is responsible for one in eight deaths due to stroke, heart and lung disease, and cancer – a figure that is not evenly distributed. For Edlund, these climate effects mainly jeopardise those who are most vulnerable and living in poorer world communities.

But he expressed optimism, seeing opportunity within such grim statistics. "It is clear that climate change has emerged as the transcendent human challenge of our time and, arguably, one of our greatest health crises," he said. "And yet, when you talk about the political debate, environmental changes tend to focus on long-term consequences, and things that people find abstract – rising temperatures, sea levels, acceleration of species extinction, and increasing severe weather events."

Health helps us focus on the here and now, as well as tangible, measurable impacts. If health can be placed at the centre of the climate debate, it renders the whole climate conversation much more relatable, urgent, and politically salient because the cost of climate change is being shown to every person, everywhere, here and now.



For her part, Al Ramahi shifted the conversation towards global health challenges through a gender equity lens. With pregnant women carrying a much higher risk than others, and the responsibility of childcare, there is a knock-on effect when it comes to malaria as well as many other preventable diseases. Many women pull out of their daily lives to care for their children, which leads to an increased chance of compromising their schooling and missing out on many economic opportunities during their lifetime. As such, bringing a gender lens to malaria and other endemic diseases is crucial as it can accelerate positive health outcomes for everyone. "While women often bear the brunt of many of the diseases and challenges in the global health systems that we are trying to address, they are also driving the solutions," she explained. "The majority of global healthcare workers are women, and many of them are poorly compensated, if compensated at all, and poorly supported. That is why we believe that gender parity is integral and an urgent part of what we do, in addition to addressing the intersection of climate change as well in reaching the last mile of many global health efforts that we are trying to address together."



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The pandemic has exacerbated current global health challenges, shedding light on humanity's need to take action on climate change. But the world rallied to respond to that moment, with 30 national mosquito net distribution campaigns planned for last year, which supplied more than 200 million nets that maintained a high level of prevention and coverage. The largest challenge, however, remains treatment seeking – COVID and malaria share seven of 10 primary symptoms, starting with fever. The common cause of an emerging disease, according to Edlund, is that people become much more passionate, and they stop seeking treatment for more routine diseases like malaria. "We saw this in the context of the Ebola outbreaks in West Africa," he explained.

"They actually had more incremental deaths from malaria because people stopped seeking testing and treatment, then you had deaths from Ebola, in that context. So there is a real fear that that would happen in the context of COVID." The Global Fund, one of his key partners in the malaria fight, has seen a 17 percent decline in testing and treatment seeking through their survey of clinics. Through work in India, much more dramatic declines have been recorded – as much as 50 percent in malaria testing in the context of COVID. The silver lining, however, is that the pandemic has shown experts in the field some potential ways forward, ways to build back better, and ultimately, strengthening the health response.

## RECOMMENDATIONS



**Edlund:** As the world thinks about how to strengthen health systems, how to not only defeat COVID but prepare for the next pandemic, you can build on a lot of the infrastructure that has been put in place for the Malaria campaign, surveillance and data systems, and particularly a focus on frontline community health workers. This is very simple, inexpensive rapid diagnostic tests for malaria, and so you are getting this signal on the frontlines of whether you are seeing a spike in fevers and whether those fevers are malaria.



**Edlund:** We have also responded by looking at the private sector – about 50 percent of the treatment seeking for malaria in Sub Saharan Africa goes through the private sector through clinics and small pharmacies, and there was a real risk in the context of COVID that you would have the mass closure of those frontline clinics. So we have a practice called the Health Finance Coalition and we are focused on innovative finance solutions. We think we are going to reach about 1,700 clinics with these working capital loans, and ultimately, sustained care for about five million people in the context of COVID.



**Al Ramahi:** Our most successful campaign has been the text-to-give campaign, where we had people messaging to commit to give. We have also worked with various partners to activate their own online platforms where people could commit to donate to our campaign, as well as utilising many of the social media apps, which brought in a younger audience into this conversation and into the giving pledge.



**Al Ramahi:** Working closely with our partners and adapting to each of their strengths allowed our campaign to organically flow, mainly into a digital one. Everything is turning digital so it was a great way for us to really push our strategy forward to make sure that we can capitalise on that.



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