Climate Change and the Health of the Public

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Specialists in preventive medicine—indeed, professionals from across the public health and healthcare sectors—have become increasingly aware of the need to think globally. Simply put, global change has profound implications for health and well-being. Climate change is central to this story.

The papers in this special issue of the American Journal of Preventive Medicine provide a state-of-the-art overview of many of the issues at the intersection of climate change and health. The paper by Frumkin and McMichael offers an overview, emphasizing the broad challenges climate change poses to our customary ways of thinking, communicating, and acting to protect health. These themes are carried forward in the commentaries, which address specific domains of concern to preventive medicine: research (Haines); local public health policy (Bloomberg); health protection (Neira); and training (Lawrence and Saundry). The next five papers present current evidence on the health impacts of climate change, including the direct effects of heat (Luber and McGeehin); vectorborne diseases (Gage et al.); waterborne diseases (Patz et al.); and air quality (Kinney). Hess et al. describe the way these and other health effects vary by location, emphasizing the importance of geographic thinking in health and introducing the theme of resilience that threads through several papers in the issue.

Preventive medicine and public health have properly emphasized the role of effective communication, and health communication (often using the techniques of social marketing) has emerged as a key discipline. Climate change requires a thoughtful approach to communication. Current discourse features scientific complexity, considerable uncertainty, ample misinformation, and many vested interests—with the resulting potential to frighten, confuse, and/or alienate people. Those who would communicate about climate change have little evidence to guide them, though themes are starting to emerge. The papers by Semenza et al. and Maibach et al. provide both empirical data and theoretical background on climate change communication, grounded in the insights of health communication and filling important knowledge gaps.

While primary prevention will consist of reducing greenhouse gas emissions (and perhaps of sequestering greenhouse gases already emitted), known as mitigation in the climate science world, much public health activity will focus on adaptation—reducing harm from the effects of climate change. Key principles of adaptation and community resilience are discussed by Ebi and Semenza, and relevant lessons from public health disaster preparedness are described by Keim. Younger et al. expand on the built environment and the concept of co-benefits—the ways in which policies and actions can both address climate change and yield additional health, environmental, and other benefits. Finally, St. Louis and Hess expand the discussion to global health, an appropriate focus since some of the most pressing challenges to health are expected to occur in the world’s poorest nations.

We thank the many scientists whose work has helped define the challenges of climate change in recent years. At CDC, we thank the members of the Climate Change Working Group, and especially Drs. Mike McGeehin and George Luber for their leadership; we are also grateful to the many colleagues who have lent time and expertise to bring health to the fore in the dialogue surrounding climate change. We thank the authors of the papers in this issue for sharing their expertise, the anonymous reviewers for their invaluable feedback, and AJPM Editor-in-Chief Kevin Patrick for his vision and support. We hope that the papers in this issue help inform health professionals about climate change, and stimulate the collective intellect, creativity, dedication, optimism, and collective action we will need to craft effective solutions to protect the public in coming years.

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References


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