



# voices for a healthy future

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The Public Health Institute generates and promotes research, leadership and partnerships to build capacity for strong public health policy, programs, systems and practices.

## Climate Change— The Public Health Imperative

MARY A. PITTMAN

Water. It's the most visible face of climate change. From drought, flood, rising sea levels, hurricanes and basic food production to changing patterns in the spread of malaria and West Nile virus, water is a fundamental factor. Whether too much or not enough, water is an example of just one climate change impact that affects everything and everyone—locally, nationally and globally.

Although climate change has been presented to the public as largely an environmental issue, it is actually an immediate human health threat. Climate change is a complex, systemic challenge that requires a cross-boundary, cross-geography and cross-sector response. A new way of thinking about public health is needed and an expanded climate change dialogue is overdue.

Media reports about distant environmental impacts such as melting icecaps and threatened polar bears are now sadly familiar images. Yet, the public health side is not well examined. The most pronounced health impacts from climate change are projected to include infectious diseases related to changes in vector distribution and biology; water, and food contamination; injuries and fatalities related to severe weather events and heat waves; respiratory and cardiovascular disease related to worsening air pollution; allergic symptoms related to increased allergen production; and nutritional shortages related to

changes in food production. Indirect impacts are likely to include population dislocation, civil conflict and mental health consequences. As with many health challenges, the elderly, children and the poor throughout the world are at highest risk, as many in these populations already face the stress of poor environmental conditions, limited access to health care and financial constraints that will make adapting to such extreme conditions difficult.

**“By perceiving ourselves as part of the river, we take responsibility for the river as a whole.”**

—Vaclav Havel

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Based on an alarming lack of awareness, readiness and resources, public health professionals in the United States have had minimal involvement in most climate planning to date and have not, until just recently, been included in developing approaches to mitigate or adapt to climate change.

Ensuring that climate change is viewed in relation to public health outcomes is essential for many reasons: it can help diffuse the polarizing "economy vs. the environment" debate; it presents an opportunity to change individual behavior by personalizing a complex issue; and it can attract significant political attention. Moreover, by promoting population-based mitigation strategies, public health is uniquely situated to help contain health care costs associated with climate change-related illnesses.

Researchers at Yale and George Mason universities recently found that more Americans are "dismissive" about global warming and fewer Americans are "alarmed." "Gloomy unemployment numbers, public frustration with Washington, attacks on climate science, and mobilized opposition to national climate legislation represent a 'perfect storm' of events that have diminished public concerns about global warming—even among the alarmed," said Anthony Leiserowitz, director of the Yale Project on Climate Change.

There are plenty of uncertainties in predicting the extent to which climate change will impact our health and environment. There are also visible signs, broad scientific agreement and ample climate science data to warrant immediate action. Now is the time for the public health community to recognize climate change as a 21st century leadership imperative. Let's coordinate efforts to foster new partnerships across sectors and borders that respond to the immediate and long-term public health impacts from climate change for the sustainability of our global community. ■

*Mary A. Pittman is president and chief executive officer of the Public Health Institute.*

## Ballot Initiative Threatens to Suspend California's Global Warming Law

Assembly Bill 32—The Global Warming Solutions Act—established California's goal to reduce greenhouse gas emissions to 1990 levels by 2020. The bill also promotes improved public health outcomes by requiring California to consider the overall societal benefits of addressing climate change, including the effect on communities disproportionately impacted by air pollution.

A proposed California referendum, supported by two Texas oil companies—Valero and Tesoro—would suspend AB 32 until the state unemployment rate is 5.5 percent or less for four consecutive calendar quarters. Unemployment has only been that low in California three times in the past 30 years.

Suspending AB 32 would impact public health by eliminating significant health co-benefits of greenhouse gas reduction such as improved respiratory health and reduced incidence of asthma and lung disease caused by air pollution.

# PHI to Launch New Climate Change Center

ALEXANDRA DESTLER

**Scientific and health reports abound stating clearly that there is no greater threat to global health in the 21st century than climate change.**

In a landmark report, the University College of London-Lancet Commission declared a call to action stating "a new advocacy and public health movement is needed urgently to bring together governments, international agencies, nongovernmental organizations (NGOs), communities, and academics from all disciplines to adapt to the effects of climate change on health."

The Public Health Institute is developing the Center for Public Health & Climate Change as part of a comprehensive strategy to address the enormous potential health consequences of climate change. PHI is seizing this opportunity to address existing gaps in knowledge and preparedness, foster innovative leadership capacity, develop new alliances across sectors, and spark swift change within the public health system and beyond for the sustainability of our global community.

With funding from The William and Flora Hewlett Foundation, this center is being designed to provide a centralized and comprehensive resource supporting public health and the broader community to understand and respond to this critical challenge. The PHI center represents a first-of-its-kind virtual education hub focused on mitigation, adaptation and current science about the health impacts of climate change.

This center will offer tools, fact sheets, best practices, applied research and educational programming in a dynamic, user-driven online community. It will promote research and reports from partner organizations and create original content. The hub will include objective, timely policy information, analysis of current legislation and complex aspects of legislation, such as cap and trade.

Through the existence of a "go to" hub surrounded by a social networking and communications strategy, PHI will raise awareness and strengthen readiness and capacity among the public health community and community-based groups to respond and adapt to the public health impacts from climate change at the local, state, national and policy levels.

PHI will present face-to-face workshops and a cross-sector, team-based leadership program designed to complement the center's resource base. This will provide the point of connection that will result in new partnerships and innovative response strategies among public health, health care, the community, supporting NGOs and other partners and leaders. Providing this point of connection allows for the formation of an active learning community whose sum is more capable and stronger than its individual parts.

A more informed public health community and network of cross-sector leaders serving the most vulnerable populations will be better equipped to advocate for public health safeguards in all climate policies, and to serve as frontline change agents positioned to expand the climate change dialogue to more aggressively include public health.

The response to the PHI climate change center has been overwhelmingly affirming from a broad spectrum of constituencies. Our advisors and interested partners include health care institutions, government agencies such as the Environmental Protection Agency, the Centers for Disease Control and Prevention, and the California Department of Public Health, as well as the business, academic and NGO community.

PHI will launch the first stage of the center in 2010. For additional programming information, contact Alexandra Destler, project director, at [adestler@phi.org](mailto:adestler@phi.org).

Alexandra Destler is director of PHI's new Center for Public Health & Climate Change.

# Diversity of Focus

Locally and globally, PHI shares evidence, promotes prevention and builds community in a broad range of public health areas, including:

- Alcohol, Tobacco and Substance Abuse
- Chronic Diseases: Asthma, Cancer, Diabetes, Cardiovascular and Tuberculosis
- Climate Change and Public Health
- Communicable and Infectious Diseases, including HIV/AIDS
- Community Health
- Disability
- Environmental Health
- Family Planning and Reproductive Health
- Genetics
- Global Health
- Health Policy Research
- Healthy Aging
- Leadership Development
- Maternal & Child Health
- Media Advocacy
- Mental Health
- Nutrition, Physical Activity and Obesity Prevention
- Occupational Health
- Organizational Development
- Program Evaluation
- Social & Behavioral Science
- Technology in Health & Aging

## Population Growth and Climate Change: A Global Perspective

SUZANNE PETRONI

Many see the current attention to climate change as an opening to make the case that global warming cannot be alleviated or reversed without slowing global population growth. Others worry, however, that linking population growth and climate change could jeopardize the hard-fought global consensus that individual rights and empowerment are what matters most in fostering just and sustainable development.

This debate raises important questions: Is there room for an ethical argument to slow population growth through voluntary family planning as a way to lessen climate change? Can we speak of environmental preservation, individual rights, social justice and lower population growth in the same breath?

While consumption is clearly the primary driver of environmental degradation, including climate change, it appears evident that population growth in both industrialized and developing countries is a contributing factor. If population growth is proven to be destructive to public health and the natural environment, an ethical argument could be made that governments have an obligation to intervene to lessen this damage.

Engendering support among the public and policymakers for voluntary family planning is a worthy task. Given adequate information and access to reproductive health services, couples around the world have chosen to have fewer children, contributing to better health outcomes and diminished negative impacts on the environment. Importantly, though, family planning policies must prioritize freedom and justice and be made with individual rights and well-being as central tenets.

Investing in voluntary family planning, conservation of natural resources, education of girls, empowerment of women and other socio-economic programs aimed at improving the quality of life of individuals and families will contribute to the outcomes we all want: a healthy planet that can be sustained for generations to come.



The annual carbon footprint of the United States (total tons of CO<sub>2</sub>) far exceeds that of many of the countries whose population growth rates are often cited with concern.

Suzanne Petroni is PHI's vice president for global health.

# PROFILES



**Alexandra Destler** is leading efforts to start PHI's new Center for Public Health & Climate Change. She joined PHI in 2008 to help the organization and the public health field tackle the many public health concerns that could result from climate change.

Previously, she worked for 20 years on large projects aimed at advancing environmental sustainability in business and greening health care. She planned the Green Health Champions leadership

education program for the American Hospital Association's Health Research and Educational Trust. As associate director of Healthy Communities at the Health Forum, she designed and directed its Creating Healthier Communities Fellowship. At Ford Motor Company, she co-launched the Greenfield Path, a strategic project to position Ford in the sustainable mobility market. She has also worked for the U.S. Army, the Trust for Public Land and Earthwatch Institute.

Destler earned a multi-disciplinary master's degree focused on environmental sustainability from the Harvard Graduate School of Education and a bachelor's degree in communications from Cornell University.

**Suzanne Petroni** is PHI's new vice president for global health. She comes to PHI from The Summit Foundation in Washington, D.C., where she directed its Leadership for Adolescent Reproductive Health Program.

Petroni brings to PHI nearly 20 years of leadership experience in the government and nonprofit sectors designing and overseeing policies and programs on a range of global health and development issues, including reproductive health and rights, youth development, the environment, and women's and refugee health.

Under Petroni's guidance, PHI will expand its work in developing and transitioning countries by building leadership capacity and scaling up programs in reproductive, maternal, youth and child health as well as in the areas of climate change, alcohol and tobacco.

Petroni is completing her PhD in gender and social policy at George Washington University. She has a master's degree in foreign service from Georgetown University and also holds a Certificate in Public Health in Complex Emergencies from Columbia University.



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*"We're changing the way people think about health..."*

## **New Awards**

### ■ **PHI to examine health impact of cap-and-trade program**

Principal Investigator:  
Paul English

Funded by: The Pew Charitable Trusts

PHI will collaborate with the California Department of Public Health to assess the health impacts of the California Air Resources Board's key scenarios for a proposed cap-and-trade program, with special emphasis on impacts on vulnerable communities.

The groundbreaking study will provide a health-based analysis to inform the California rule-making process. Health impact assessment is a flexible, data-driven tool that identifies the health benefits and consequences of new policies and develops practical strategies to minimize any adverse effects, ensuring the best possible health outcomes. The study's findings will 1) support recommendations to protect and promote health;

and 2) inform leaders in other states who seek to use California's regulations as a model.

### ■ **PHI continues to promote adolescent girls' health and well-being globally**

Project Director:  
Denise Dunning

Funded by: The United Nations Foundation

PHI has received support to expand the Adolescent Girls' Advocacy and Leadership Initiative (AGALI), a global program that enhances the capacity of local leaders and institutions to improve the health, human rights, education, and livelihoods of adolescent girls and young women in Ethiopia, Malawi, Liberia, Guatemala and Honduras. AGALI promotes global health and development through intensive capacity building, a small grants program, technical assistance, and ongoing institutional strengthening designed to increase the ability of leaders to advocate on behalf of adolescent

girls, while simultaneously empowering young women to develop their own solutions to the obstacles they face.

### ■ **Alcohol Research Group to identify neighborhoods most at risk for alcohol problems**

Principal Investigator:  
Kate Karriker-Jaffe

Funded by: National Institute on Alcohol Abuse and Alcoholism

This grant will examine how and why the place where people live affects their alcohol use and related problems. The Alcohol Research Group will look at data from the 2000 and 2005 National Alcohol Surveys, combined with information from the 2000 Census, to identify groups most at risk for alcohol-related problems in different types of neighborhoods. Investigators will assess whether psychosocial mediating factors help explain the influence of neighborhood socioeconomic status on the alcohol outcomes.

## **Recent Publication**

### ■ **Center for Civic Partnerships releases planning tools for place-based aging**

How can local communities address the increasing needs of their aging populations? As unprecedented numbers of baby boomers reach retirement age, the Center for Civic Partnerships at PHI recently produced a toolkit outlining a community-based planning process to promote healthy aging. *Aging Well in Communities: A Toolkit for Planning, Engagement & Action* is a user-friendly guide to help local governments, human service providers, community groups and other partners prepare now to address both the challenges and opportunities ahead. To download the guide, visit [www.civicpartnerships.org](http://www.civicpartnerships.org).