

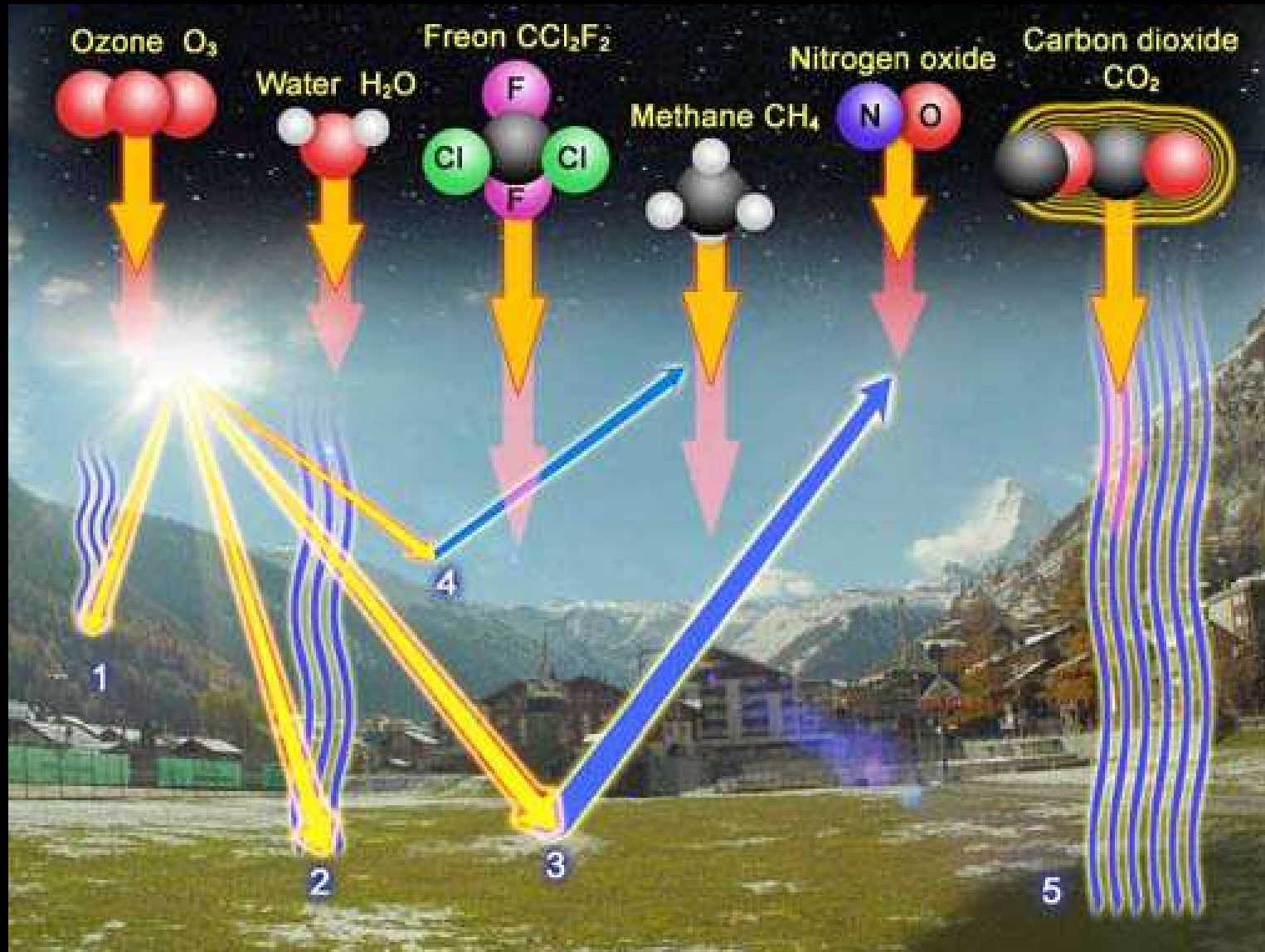
CAMBIAMENTI CLIMATICI E SALUTE GLOBALE

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GAS SERRA



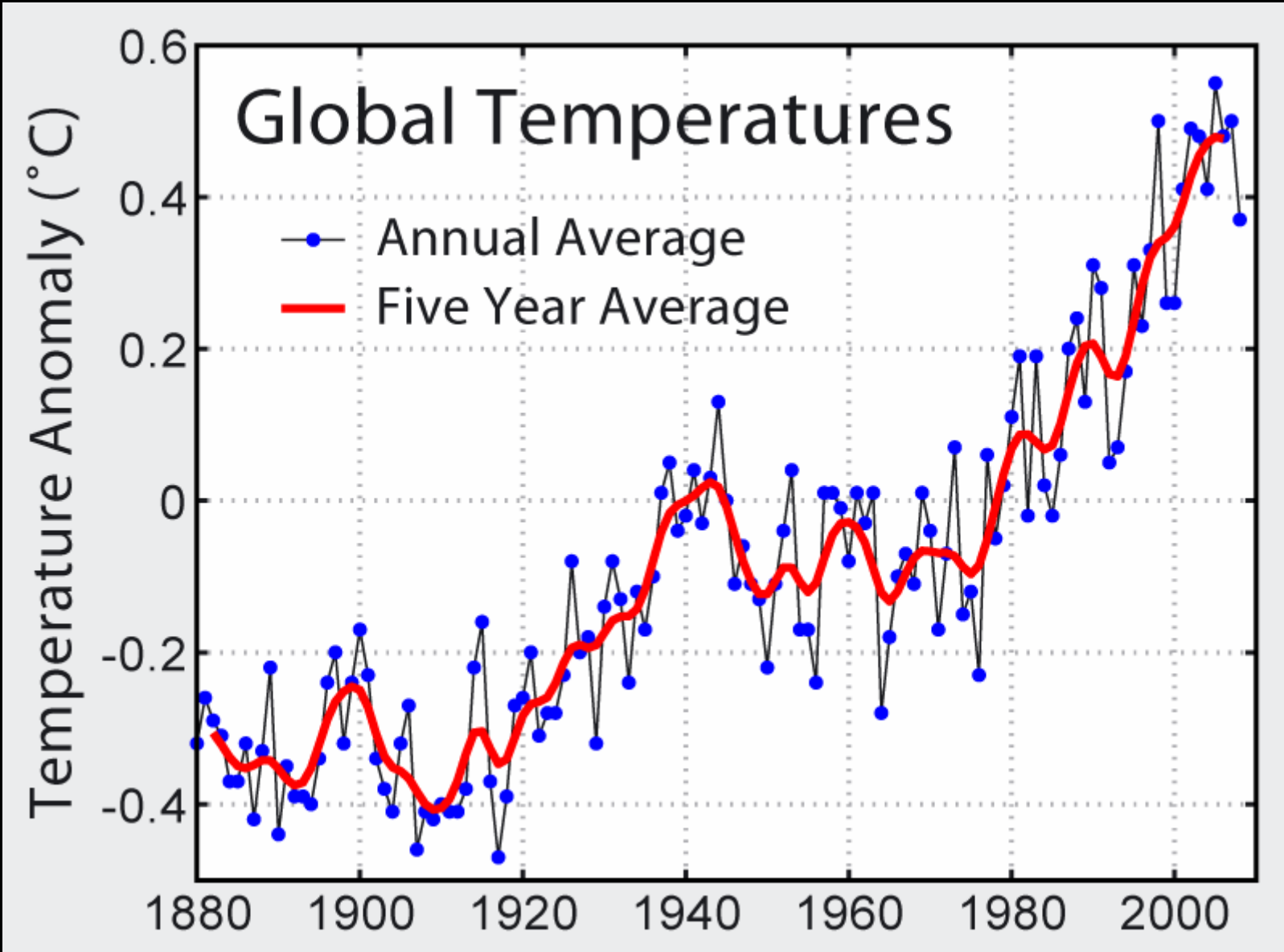
316 ppm nel 1958

CO₂



387 ppm nel 2008





EFFETTI AMBIENTALI

- Cambiamenti della stagionalità e dell'intensità delle precipitazioni con alcune aree che stanno diventando inusualmente più umide e con altre, come le regioni subtropicali, inusualmente più secche; aumento della frequenza e della severità degli eventi climatici estremi (uragani, inondazioni, siccità, ondate di calore); scioglimento dei ghiacciai e innalzamento del livello del mare.

KILIMANGIARO

Febbraio 1993



Febbraio 2000



THE LANCET



Lancet and University College London Institute for
Global Health Commission

**Climate change is the biggest global health threat of
the 21st century**

- **Sono cinque** – secondo il Rapporto - **le sfide decisive** che devono essere affrontate se non si vuole che i cambiamenti climatici diventino una catastrofe così grande da minacciare la stessa sopravvivenza umana

- Per prima cosa c'è un **terribile vuoto d'informazione**, una sorprendente mancanza di conoscenza su come rispondere agli effetti negativi sulla salute prodotti dai cambiamenti climatici.
- Secondo, poiché **gli effetti dei cambiamenti climatici colpiranno più duramente i poveri**, noi abbiamo di fronte un compito immenso – sostiene il Rapporto - quello di rafforzare i sistemi sanitari dei paesi più fragili in modo da proteggere le popolazioni a più alto rischio.

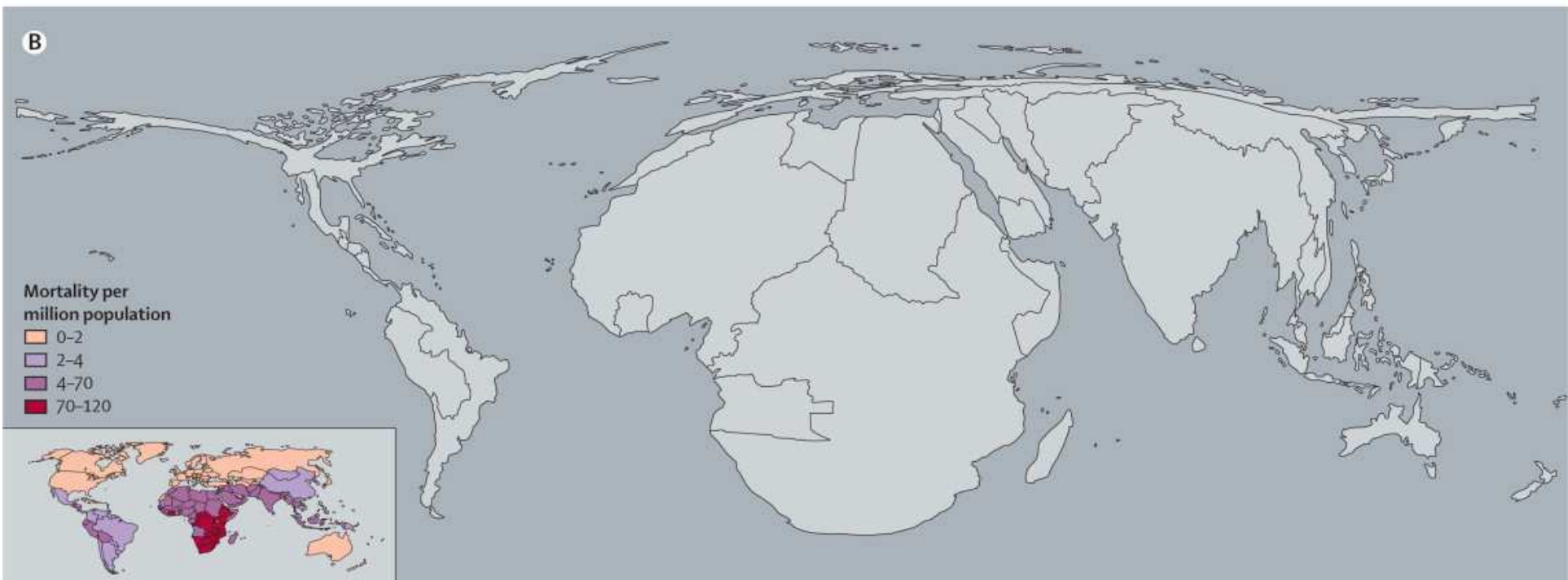
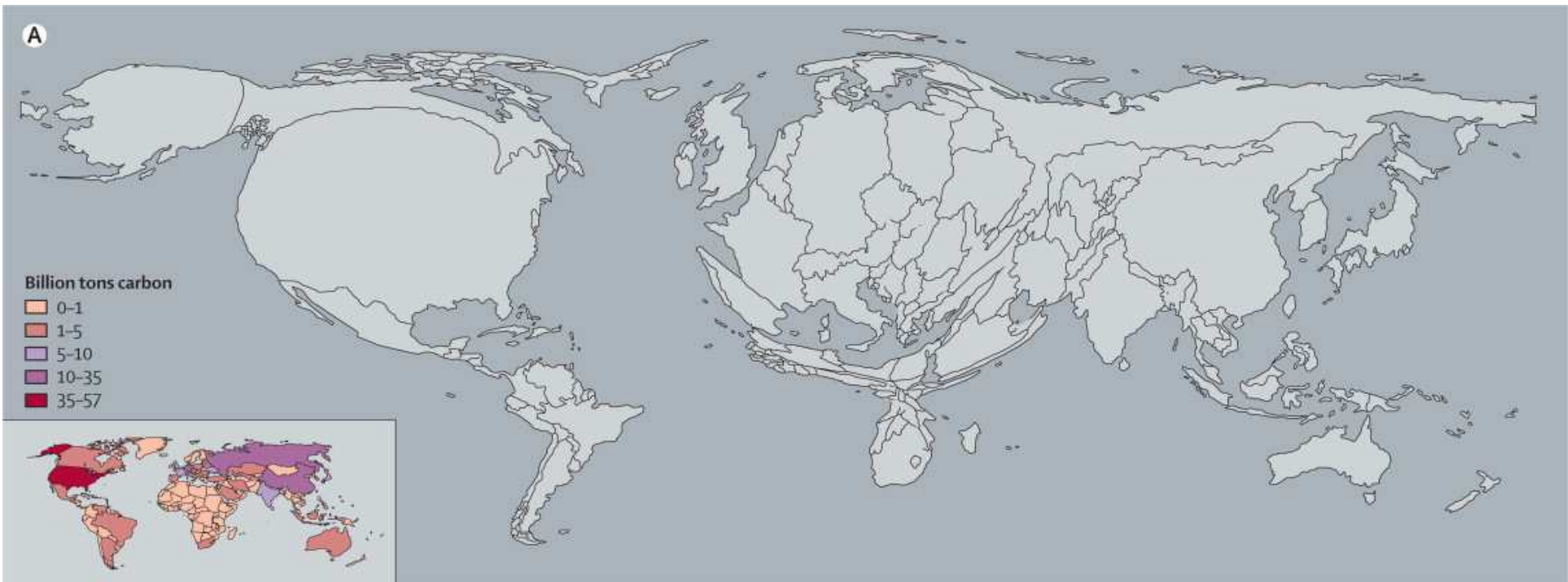
- Terzo, c'è in ballo una **sfida tecnologica**. Le tecnologie hanno la potenzialità di aiutare ad adattarci ai cambiamenti del clima, ma per ottenere questo sono necessari grandi investimenti in ricerca.
- **La quarta sfida è politica: creare le condizioni per una vita con bassi livelli di gas serra.**
- E, infine, c'è la questione di come **convincere le nostre istituzioni a fare dei cambiamenti climatici la priorità**, com'è necessario che sia.

Global health equity and climate stabilisation: a common agenda

Sharon Friel, Michael Marmot, Anthony J McMichael, Tord Kjellstrom, Denny Vågerö

Although health has improved for many people, the extent of health inequities between and within countries is growing. Meanwhile, humankind is disrupting the global climate and other life-supporting environmental systems, thereby creating serious risks for health and wellbeing, especially in vulnerable populations but ultimately for everybody. Underlying determinants of health inequity and environmental change overlap substantially; they are

- **Nel 2000 i cambiamenti climatici hanno prodotto** – secondo una stima prudente – **almeno 150.000 morti**; e sebbene il miliardo più povero della popolazione mondiale produca circa il 3% di tutto il gas serra del mondo, quei morti sono quasi esclusivamente confinati nella parte più povera del pianeta.



1

Economic development at any cost

The economic trajectory since the 1980s has increased global interconnectedness and interdependence, which has facilitated greater mobility of capital, technology, knowledge, and people; however, attendant gains in power, income, goods, and services have been uneven. Economic development has contributed to longer life expectancy in most countries. However, nearly 3 billion people, including 1.3 billion workers, still live on less than US\$2 per day.⁹

1

Economic development at any cost

The structural adjustment policies introduced in the early 1980s by the International Monetary Fund and World Bank, to ensure debt repayment, diverted government resources away from health, education, and sustainable development.¹⁰ Modern international trade agreements have constrained government capacity to protect public health, regulate environmental conditions, and ensure affordable drugs¹¹—with serious implications for health equity between and within countries.¹

1

Economic development at any cost

In creating a global marketplace that depends upon ever increasing volumes of production, consumption, and long-distance transport of goods,¹² the same economic trajectory has led to increasing overexploitation of finite natural resources, energy scarcity,¹³ and overloading of natural environmental systems (figure 3).¹⁴ And all of this

2

Urbanisation, health, and the environment

We now live in a mostly urban world.¹⁶ Declining investment in rural infrastructure and amenities, with disproportionate levels of poverty and poor living conditions, together with the perception that cities offer great opportunity, has led to migration to urban centres. This migration, combined with natural population growth in urban areas, creates enormous, often unmet, demand for housing, services, transport, and work.¹⁷

2

Urbanisation, health, and the environment

This process, closely linked with rising consumerism and intraurban economic disparity, has imposed significant costs on both population health and environment.¹⁷ Although urban living can provide many benefits,¹⁸ urbanisation has been accompanied by increases in the prevalence of diabetes, heart disease, obesity, mental-health problems, alcohol and drug misuse, and violence, which are typically most common among people of the lowest social status.¹⁷ Road-traffic

2

Urbanisation, health, and the environment

The prevailing form of urbanisation has substantial environmental consequences. Urban air pollution from transport, industry, and household heating is a major problem, though now declining in high-income countries.¹⁷ Meanwhile, transport and buildings contribute an estimated 21% of global CO₂ emissions²⁰—mostly from cities in developed countries. However, the combination of

3

Food, climate change, and health equity

Food, nutrition, and hunger link global health equity, poverty, and climate stabilisation agendas. An estimated 854 million people worldwide are food insecure,²² predominantly in the world's poorest and most vulnerable communities. Concurrently, a nutritional transition to energy-dense diets is occurring, leading to increased prevalence of obesity—particularly among the more socially disadvantaged groups in all but the poorest countries.²³

3

Food, climate change, and health equity

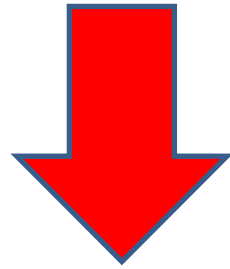
The nature of the food system, from agricultural production to retail, contributes to these diet-related health inequities. As the cost of a basket of household goods increases rapidly, relative to income, all but the very rich will feel the effects. Some will be able to purchase a healthy diet; some will only be able to purchase the cheapest sources of calories—energy-dense, highly processed products that increase the risk of obesity and diabetes, and many millions will be unable to afford even that.²⁴

3

Food, climate change, and health equity

The food system also contributes to and is affected by climate change.²⁵ The drought-prone and long-term drying conditions emerging in some subtropical regions around the world, higher temperatures, rising sea levels, increasing frequency of flooding, and acidification of oceans are now contributing to reduced quantity, quality, and affordability of food.^{5,22,25}

Health and climate change: a common agenda



These three great contemporary human struggles—achieving global health equity, poverty eradication, and climate stabilisation—would benefit synergistically from alignment of their policy agendas.