

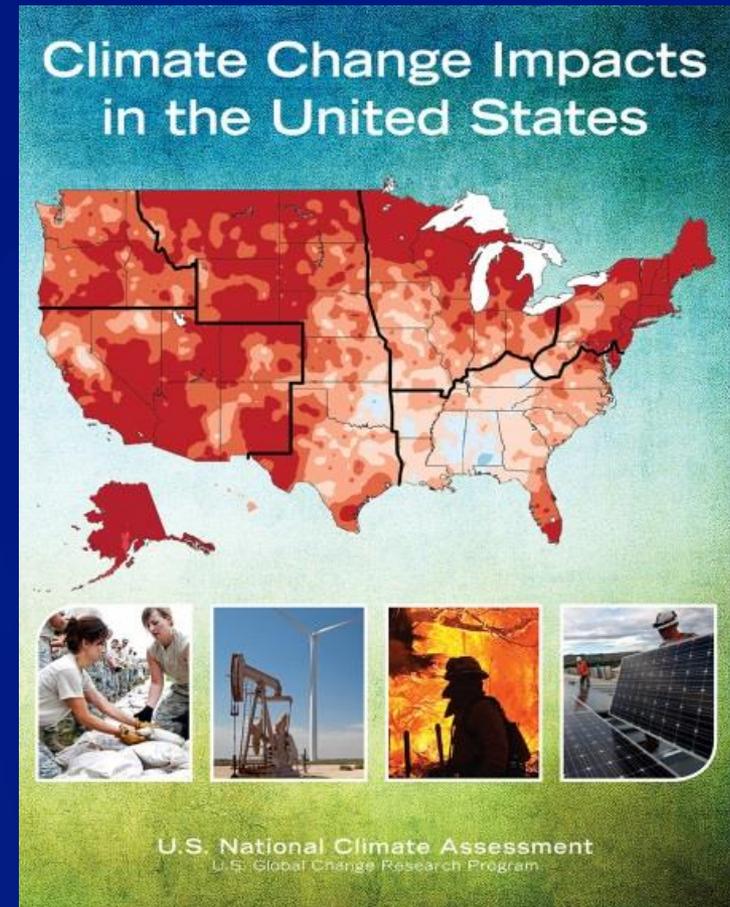
# Climate Change and Human Health: Cross-sectoral Collaboration



**Paul Schramm, MS, MPH**  
**Climate and Health Program**  
**Centers for Disease Control and Prevention**

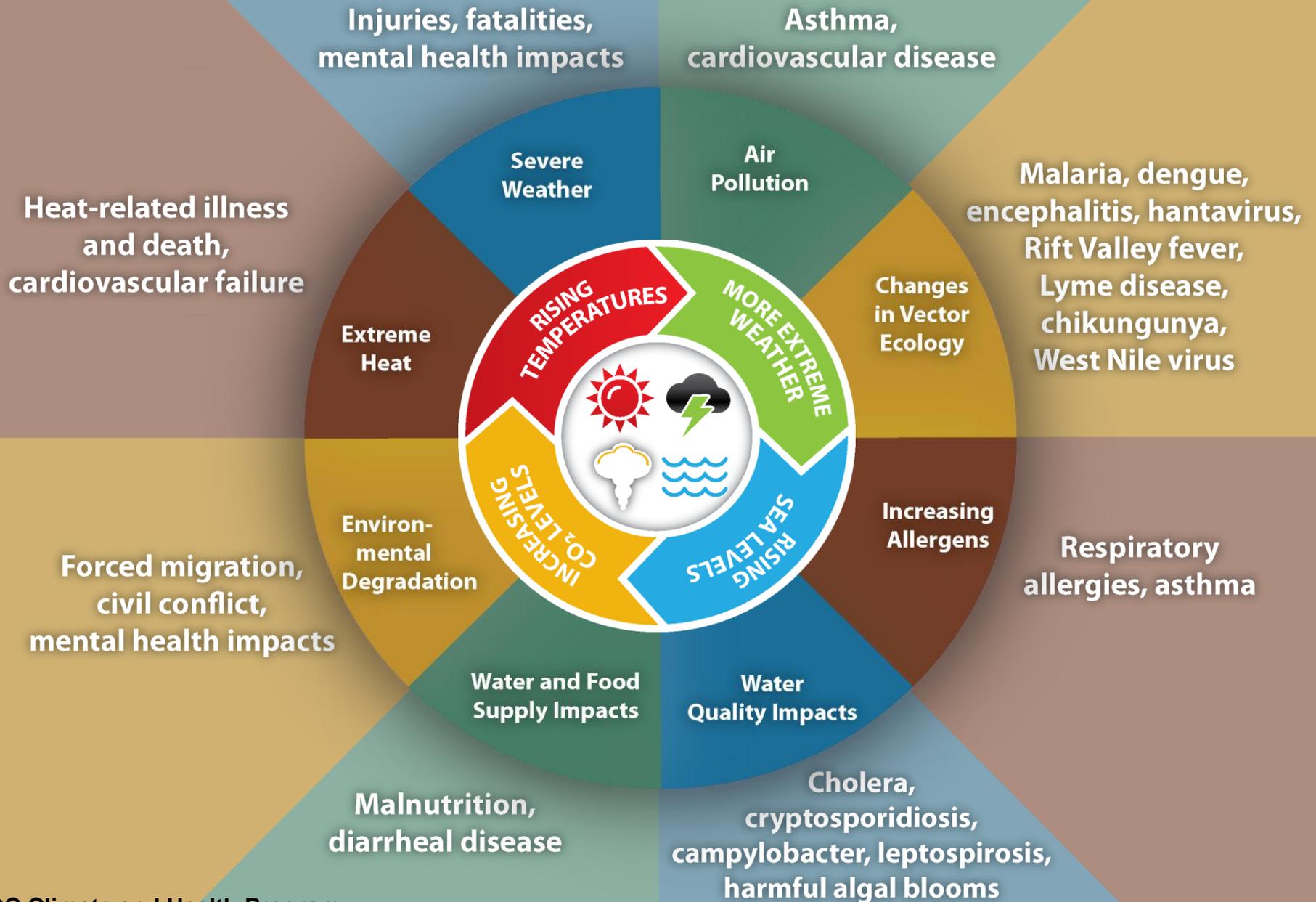
# 3<sup>rd</sup> National Climate Assessment: Health Key Messages

- ❑ Climate change threatens human health and well-being
- ❑ Will amplify some existing health threats
- ❑ Preparedness and prevention can protect people from some of the impacts of climate change
- ❑ Responding to climate change presents opportunities (co-benefits)



Source: National Climate Assessment Development Advisory Committee, *Third National Climate Assessment Report*, <http://nca2014.globalchange.gov>

# Impact of Climate Change on Human Health



# CDC's Climate & Health Program

- Framework established in 2006
- Formally constituted as a Program in March 2009 with congressional appropriation

The CDC climate change and public health framework was established in 2006, due to a recognition by many scientists that there was a need to prepare for the inevitability of climate change, and the impact it would likely have on the health of US residents and the world population in general.

CDC formally established its Climate Change Program in FY 2009. CDC's Climate Change Program leads efforts to prevent and adapt to the anticipated health impacts associated with climate change.

The program seeks to identify populations most vulnerable to these impacts, anticipate future trends, assess that systems are in place to detect and respond to emerging health threats, and takes steps to assure that these health risks can be managed now and in the future.

CDC Climate Ready States and Cities Initiative

Legend:  
- Complete Framework  
- Complete Planning/Assess

**Ten State Health Departments and Their Health Impacts:**

**Cat 1 Assessment and Planning to Develop Climate Change Programs**

- Arizona Department of Health Services**  
Health effects due to extreme heat
- Massachusetts Department of Health**  
Water, food, and vector borne diseases, heat stress, hazardous weather events, respiratory diseases
- New York State Department of Health**  
Extreme weather, waterborne, food-borne, and vector disease
- North Carolina Department of Public Health**  
Temperature related morbidity and mortality, extreme weather, air pollution, water, food, and vector borne diseases
- San Francisco Department of Public Health**  
Heat stress morbidity and mortality associated with air quality impacts

**Cat 2 Building Capacity to Implement Climate Change Programs and Adaptations**

- Michigan Department of Community Health**  
Heat related disease, respiratory disease
- Minnesota Department of Health**  
Extreme heat events, vector borne disease
- New York City Department of Health and Mental Hygiene**  
Heat related morbidity and mortality, respiratory illness, water-borne and vector-borne disease
- Oregon Department of Health**  
Water and food borne diseases, extreme weather, ecosystems
- State of Maine Department of Health and Human Services**  
Heat related outcomes, vector-borne disease

**Climate & Public Health**

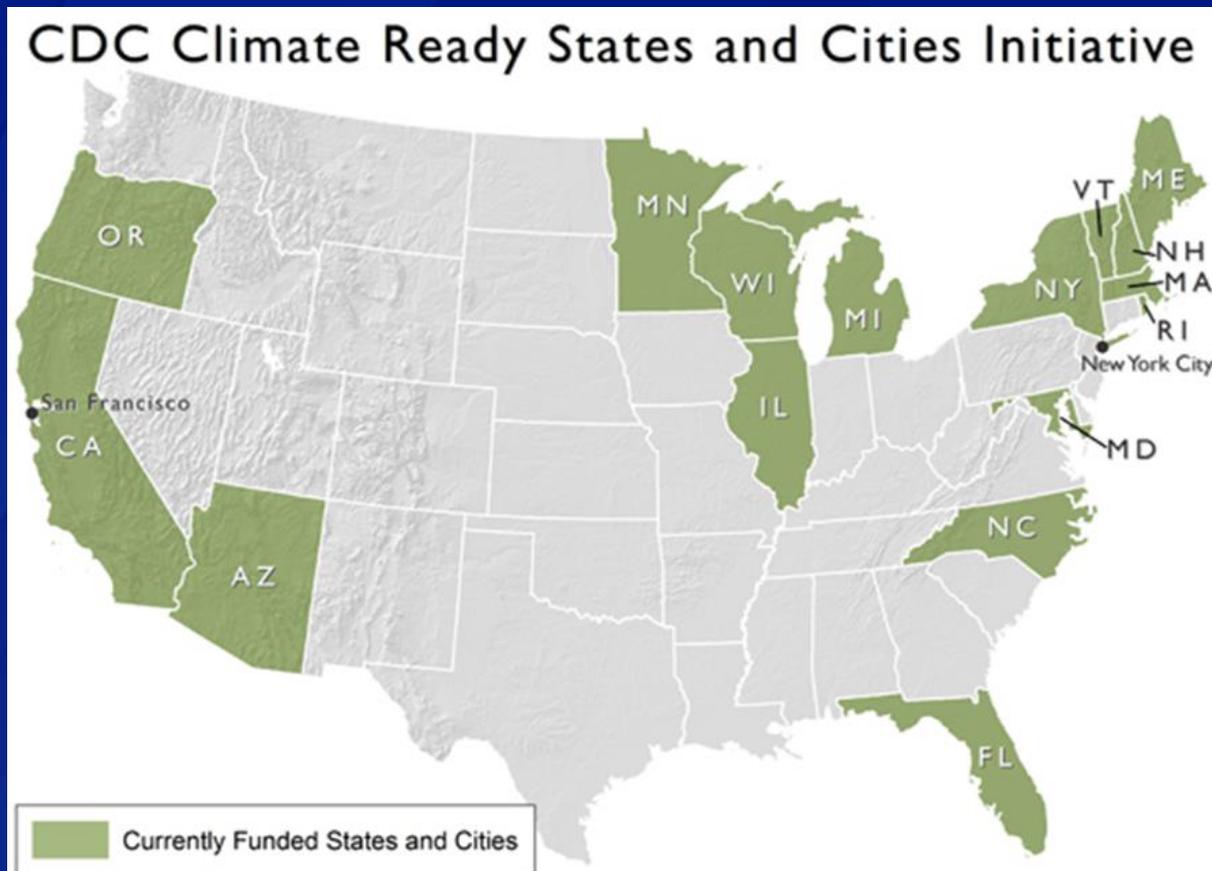
**CDC** Centers for Disease Control and Prevention  
National Center for Environmental Health

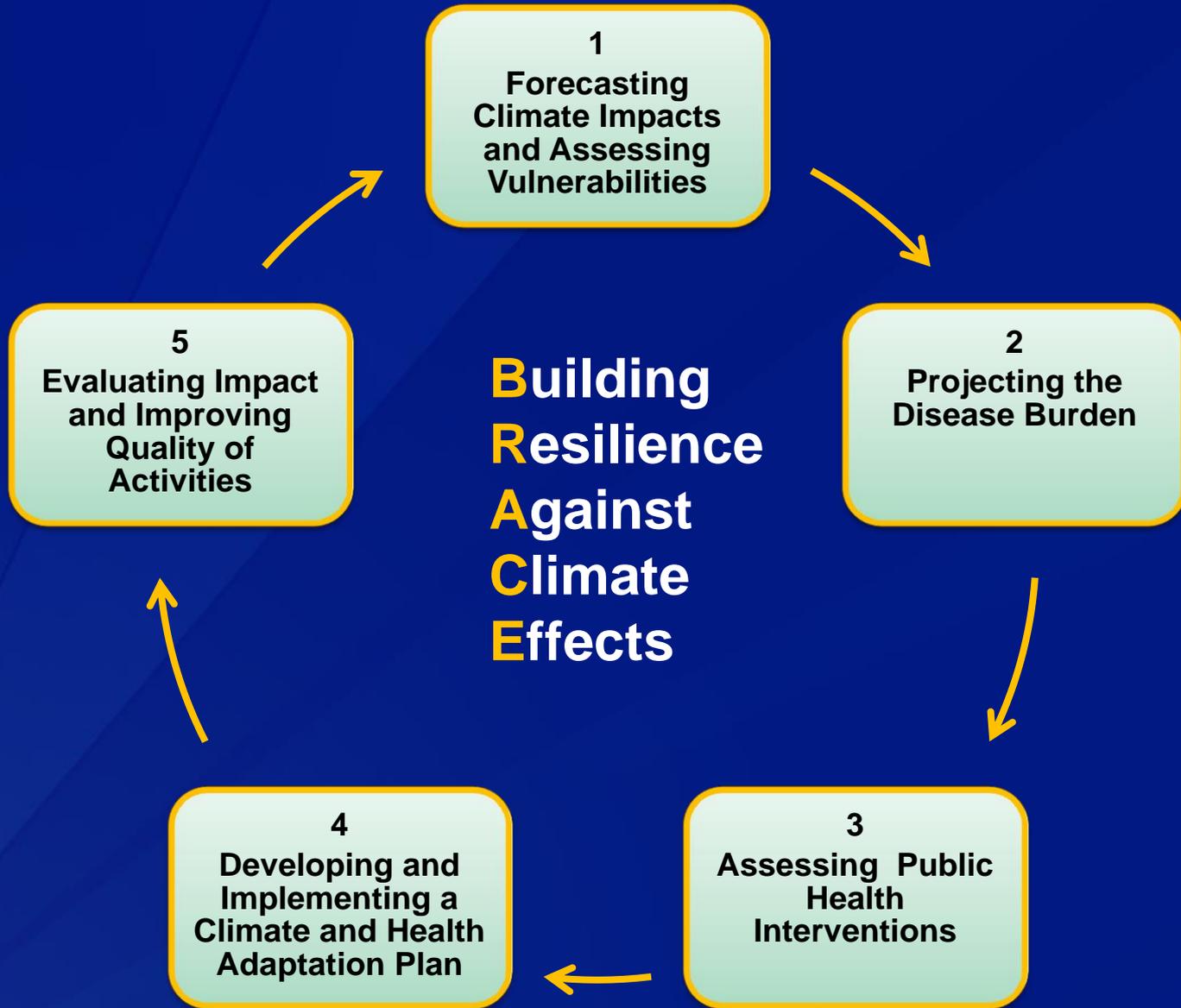
# The Climate & Health Program's three critical roles:

- (1) **analyze and translate** climate science
- (2) apply findings to **decision support tools** to aid state and local public health response
  - vulnerability maps
  - surveillance tools
  - communications tools
- (3) **provide leadership**
  - public health concerns represented in adaptation strategies
  - create linkages between public health and other sectors

# Climate-Ready States and Cities Initiative

- Enhance capacity of health agencies to deal with impacts of climate change





# Funding Opportunity Announcement language

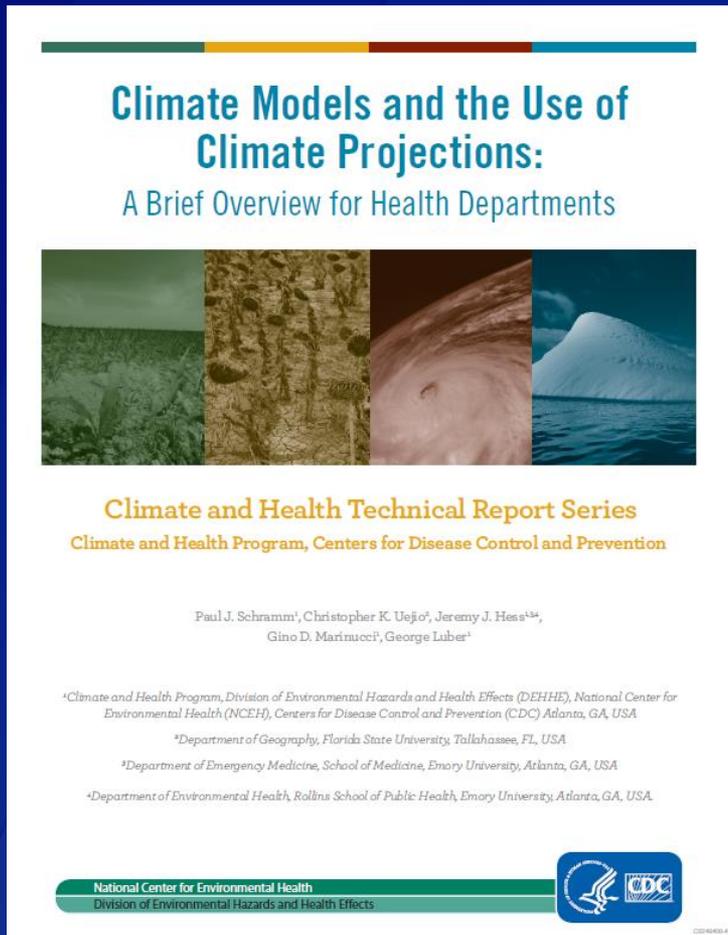
Funding Opportunity Announcement (FOA)  
New, Non-research, Domestic

Building Resilience Against  
Climate Effects (BRACE)  
CDC-RFA-EH13-1305

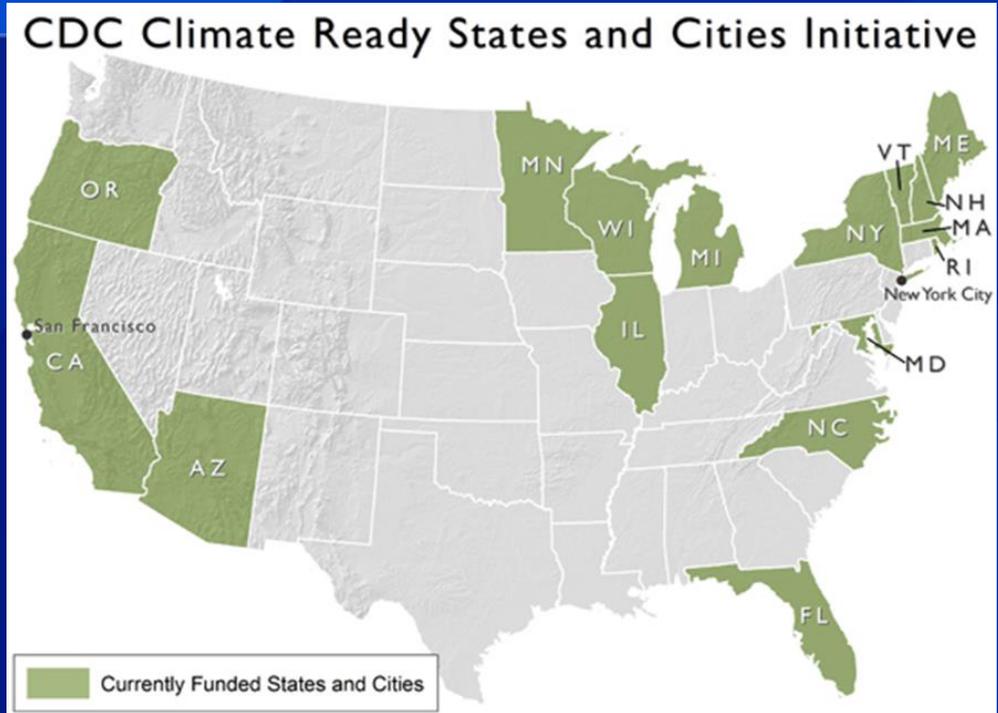


- ❑ Are partnerships (in particular, academia, government and climatology groups) described?
- ❑ Does the organizational plan provide for including a member or consulting with persons with climatology experience and training?

# Climate guidance



- “...may require collaboration with universities, state climatologists, NOAA Regional Integrated Sciences and Assessments (RISA) programs, or other relevant organizations.”
- Includes link to RISA website



- ❑ **North Carolina - CISA**
- ❑ **Florida - SECC**
- ❑ **Arizona - CLIMAS**
- ❑ **California, San Francisco - CNAP**
- ❑ **Oregon - CIRC**
- ❑ **Michigan, Minnesota, Wisconsin, Illinois, New York - GLISA**
- ❑ **New York state, NYC, Massachusetts, Rhode Island - CCRUN**

# Florida Department of Health

- ❑ **Former coordinator of SECC (Keith Ingram) was involved with FL BRACE during the first two years of funding**
- ❑ **SECC served in advisory role:**
  - **Attended and provided feedback at Technical Advisory Group meetings (May 2013, April 2014); Contributed to webinars**
- ❑ **Current coordinator of SECC (Shelby Krantz) is on the FL BRACE Technical Advisory Group**
- ❑ **Utilized 2012 Southeast Regional Technical Report to the NCA (RISAs heavily contributed to this report)**
- ❑ **Consulted with NOAA's Southeast Regional Climate Center**
- ❑ **Received most climate data from the FSU Center for Oceanic-Atmospheric Prediction Studies (includes the Office of the State Climatologist)**

# North Carolina Department of Health and Human Services

- ❑ **NC BRACE coordinator sits on the advisory board of CISA**
  - Participated in 2014 CISA evaluation
  - On committee for 2014 Carolinas Climate Resilience Conference
- ❑ **CISA has funded multiple academic projects that directly helped NC fulfill BRACE goals:**
  - Projecting ozone-related illness and deaths in 2050 in NC
  - Vulnerability to heat-related illness in NC



Wastewater treatment plant in Goldsboro , NC

# Michigan Department of Community Health

- ❑ On-going collaboration with GLISA
- ❑ Data exchange, collaboration on multiple projects



# Climate and Health Program

Division of Environmental Hazards & Health Effects  
National Center for Environmental Health  
Centers for Disease Control and Prevention

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.