By GARY COHEN

The 2015 Paris climate treaty marked a critical moment in which world governments agreed to cut greenhouse gas emissions, signaling the need to end reliance on fossil fuels in order to continue life on planet Earth. Climate change has come home, but not only as an environmental issue. It is recognized as affecting the health of billions of people.

In 2009, the Lancet/UCL Commission for Global Health, a collaboration between The Lancet medical journal and University College London, UK, reported that climate change’s threat to human health is so great that it could overturn the last 50 years of development and public health gains worldwide. No one is immune from the health impacts of climate change. Rising temperatures and air pollution will contribute to heat stress and respiratory diseases. In coastal cities, extreme flooding and sea level rise will contribute to illness from waterborne bacteria. In the U.S. Midwest and Gulf Coast, extreme weather events like hurricanes and tornadoes will lead to loss of life and housing.

When we look beyond our own borders, we see the health impacts of climate change are felt more acutely in low- and middle-income countries. Whether it is heat-related death, respiratory disease, the spread of malaria, dengue fever, cholera and diarrhea or the prospect of millions of people displaced by storms or flooding, climate change is no longer an ambiguous environmental problem in the distant future.

We are in this together, linked as one human family. In Laudato Si’, Pope Francis’ encyclical on the environment and human ecology, he appeals to our moral obligation to protect the most vulnerable among us. The Pope calls on people of faith to act from a recognition that protecting the Earth is a central expression of our love of God and creation. His appeal, not only to Catholics but also to everyone, is that by addressing climate change, we can begin to address the underlying social and economic inequalities throughout society.

Taking climate action also is being recognized as a health issue. When President Barack Obama announced his administration's Clean Power Plan in 2015, he framed it by highlighting the asthma cases and health care costs that will be avoided. During the international climate talks in Paris, more than 1,700 health organizations, 8,200 hospitals and health facilities and 13 million health professionals called on governments to reach a

**How Health Care Can Lead The Way on Renewable Energy**

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strong agreement that would protect the health of patients and communities. This united front brought the global medical consensus on climate change to a level never seen before.

CONSENSUS BECOMES LEADERSHIP
Driven by the 24/7 nature of operations, health care is the second most energy-intensive sector and is just as dependent on fossil fuels as the rest of the economy. Health care also is a major user of toxic chemicals that expose patients and employees to chemicals linked to cancer, asthma, reproductive problems and other chronic diseases. An Associated Press investigation calculated that at least 250 million pounds of pharmaceutical waste and contaminated packaging is generated annually from hospitals and long-term care centers. Poor indoor air quality has been identified as the most frequent cause of work-related asthma in health care workers.

Put simply, the health care sector is a major contributor to some of the very diseases it is working to prevent and treat.

What does it mean for our communities when the systems we have built to provide care are, in fact, causing harm? How do we expand our philosophy of care, design our infrastructure and evolve at every level of health care delivery — from hospitals through supply chains — so that climate risks and impacts drive decisions and care?

To begin with, health care facilities need to be designed for resilience in the face of extreme weather events or climate-related disasters in order to care for those hurt and provide a place of refuge in the communities served. For example, after a 2007 tornado destroyed 90 percent of the buildings in Greensburg, Kansas, the Kiowa County Memorial Hospital rebuilt its facilities with on-site wind turbines that provide the majority of the hospital's total electrical load. Boston’s harbor-front Spaulding Rehabilitation Hospital installed its electrical equipment and backup energy systems on the roof so it can continue to operate in the event of extreme flooding.

Kaiser Permanente, the California-based integrated managed care consortium, has made a major investment in solar power that can meet 50 percent of all its California facilities’ energy needs with renewable energy. Gundersen Health System in Wisconsin produces more renewable energy than it uses, making it the first net energy health system in the country (see story on page 35). Around the world, clinics are using solar power to run facilities and refrigerate essential medicines.

In addition to transitioning away from fossil fuels to renewable energy, health care can co-invest in community energy projects to support community-level resilience. For example, two large health systems in Ohio — Cleveland Clinic and University Hospitals — are co-investing in community solar and energy efficiency strategies, while Gundersen Health System has invested in landfill biogas development and a community wind farm.

Representing 17 percent of the entire U.S. economy, the health sector has enormous economic leverage if it harnesses its purchasing power to drive a low-carbon, toxic-free economy. Globally, the United Nations Development Programme, World Health Organization and United Nations Population Fund are developing environmentally preferable purchasing guidelines that will inform decision-making around the $5 billion in annual spending around the world for products and technologies.

A UNIFIED VOICE
Leadership, whether at the facility, community, national or international level, begins with individuals. Just as the Pope has positioned climate change as one of the great moral challenges, health professionals have the opportunity — and the responsibility — to educate society that addressing climate change is central to the health and well-being of patients, their families and communities.

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One of the most profound opportunities to leverage unified voices is by demonstrating and advocating for a societal shift away from fossil fuels toward renewable energy. San Francisco-based Dignity Health announced in December 2015 that it would restrict investments in thermal coal companies and expand investment opportunities that address climate change. In making the announcement, Shelly Schlenker, vice president of public policy, advocacy and government affairs at Dignity Health, said, “Our healing mission requires us to recognize the impact of climate change as a prominent public health issue. Because of this, we’ve taken a hard look at our environmental policies and taken steps to ensure that we limit our relationships with the worst environmental offenders.”

Just as health professionals united against the health threat of tobacco, hospitals and health systems can treat fossil fuels with the same profound concern for our health.

A NEW APPROACH
At the core of these approaches and opportunities is a new way of thinking. As the health care model begins to address population health, environmental health becomes a core component. Climate change is one of the fundamental drivers of health, and health care is being called upon to move its ministry upstream to address social and environmental conditions that are making people sick, especially those who are the most vulnerable.

Health care institutions can become anchors for community health and wellness, educating patients about how to protect themselves from climate-related impact and redesigning the care model to bring health to the community through clinical care, purchasing, workforce development, investments and political engagement.

Health care has healing as its mission. It is time to expand that healing mission and lead the rest of society in healing our relationship with the environment and the Earth that sustains us all.

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NOTES
11. U.S. Climate Resilience Toolkit, “Taking Action: Following a Devastating Tornado, Town and Hospital Rebuild to Harness Wind Energy,“


Educational Events from The Catholic Health Association

Pre-Assembly Avila Program
June 4

Pre-Assembly Governance Program
June 4 – 5

Pre-Assembly Community Benefit Program
June 5

Catholic Health Assembly
June 5 – 7

Human Trafficking Networking Call
June 22 | Noon ET

Population Health and Aging Networking Call
July 13 | 3 p.m. ET

International Outreach Networking Call
Aug. 3 | 3:30 p.m. ET

Pre-LCWR Assembly Sponsorship Conference — “Sponsorship: Carrying on the Health Ministry of the Church”
Aug. 9 (Invitation only)

Environmental Stewardship Networking Call
Aug. 31 | 2 p.m. ET

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