

Position paper of the Association of Schools of Public Health in the European Region (ASPHER) Climate & Health Task Force

Position paper: Educate, Commit, Act: ASPHER's Response to the Climate-Health Crisis at COP30

Keywords: climate change; health; public health education; planetary health; COP30

Authors: Laurent Chambaud^{1*} & Eric P. Twomey² on behalf of the ASPHER Climate & Health Task Force; Henrique Barros^{3,4} on behalf of the ASPHER Executive Board

ASPHER Climate & Health Task Force: Balázs Ádám, Hazem Agha, Virginia Ballesteros Arjona, Chiara Cadeddu, Mary Codd, Karl Conyard, Kirsten Duggan, Kalimah Ibrahiim, Lore Leighton, John Middleton, Marie Nabbe, Robert Otok, Ana Catarina Pinho-Gomes, David W. Patterson, Farhang Tahzib, Susana Viegas

ASPHER Executive Board: Mary Codd, Tomasz Bochenek, Nadav Davidovitch, Ramune Kalediene, Polychronis Kostoulas, Oleg Lozan, Mzwandile Mabhala, Ines Siepmann

Why COP30, and why now

Ten years after COP21 in Paris and the agreement to limit the mean global temperature warming to under 1.5-2°C, COP30 in Belém, Brazil is a milestone on what we have accomplished, what we have failed to do, and how urgently actions are needed on climate change and how it relates to health.

¹Climate & Health Senior Lead, Association of Schools of Public Health in the European Region

²Climate & Health Fellow, Association of Schools of Public Health in the European Region

³President, Association of Schools of Public Health in the European Region

⁴Institute of Public Health, University of Porto (ISPUP)

^{*} Corresponding author: laurent.chambaud@aspher.org

The climate emergency is an escalating public health crisis nested within a broader polycrisis: the *triple planetary crisis* - climate change, increase in pollution, and biodiversity loss - interlocks with social and geopolitical shocks such as energy and food insecurity, wars, conflict and displacement, economic volatility, and misinformation. These crises share common drivers such as fossil-fuel dependence, land-use change, and inequitable, unsustainable consumption and production and therefore share common solutions like rapid fossil-fuel phase-out, nature protection and restoration, clean-air policies, and just transitions that reduce vulnerability and deliver immediate health gains.(1)

Acting now delivers not just improvement of quality of life, but also long-term net economic benefits and global prosperity as compared with inaction. As remarked by the WHO Regional Director for Europe, at the launch of the Pan-European Commission on Climate and Health: 'We are already seeing the mounting costs of lives lost, homes destroyed and futures erased. And the most vulnerable – children, the elderly, those already struggling – always suffer the most.'(2) The lintergovernmental Panel on Climate Change predicts a ten times lower global income by mid-century under business-as-usual, compared to following the 1.5-2°C pathway, demonstrating that mitigation costs are several-fold larger than avoiding damages.(3) In short: prevention pays.

Climate misinformation continues to undermine global action. At the September 2025 United Nations General Assembly, high-profile climate denial was again presented on the world stage, directly contradicting established scientific consensus and threatening to erode public trust in evidence-based climate policies making it harder for policymakers to pass legislation for emissions reduction and climate adaptation precisely when decisive action is most critical.(4)

Health is one of the strongest arguments for climate action. Moreover, without coordinated efforts to counter false narratives through fact-based communication and scientific literacy, progress on climate action risks being systematically undermined. Public health schools and institutions must be central to trusted information based on scientific evidence, training on a large scale, planning, implementation and accountability.(5)

What ASPHER has done since COP28

Faced with the growing urgency for action on climate change and health, ASPHER is fostering deeper cooperation with our partners including the European Climate and Health Observatory (ECHO), the Global Consortium on Climate Change and Health Education (GCCHE), the European Network on Climate and Health Education (ENCHE), the Global Network for Academic Public Health (GNAPH), the International Association of National Public Health Institutes (IANPHI), the European Public Health Association (EUPHA), the

World Health Organization Regional Office for Europe (<u>WHO-EURO</u>), public health ethics and law network (PHEL) and many other partners, at European and global levels. These alliances allow ASPHER to amplify its reach and impact, share best practices, and build a stronger evidence base for climate—health action, ensuring that initiatives such as training programmes and advocacy efforts are informed by diverse expertise.

As a network of Schools of Public Health, with our partners, ASPHER has expanded practical action on education, training and standards, including:

Capacity building at scale: through open online courses in climate change and health already engaging >6,000 learners worldwide, and more planned for the future.(6)

Repository and indicator: launching a Climate Change & Health Education repository and developing a European indicator on climate change & health education to track progress, including contributions to the Lancet Countdown Europe.(7)

Core Curriculum: publishing the 1st Edition of a Core Curriculum in Public Health for Europe that embeds Planetary, Environmental and Climate Health, and One Health in a shared foundation for curricula reform in schools of public health.(8)

These efforts complement WHO's Operational Framework for climate-resilient, low-carbon health systems and the emerging ecosystem of One Health/Environmental Health/Planetary Health scholarship.(9)

From recognition to responsibility: Seven commitments and a sharper mandate for COP30

The window to secure a livable future - in which climate-related health conditions, injury and illness do not overwhelm health systems or drive avoidable excess mortality and displacement - is narrowing. It is ASPHER's position that today's political compromises will become tomorrow's health crises, making it essential that civil society, communities, researchers, schools, activists, and governments at all levels work together not only to implement solutions but also to defend the scientific integrity upon which those solutions are based.

Guided by our Society Statement at COP28 on the occasion of the first COP Health Day, and in our official observer capacity to COP, ASPHER's reinforces its seven commitments made in 2023 and calls on COP30 to deliver for climate and health.(10)

1) Make health a lens for climate policy. Health impacts should guide Nationally Determined Contributions (NDCs), adaptation plans and loss-and-damage

- decisions integrating health metrics and equity into all climate targets and negotiations with health as an indicator of climate progress.
- 2) Sustain public health for developing an integrated approach. Public health should be resourced and mandated to operate across One Health, Planetary Health and Environmental Health, addressing direct and indirect climate effects on health, environmental degradation and social determinants.
- 3) Act across levels, global to local, to reduce risk and emissions. Public-health institutions should co-lead evidence-based mitigation and adaptation at international, regional, national and municipal levels, with a focus on decarbonizing health systems in line with WHO guidance.(9)
- 4) **Confront climate-driven health inequities.** Develop and evaluate policies that protect the most vulnerable (i.e., children, older adults, workers, migrants, indigenous peoples and low-income communities) to reduce inequalities.
- 5) **Support large-scale, capacity-building activities.** Embed climate competence across the entire health workforce and education pipeline by adopting core competencies, funding faculty development, and providing lifelong learning to strengthen public understanding of climate science.
- 6) **Fund research, translation and trust-building.** Invest at scale in transdisciplinary interventional research, implementation science, and knowledge transfer to counter misinformation and enable rapid adoption of proven solutions, technologies and policies.
- 7) Advance advocacy and lawful accountability. Partner with civil society and professional bodies to strengthen advocacy and support health professionals' expert roles in litigation and rights-based strategies that advance the rights to health and to a healthy environment.

The urgency of COP30 extends beyond addressing physical climate impacts to confronting the parallel crisis of climate misinformation that threatens to derail multilateral cooperation. As recent UN initiatives have recognized, combating climate disinformation requires the same level of international coordination as addressing emissions themselves. Only through sustained collaboration can we build the societal resilience needed to resist false narratives.(11)

ASPHER further relies upon schools and institutions of public health training, partners, workplace health and public health communities, other global and planetary health networks and all concerned global citizens to act collectively.(10) As supported by the

WHO Director General's statement and underlined in the WHO COP29 Special Report on Climate Change and Health:(12) 'There is no stronger argument for climate action than health'(13).

Public health schools stand ready to: educate, mobilize, and guide implementation, providing the evidence, standards, and tools that inform decisions, to measure and transparently report progress to drive action, to support independent accountability mechanisms and transparently report shortfalls that put people and planet at risk. The public health community's position is clear: delay is unacceptable and costly; decisive action is required to prevent harm at scale. COP30 has an historical responsibility to give hope to the world.

Acknowledgments: We thank the ASPHER Climate & Health Working Group and partners for contributions to education, training and monitoring.

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