

Equity in Climate Action *Climate & Health Racial Justice Framework*

The Sustainable Health System Community of Practice launched the **Equity in Climate Action Initiative** to address advancing equitable outcomes in the areas of climate mitigation and resilience.

This initiative has been led by Dr. Imara Rolston and the Dalla Lana School of Public Health's **Community Climate Resilience Lab**, which is focused on advancing racial justice approaches to community-centred climate resilience. Falan Bennet (MD-PhD Candidate, Temerty Faculty of Medicine), supported by Dr. Rolston, led a literature review and key informant interviews to develop a Climate & Health Racial Justice Framework Report, which is part of a larger research initiative and will be expanded and refined over time.

This summary shares highlights from the work of this initiative to date, including:

- Key learnings on climate health equity
- Profiles of two cities that are working to advance racial climate equity (New Orleans & Miami)
- Climate & Health Racial Justice Framework

Healthcare Systems and Climate Health Equity

- **Climate change is becoming a defining structural determinant of health** and will increasingly present in the health outcomes of Indigenous, Black, and racialized communities.
- **As the climate crisis worsens, food security, affordable housing, and access to healthcare are expected to deteriorate simultaneously** (1). Health outcomes are increasingly shaped by intersecting environmental and societal/structural forces such as extreme weather, increased levels of environmental pollution, climate-related forced migration, and climate-induced deep poverty (2).
- **Those who have experienced historically rooted and persistent dispossession, disenfranchisement and structural violence are more likely to suffer the most debilitating aspects of the climate crisis**, including displacement, hunger, and death (2,3). Neglecting the intersections between health, ongoing systemic oppression, and climate change risks amplifying the inequities seen across infectious and chronic conditions like COVID-19 and maternal mortality (4,5).
- **Healthcare systems occupy a pivotal role in addressing climate change and climatic health inequities** (1). Healthcare systems must attend to gaps in care, patient experience, and population health that, if left neglected, will exacerbate the effects of the climate crisis (1). Healthcare systems must be equipped to manage and solve a broad range of acute short-term emergencies, chronic conditions, and preventative public health chasms rooted in structural societal deficits.
- The push for **healthcare transformation aligns with the United Nations Sustainable Development Goals and the recent COP26 Special Report on Climate Change and Health**, which outlines ten recommendations for healthcare and emphasizes health co-benefits of climate action (1,6).

City Profiles: Miami & New Orleans

These cities have been conceptualizing and advancing racial climate equity despite harrowing ordeals with the climate crisis and their approaches serve as lessons for other health systems, highlighting the health needs and benefits of fully encompassing social, political, and economic climate strategies.

New Orleans

- **Hurricane Katrina**, a category 5 hurricane in 2005, submerged more than 80% of the city in floodwater and destroyed lives, killing nearly two thousand and displacing millions – many of whom were Black and low-income residents of the 9th Ward (7,8).
- **The disaster deepened structural oppression.** New Orleans was geographically segregated by race and class, with Black poverty concentrated in areas severely affected by the storm (9). Racism and classism subverted the emergency response, which left Black and low-income folks stranded (10). Post-hurricane recovery was inequitable enough to shift city demographics to whiter and wealthier (11,12).
- **New Orleans' healthcare system was severely impacted by the hurricane**, coupled with limited medical resources, infrastructure breakdowns, and administrative disorganization (13). This combination resulted in many patients, particularly those who were Black and low-income, being turned away or triaged for life and death based on health status (13,14).
- **The Deep South Centre for Environmental Justice (DSCEJ)**, founded by Dr. Beverly, has been instrumental in addressing environmental and social gaps exacerbated by climate change and emergencies (15). Their work provides an intersectional model for health systems to plan for the climate crisis. DSCEJ makes clear that **community engagement must be centred throughout policymaking and research processes** and that scholarly and community-based **health work should address the race and place effects of pollution, climate disasters, and climate-based disease.**

Miami

- **Miami is a coastal city that is particularly vulnerable to climate change**, contending with rising sea levels, flooding, and other weather changes attributable to the climate crisis (16).
- **Climate impacts have spurred social issues** and marginalized communities, such as Little Haiti, have been targeted for displacement and replacement because of their location above sea level (17).
- **Organizations and scholars are leading multiple sustainable initiatives to ameliorate Miami's multi-faceted climate crisis:**
 - **Dr. Tiffany Troxler** and colleagues elucidate an equitable systems approach linking community, government, and non-profit stakeholders in municipal climate resilience strategy (18), which emphasizes the **need for multi-sectoral collaboration rooted in community priorities.**
 - **Dr. Cheryl Holder** has focused on the links between climate change, health, and the structural determinants of health, namely poverty (19). Her work elucidates pathways to acknowledging climate-attributable illness and addressing how it all affects Black and Brown communities throughout Miami. She encourages healthcare providers and administrators to leverage their professional privilege to advocate for climate health equity. This initiative emphasizes the **need for integrative healthcare models rooted in economic justice and social transformation.**

Climate & Health Racial Justice Framework

Values & Principles

1. To recognize that **equity-driven climate change strategies must intervene in the ways that the structural determinants of health and pervasive health disparities magnify Indigenous, Black, and Racialized communities' vulnerability to the impacts of the climate crisis.** A commitment to climate equity demands that we build knowledge and expertise around the ways that engaging the structural determinants of health, growing health inequity and climate vulnerability must reshape health systems and health institutions.
2. To recognize that **our work must always aim to ally with, amplify and support the work of existing Indigenous, Black and Racialized community organizations.** The burden for advancing the health equity concerns for Indigenous, Black, and Racialized communities has often fallen on representative and often underfunded community-based and grassroots organizations. A commitment to climate equity demands that we better align our equity and climate change efforts with the communities, organizations, and advocates that will form the vanguard of the climate equity and justice movement.
3. To recognize that **we must move beyond consultation to enhance our collective capacity to advance climate equity at leadership tables across healthcare networks.** In order to transform systemic and institutional culture in the interest of climate equity action, we need to prioritize equitable approaches to leadership advancement and enhance our commitment to robust community accountability.
4. To acknowledge and commit to **centering intersectional understandings of Indigeneity and race as critical factors in climate resilience and mitigation.** While emphasizing equity on its own is important, health systems and institutions must continue to enhance their conversance with the lived experiences of Indigenous, Black and Racialized peoples.
5. To acknowledge that in order to advance climate equity we must measure more than mitigation efforts. With that in mind, **we must develop climate metrics that help evaluate efforts to advance climate equity.** We also recognize that for this to be effective, we must apply a more holistic view of the potential impacts of our initiatives and strategies.
6. To recognize that health provision systems and institutions exist as part of a larger fabric of private and public sector actors. The complexity of climate change and efforts to advance climate equity require that **we embrace and nurture multi-sectoral collaboration as a standard for climate resilient healthcare.**
7. To recognize that to advance climate equity **we need to document growing climate inequities** more effectively and carefully. We need to explore responsible and community accountable ways to prioritize the collection of race-based data related to the impacts of climate change on the health outcomes of equity-deserving groups.

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