Human Health

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Key Message 15.1

Climate Change Is Harming Human Health

It is an established fact that climate change is harming physical, mental, spiritual, and community health and well-being through the increasing frequency and intensity of extreme events, increasing cases of infectious and vector-borne diseases, and declines in food and water quality and security. Climate-related hazards will continue to grow, increasing morbidity and mortality across all regions of the US (very likely, very high confidence).

Key Message 15.2

Systemic Racism and Discrimination Exacerbate Climate Impacts on Human Health

Climate change unequivocally worsens physical, mental, spiritual, and community health and well-being, as well as social inequities. It is an established fact that climate-related impacts disproportionately harm communities and people who have been marginalized. These include BIPOC (Black, Indigenous, and People of Color), individuals and communities with low wealth, women, people with disabilities or chronic diseases, sexual and gender minorities, and children.

Key Message 15.3

Timely, Effective, and Culturally Appropriate Adaptation and Mitigation Actions Protect Human Health

In every sector of society, implementing timely, effective, and culturally appropriate adaptation measures (*high confidence*), creating climate-resilient health systems (*high confidence*), and preventing the release of greenhouse gases can protect human health and improve health equity (*high confidence*).



Regional Examples of Climate-Sensitive Infectious Diseases



Some climate-sensitive infectious diseases are expected to see expanded geographic range and extended seasonality.

Figure 15.2. The map shows select examples of regional climate-sensitive infectious diseases, based on recent changes in geographic range or incidence. Some regions will experience increases in tick- and mosquito-borne diseases, zoonotic diseases, and pathogens, both in geographic area and extended seasonality. Figure credit: Los Alamos National Laboratory, CDC, Columbia University, University of Arizona, and University of Colorado.

Recommended Citation

Hayden, M.H., P.J. Schramm, C.B. Beard, J.E. Bell, A.S. Bernstein, A. Bieniek-Tobasco, N. Cooley, M. Diuk-Wasser, Michael K. Dorsey, K.L. Ebi, K.C. Ernst, M.E. Gorris, P.D. Howe, A.S. Khan, C. Lefthand-Begay, J. Maldonado, S. Saha, F. Shafiei, A. Vaidyanathan, and O.V. Wilhelmi, 2023: Ch. 15. Human health. In: *Fifth National Climate Assessment*. Crimmins, A.R., C.W. Avery, D.R. Easterling, K.E. Kunkel, B.C. Stewart, and T.K. Maycock, Eds. U.S. Global Change Research Program, Washington, DC, USA. <u>https://doi.org/10.7930/NCA5.2023.CH15</u>