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Situating *One Health* at the Center of the Climate Agenda

The first ever “Health Day” at a conference of parties to the 28th United Nations Framework Convention on Climate Change, held in the United Arab Emirates in December 2023, brought representatives of UN member countries together to develop a roadmap for situating health at the heart of the climate change agenda. The resulting “COP28 Declaration on Climate and Health” is now endorsed by 150 countries.¹ Further, at the 77th World Health Assembly held in Geneva, Switzerland, in June 2024, delegates passed a resolution recognizing the impact of climate on health, thereby marking the first time that climate change was elevated to a top priority of the World Health Organization.² The complexity of climate impacts on human health cuts across many societal sectors, demands the attention of various agencies of the UN, and cuts across the responsibilities of many ministries at the national and regional levels.

The template for collaborative response across sectors was tested by the COVID-19 pandemic through the implementation of a response based on the *One Health* approach and simultaneous engagement of the UN Quadripartite: World Health Organization, World Organization for Animal Health, Food and Agricultural Organization, and the United Nations Environment Program. A recent expansion of threats posed by avian influenza (bird flu; H5N1) in bird populations, marine mammals, dairy cows, and humans is a reminder of the urgency of the *One Health* approach for pandemic preparedness and response. As an integrative approach, *One Health* aims to engender conditions that optimize the health of people, animals, and the environment through collaborative, multisectoral, and transdisciplinary planning and program implementation. The environmental and ecosystem contexts were initially underappreciated in *One Health* discourse. As climate change accelerates, the interconnected domains of *One Health* are under unprecedented strain, and a new focus is emerging to improve understanding of the environmental dimensions of *One Health*.^{3,4}

As Earth’s climate continues to shift in response to anthropogenic emissions of greenhouse gases, its adverse impacts on human and animal health, and on environmental systems, are increasingly apparent. These impacts are affecting populations in societies already marginalized by the wave of economic globalization that evolved over the past century. These global environmental impacts—ranging from wildfires and associated smoke and particulate emissions to temperature-related illnesses, the spread of infectious vector-borne diseases, habitat displacement, forced

migration, and food and water insecurity—are already subjects of *One Health*. Situating the approach at the heart of the climate agenda can lead to comprehensive strategies that address the multifaceted challenges posed by climate change while promoting public health and environmental sustainability.

A focus of the COP28 Declaration on Climate and Health is the urgent need to implement preventive measures, including physical infrastructure and policies, that are tailored to mitigate health impacts of climate change. Healthcare institutions and social–ecological agencies must adopt preventive, responsive, and inclusive strategies that reinforce early warning indicators, and integrative epidemiological and environmental surveillance systems, with sustainable financial commitments. Equally vital is the engagement of various stakeholders—from Indigenous peoples to local communities and the broad spectrum of *One Health* practitioners—in fostering a unified response to climate change. The COP28 declaration elucidates the need for close partnerships with these groups for effective implementation of policies consistent with the quadripartite *One Health* Joint Plan for Action at the national level.⁵ If universally adopted, the *One Health*-oriented initiatives promoted in the COP28 Declaration would significantly lessen the burden on global health, veterinary, agricultural, and ecological systems while also promoting sustainable development.

The COP28 Declaration also acknowledged insufficient financing as a stumbling block against implementation of the climate and health agenda. The financial constraints are likely more severe for the environmental sector than for the animal and human health sectors. National human health systems and veterinary services, particularly in low- and middle-income countries, are already in dire need of financial support to implement routine health care services and may consider adding climate impacts as a priority on their agendas. As highlighted in the COP28 declaration, the climate health financing gap not only threatens millions of lives but also exacerbates global health inequities. Consequently, there is an urgent call for accelerating discussions to ensure sustainable funding, both domestically and globally. *One Health* and sustainability science share a common agenda that includes addressing health inequities exacerbated by climate change. To effectively integrate *One Health* into the climate agenda, countries must develop and implement national *One Health* action plans. These plans should be designed to prevent, predict, detect, and respond to health threats across the

human, animal, and environmental sectors. By prioritizing interconnected pathways, countries can ensure their *One Health* strategies are adaptive and responsive to emerging climate-related challenges.

Situating *One Health* at the core of the climate agenda is fundamental in addressing the complexities of climate change impacts on health. A unified, integrative approach that spans international cooperation, innovative funding solutions, and practical national measures can facilitate significant advancements toward sustainable health systems and climate resilience. Through comprehensive strategies rooted in *One Health*, we can better safeguard human population health, protect animal health and wildlife diversity, enhance environmental sustainability, and mitigate the deleterious effects of climate change.

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Disclosure Statement

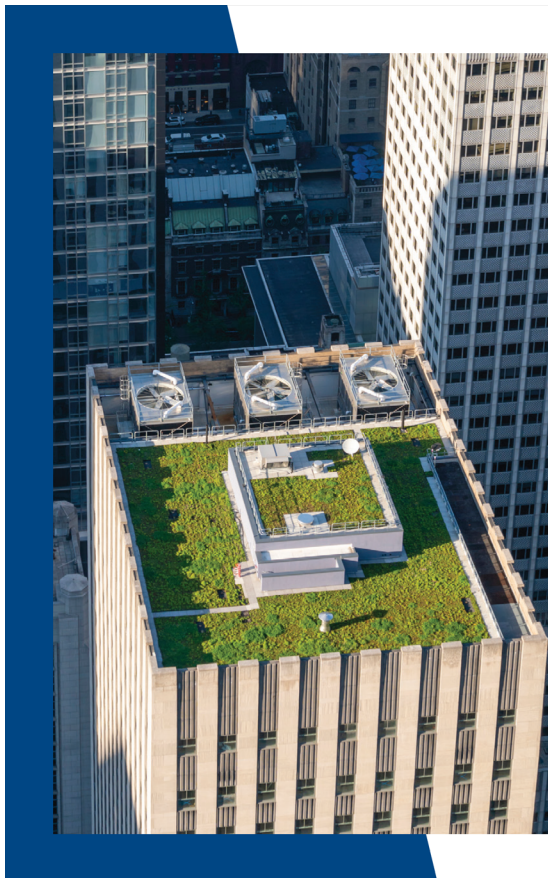
No potential conflict of interest was reported by the author(s).

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NOTES

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