



Brussels, 14 October 2009

**To:** Members of the European Parliament Committee on Environment, Public Health and Food Safety (ENVI Committee)

**Concerning:** Proposals for amendment of the “European Parliament Resolution on the EU strategy for the Copenhagen Conference on Climate Change (COP 15)”

#### **ENVI Vote on 19 October on Copenhagen Climate Conference:**

#### **Bring health to the centre of climate change towards Copenhagen and beyond**

Dear Member of the European Parliament,

During the forthcoming ENVI Committee meeting on 19 October you will vote on the Draft Resolution and amendments to the “European Resolution on the EU strategy for the Copenhagen Conference on Climate Change (COP 15)”. As the leading representatives of European-wide health, medical and healthcare networks, we welcome the Draft Resolution from the European Parliament and would like to ask you to strengthen it to adequately recognize the health dimensions of climate change<sup>1</sup>.

Please support amendments **19, 40, 67 and 100**, which bring health into climate change discussions and policy development.

**Climate change will affect our individual health, public health and health care systems in the EU and globally. Health represents the point of convergence of all the disruptions and damages caused by climate change, both the direct ones, for example respiratory disease, and indirect ones, for example from water shortage and population movement.** For instance, for every one degree Celsius rise in temperature, the risk of premature death among respiratory patients is up to six times higher than in the rest of the population<sup>2</sup>.

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<sup>1</sup> The Standing Committee of European Doctors (CPME), representing National Medical Associations from 27 countries in Europe (around 1.4 million doctors), has also made a call for action to stop dangerous climate change. Their statement dated April 2009 highlight the health effects of climate change and recommends actions to address these impacts.

<sup>2</sup> The European Respiratory Journal (ERJ), ‘Climate Change and Respiratory Disease: European Respiratory Society position statement’; available at: <http://erj.ersjournals.com/cgi/content/full/34/2/295>.

Yet in the current policy developments on climate change, there is not enough awareness of the negative impacts on health or of the potential benefits to health of strong measures of tackling climate change. Estimated savings on health costs in the EU from an increase to 30% domestic greenhouse gas reductions compared to 1990 emission levels by 2020, could be as high as 25 billion Euros per year from 2020 onwards<sup>3</sup>.

Moreover, the health sector will need to be at the forefront in responding to the effects of climate change, and developing adaptation measures which do not add further to the climate problem. Increased awareness and resources are needed to ensure this happens as recently highlighted in the WHO/HCWH discussion paper: 'Healthy Hospitals, Healthy Planet, Healthy People: Addressing climate change in healthcare settings'<sup>4</sup>.

**Therefore, the health and medical community urge you to vote in favour of the proposed amendments 19, 40, 67 and 100 (see Annex I, below) which would help strengthen the health aspect in your Draft Resolution by ensuring better protection of public health from climate change and support the healthcare sector in adaptation and mitigation actions.**

We look forward to working with you to ensure that health becomes a cornerstone of international and EU climate change policy.

Sincerely,



Genon K. Jensen, Health and Environment Alliance (HEAL)

On behalf of:

Health Care Without Harm Europe (HCWH Europe)  
European Respiratory Society (ERS)  
Climate and Health Council (CHC)  
AerztInnen fuer eine gesunde Umwelt, AeGU (ISDE) Austria  
The Standing Committee of European Doctors (CPME).

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<sup>3</sup> HEAL, WWF and Climate Action Network Europe, December 2008. The co-benefit to health of a strong EU climate change policy. This report, based on the Commission's findings, shows that the health costs avoided by increasing the EU domestic emissions reduction target from 20% to 30% by 2020 from 1990 levels, would increase the health benefits by 48% (from 52 billion Euros to 76 billion Euros per year from 2020 onwards). An emission reduction target of 40% by 2020 compared to 1990 emissions levels would push the total health savings even higher. The report is available at: [http://www.env-health.org/IMG/pdf/Co-benefits\\_to\\_health\\_report\\_-september\\_2008.pdf](http://www.env-health.org/IMG/pdf/Co-benefits_to_health_report_-september_2008.pdf).

<sup>4</sup> World Health Organization and Health Care Without Harm, April 2009. Healthy Hospitals, Healthy Planet, Healthy People: Addressing climate change in health care settings. Available at: [http://www.who.int/globalchange/publications/healthcare\\_settings/en/index.html](http://www.who.int/globalchange/publications/healthcare_settings/en/index.html).

## Annex I

### Please support the following amendments in the Vote on 19 October 2009

**Amendment 19** tabled by Satu Hassi and Bas Eickhout  
Recital Ca new

**Ca. Whereas a binding international framework leading to emission reductions on the necessary scale will also have large immediate co-benefits to global health, and whereas without such a framework progress towards meeting the Millennium Development Goals is at risk, and could be reversed;**

**Amendment 40** tabled by Frederique Ries  
Article 1

#### Article 1

1. Urges the EU to speak with one voice to maintain its leading role in the negotiations at COP 15, and to maintain a high level of ambition in discussions with its international partners, in order to achieve an ambitious international agreement in Copenhagen, in line with the latest developments in science and consistent with the 2°C objective;

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**Amendment 67** tabled by Frederique Ries  
Article 3

#### Article 3

3. Recalls that the international agreement should ensure collective greenhouse gas emissions reductions in the industrialised countries at the high end of the 25-40 % range for 2020 compared to 1990 as recommended by the Fourth Assessment Report by the Intergovernmental Panel on Climate Change (IPCC 4AR), and calls for those reductions to be domestic and recalls that a long-term reduction target should be set for the EU and the other industrialised countries of at least 80 % by 2050 compared to 1990;

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3. Recalls that the international agreement should ensure collective greenhouse gas emissions reductions in the industrialised countries at the high end of the 25-40 % range for 2020 compared to 1990 as recommended by the Fourth Assessment Report by the Intergovernmental Panel on Climate Change (IPCC 4AR), and calls for those reductions to be domestic **to ensure significant health benefits especially for people with respiratory diseases and** recalls that a long-term reduction target should be set for the EU and the other industrialised countries of at least 80 % by 2050 compared to 1990;

**Amendment 100** tabled by Frederique Ries  
Article 5

#### Article 5.

5. Emphasises that an agreement in Copenhagen could provide the necessary stimulus for a 'Green New Deal' boosting economic growth, promoting green technologies and securing new jobs in both industrialised and in developing countries; recognises that upfront investments by the public sector in a green energy infrastructure and in complementary research and development will bring down costs;

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5. Emphasises that an agreement in Copenhagen could provide the necessary stimulus for a 'Green New Deal' boosting economic growth, promoting green technologies and securing new jobs in both industrialised and in developing countries; recognises that upfront investments by the public sector in a green energy infrastructure and in complementary research and development will bring down costs, **not only for industry but also for public health and healthcare institutions;**