

Planetary Health: Bridging Science to Policy

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What is Planetary Health?

“Put simply, planetary health is the health of human civilisation and the state of the natural systems on which it depends.”



THE LANCET

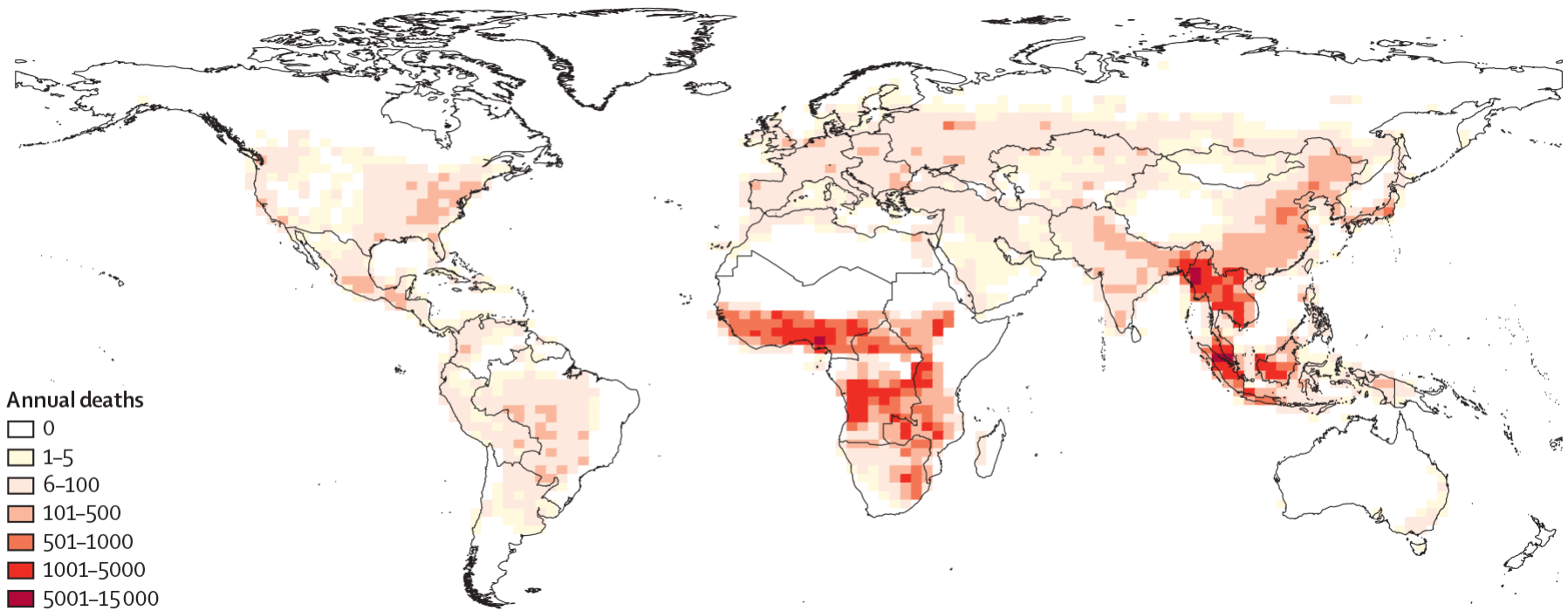
Commission on Planetary Health

- **Significant gains in health and development likely to be reversed by global environmental changes**
- **Losses can be minimized**

SCIENCE POLICY

- Education/awareness raising among decision and policy makers;
- Identifying their science needs to address key policy gaps and needs;
- Identifying decision support tools (system dynamics models, HIA/EIA) already in use which could be enhanced with environmental change-human health data; and,
- Strategic partnering with other groups working on science to policy application to share experiences and further develop and document best practices on science policy engagement.

Annual average global mortality (1997–2006) due to Landscape fire smoke



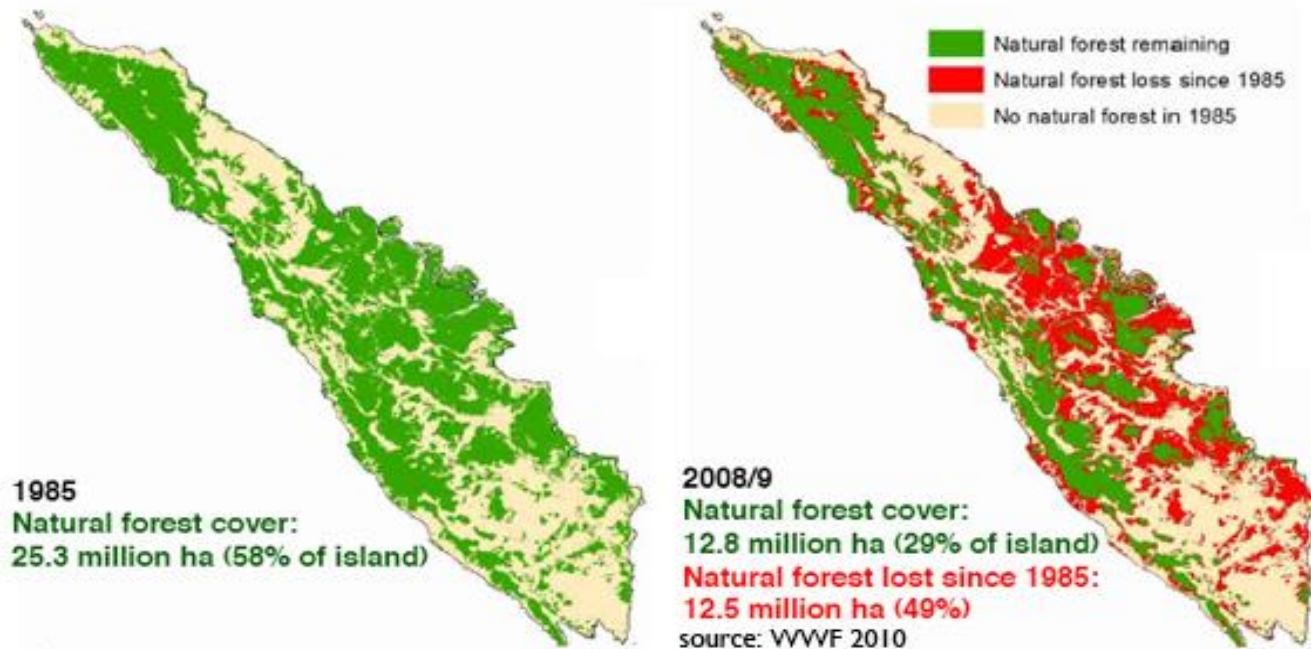
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Trends in Equatorial Asia

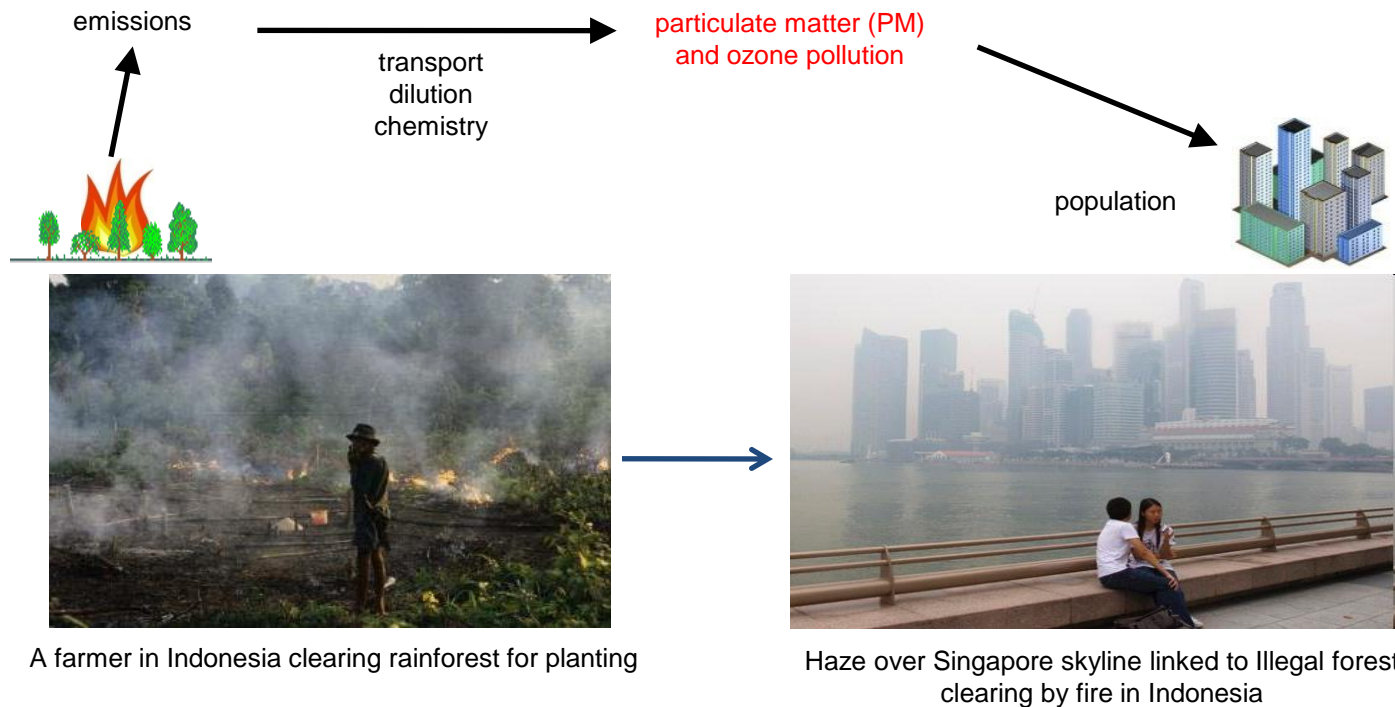
Southeast Asia has the highest relative rate of deforestation of any major tropical region, and by 2100, could lose:

- Three quarters of its original forests
- Up to 42% of its biodiversity
- (Over half the mammals, plants, amphibians and reptiles in the region are endemic)

Natural forest cover in Sumatra, 1985 and 2009



Model current patterns of land-use, emissions, transport, and exposures



Environmental Research Letters



LETTER

Public health impacts of the severe haze in Equatorial Asia in September–October 2015: demonstration of a new framework for informing fire management strategies to reduce downwind smoke exposure

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Keywords: land use change fires, smoke exposure, GEOS-chem adjoint
Supplementary material for this article is available [online](#)

Abstract

In September–October 2015, El Niño and positive Indian Ocean Dipole conditions set the stage for massive fires in Sumatra and Kalimantan (Indonesian Borneo), leading to persistently hazardous levels of smoke pollution across much of Equatorial Asia. Here we quantify the emission sources and health impacts of this haze episode and compare the sources and impacts to an event of similar magnitude occurring under similar meteorological conditions in September–October 2006. Using the adjoint of the GEOS-Chem chemical transport model, we first calculate the influence of potential fire emissions across the domain on smoke concentrations in three receptor areas downwind—Indonesia, Malaysia, and Singapore—during the 2006 event. This step maps the sensitivity of each receptor to fire emissions in each grid cell upwind. We then combine these sensitivities with 2006 and 2015 fire emission inventories from the Global Fire

Developing sustainable and healthy cities



Active travel /public transport

Reduced fine particulate air pollution

Green spaces –biodiversity, reduced heat island and mental health benefits

Watershed conservation

Access to healthy food

Increased resilience to floods, storms and droughts

Engaging in planetary health science policy: what will it take to bridge the science-policy gap?

- availability and quality of data
- **Who is your policy partner – capacity, clear understanding of science needs, science to decision pathway, strong stakeholder relationships**
- **What types of decisions could be optimized by integrating environment and health?**
- **Identifying which existing decision support tools/approaches in use by policymakers could be enhanced with planetary health science, and how**
- **Transferability** of results to other places experiencing similar environmental changes
- Addresses **environmental justice**, most vulnerable populations
- **Political and legal considerations (not barriers but opportunities)**
- How is the science/technical community prepared to support – technical assistance, training?

Summary

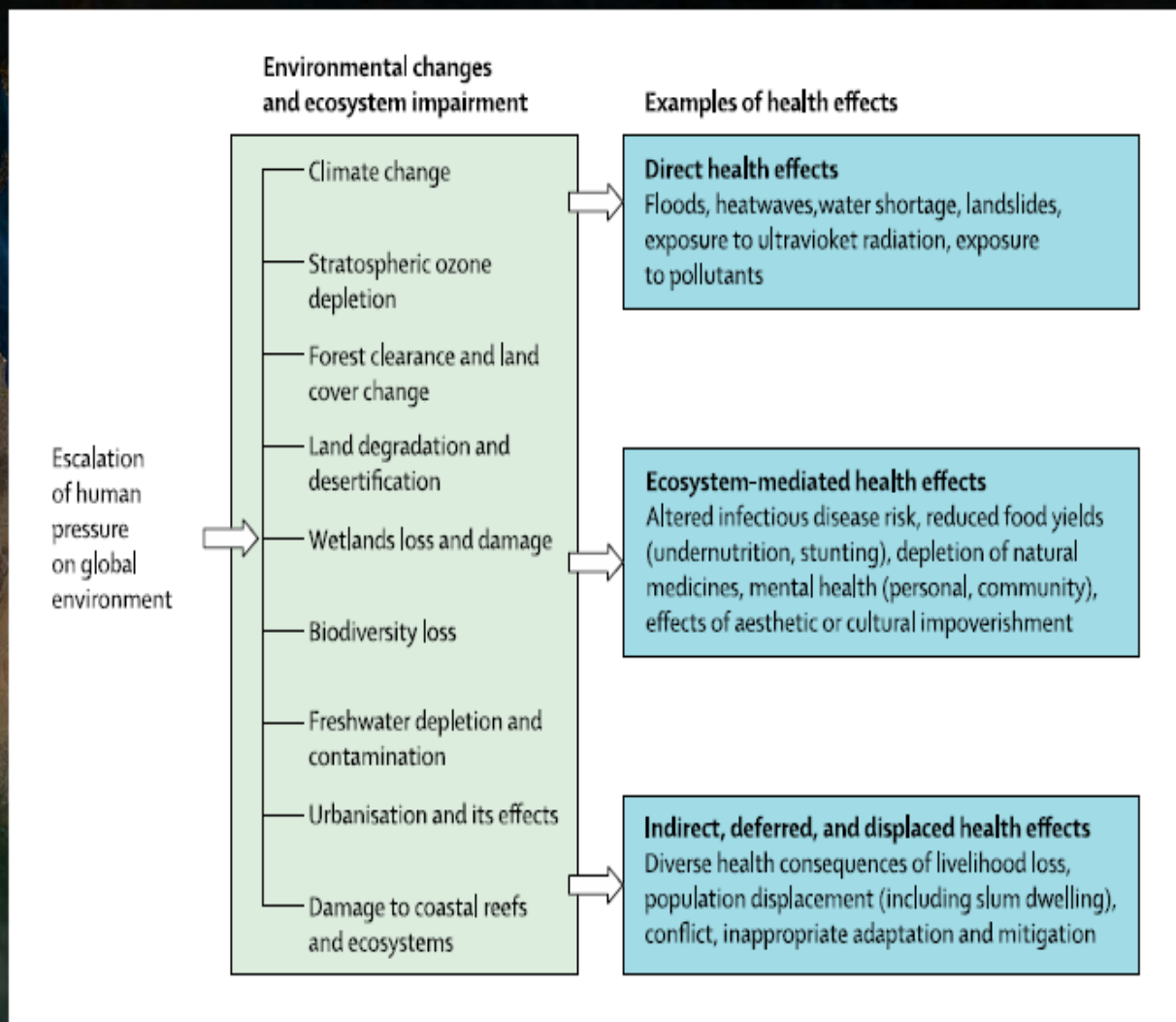
- Aim: **leverage human health for ecosystem protection and biodiversity conservation**
- Collaboration opportunities:
 1. develop and share case studies demonstrating applied environmental change-health science for impact
 2. Build on existing tools like HIA and EIA
 3. partner on new or ongoing research projects beginning with your science needs for policy; demonstrate and share best practices learned from doing **applied interdisciplinary science** linking global environmental changes and health
 4. Develop and test methodologies for integration of data and analyses across disciplines (ecology, health, economics, spatial mapping, behavioral science)
 - Approaches to decision support (systems based, participatory)

“We have lived our lives by the assumption that what was good for us would be good for the world. We have been wrong. We must change our lives so that it will be possible to live by the contrary assumption, what is good for the world will be good for us. And that requires that we make the effort to know the world and learn what is good for it.”

Wendell Berry. From The Long Legged House (1969).



Links with health



Effects of multiple environmental changes on food availability and quality



Land degradation and soil erosion

Water scarcity (from overconsumption, diversion to non-food crops, climate change and changes to ecosystem function)

Loss of pollinators

Overfishing/Ocean acidification

Climate change

- Temperature/extreme events
- CO₂ fertilization
- Ozone
- Pests, mold and fungi



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