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THE GLOBAL CLIMATE & HEALTH ALLIANCE

HCN Health and Climate Network

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Climate Action for a Healthy Future

Health Messages from the IPCC Sixth Assessment Report on Mitigation of Climate Change

Contents

Recognition and Commitment
We recognise Aboriginal and Torres Strait Islander People as the traditional custodians of the land on which we live and work and acknowledge that sovereignty of the land we call Australia has never been ceded. We commit to listening to and learning from Aboriginal and Torres Strait Islander people about how we can better reflect Indigenous ways of being and knowing in our work.

Climate Action for a Healthy Future

Health Messages from the IPCC Sixth Assessment Report on Mitigation of Climate Change

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Background

What is the IPCC report?

The **Intergovernmental Panel on Climate Change**, or IPCC, is the world's highest authority on climate science. It is made up of leading climate scientists from around the world who provide regular assessments of the latest climate science.

The IPCC is publishing their sixth series of assessments, also known as the Sixth Assessment Report (AR6). AR6 consists of three major reports published in 2021-22:

1. A report on the physical science basis of climate change, which was released in August 2021;
2. A report on climate change impacts, adaptation and vulnerability, which was released in February 2022;
3. A report on mitigation of climate change, which was released in April 2022.

CAHA has previously prepared a summary of the health findings of the second report on climate impacts, adaptation and vulnerability, which can be accessed here.

This briefing summarises the key findings on health and wellbeing from the **April 2022 IPCC report** - the third, mitigation, report above. This briefing document has been prepared by the Climate and Health Alliance, the Global Climate and Health Alliance, and the Health and Climate Network.

The 2022 IPCC Mitigation Report is the most comprehensive scientific summary to date of the solutions we have at hand to respond to climate change. To do this, the IPCC reviewed thousands of scientific papers. Across almost 3000 pages, the Mitigation Report sets out how to address climate change in a wide range of areas, including energy systems, agriculture and land use, buildings, transport, policy, social interventions, finance, and more.

The IPCC Mitigation report also comes with a **Summary for Policymakers** (SPM). This provides a high-level synopsis of the entire report, and serves as a guiding document for policymakers worldwide. The exact wording of the SPM is negotiated by governments from around the world, and forms an important basis for national and international climate policies.

This briefing summarises the findings relevant to health and wellbeing. It is a resource for health professionals and policy-makers working at the intersection of climate change and health. In no way does this summary aim to replace, dispute, or reinterpret the findings of the IPCC report. We encourage readers to consult the original report for more information.

The briefing references the original IPCC chapter and section (Chapter.Section) or section of the SPM (e.g. SPM: B.1.4) as appropriate.

Key Findings

1

We already know how to avoid the worst impacts of climate change and create a fairer, healthier future.

Many climate solutions also benefit our health, reduce inequities, and strengthen our economy. Well-designed strategies to reduce greenhouse gas emissions also have significant benefits for health and wellbeing. These include cleaner air, soil and water; improved mental health; more active and resilient communities; healthier diets; and more.

Climate action is good for health, and we can implement climate and health solutions in many different sectors: including energy, transport, cities, and agriculture.

2

More action is needed to protect our health.

The world is on track to breach the 1.5°C threshold of the Paris Agreement, unless climate policies are rapidly strengthened.

Without urgent, effective and equitable mitigation actions, climate change threatens the health and livelihoods of people around the globe, as well as ecosystem health and biodiversity.

3

Climate change is a justice issue.

Wealthy countries, corporations, and individuals are the largest polluters. At the same time climate impacts are worsening existing inequalities within countries and globally.

Climate solutions can also reduce socio-economic inequalities, maximise health benefits, and ensure broad and meaningful participation. Focussing on solutions which work in this way can strengthen public support for the transformational changes that are needed.

Part 1
Harness the health benefits of climate action

Many climate solutions also have benefits for health and wellbeing.
There are many synergies between climate and health goals, across many different sectors, including in agriculture, energy, transport, urban development and nature (SPM: D.1.2).

Mitigation strategies can enhance resilience against climate change impacts while contributing to social equity, public health, and human well-being (8.2).

Early climate action will bring long-term economic and health gains.
Compared with delayed action, immediate mitigation action will deliver long term gains for the economy as well as the benefit of avoided climate change impacts and related economic losses (SPM: C.12.3, E1.3).

The economic savings associated with better health due to air quality improvements alone are estimated to be of the same order of magnitude as mitigation costs, and potentially even larger (3.6.3).

Understanding the health benefits and risks of various climate solutions is key to prioritising mitigation policies.
Understanding the co-benefits and trade-offs associated with mitigation policies is key to understanding how societies prioritise various policy options. Areas of climate action with anticipated trade-offs include food and biodiversity, energy affordability and access, and mineral resource extraction. Areas of climate action with anticipated co-benefits include health, especially regarding air quality, clean energy access and water availability (figure TS.29).

Climate policies that are designed to achieve both climate and health goals can accelerate action and avoid potential trade-offs.
Policies that integrate mitigation with other development goals - such as good health and well-being, food security and improved nutrition, and reduced inequalities - can resolve or alleviate potential trade-offs (3.7).

Food and agriculture

Land use can be a crucial part of achieving net zero emissions.
Mitigation in the agriculture, forestry and land use sector can deliver large-scale emission reductions, and help remove carbon from the atmosphere. However, it cannot fully compensate for delayed climate action in other sectors (SPM: C.9).

There are both benefits and risks to stronger action around land use.
Climate action in the agriculture and land use sector can be beneficial for livelihoods, biodiversity conservation, and ecosystem services, and can help avoid climate risks. However, these co-benefits are often country-specific, and care needs to be taken with trade-offs. These trade-offs include competing demands on land, conflicts with food security and livelihoods, land tenure and land-use rights of Indigenous Peoples, local communities and small landowners, and cultural aspects (SPM: C.9).

Shifting to sustainable healthy diets and reducing food loss and waste offer climate benefits.
Sustainable healthy diets promote all dimensions of individuals' health and wellbeing; have low environmental pressure and impact; are accessible, affordable, safe and equitable; and are culturally acceptable (SPM: C.9.1).

Shifting to balanced, sustainable healthy diets, along with other actions such as reducing food loss and waste, and using bio-materials, would significantly reduce emissions and environmental pollution (SPM: C.9.1).

Sustainable intensification in agriculture, shifting diets, and reducing food waste could also enhance efficiencies and reduce agricultural land needs, and is therefore critical to enable measures such as reforestation, restoration, as well as decreasing emissions from agricultural production (7.4).

Diets high in plant protein and low in meat and dairy have much lower emissions and offer health gains.
A shift to diets with a higher share of plant protein, moderate intake of animal-source foods and reduced intake of saturated fats could lead to substantial decreases in emissions. This change would also reduce land use and nutrient losses to the surrounding environment. These dietary changes also bring health benefits, such as lower risk of cardiovascular disease and type 2 diabetes, and reduced mortality from diet-related non-communicable diseases (7.4.5, 12.4).

The global adoption of dietary guidelines for the consumption of red meat, sugar, fruits, and vegetables could reduce global emissions by almost a third (29%). Such guidelines could also reduce other environmental impacts by almost one tenth (5–9%), and bring large population health gains and lower overall healthcare costs (7.4.5).

Interventions must be planned and implemented with vulnerable populations in mind
Mitigation and adaptation can have important implications for vulnerable people and communities. Mitigation activities that, for example, require large areas of land could raise food and fibre prices globally. Understanding how different climate policies affect local communities before implementing them is critical (7.6.4).

Nature based solutions yield additional health co-benefits
"Agroforestry" describes a set of diverse land management systems that integrate trees and shrubs with crops and/or livestock. It is an effective mitigation measure because it captures carbon in woody vegetation and soil. Agroforestry can also improve soil health, reduce ambient temperatures and crop heat stress, increase groundwater recharge in drylands, and positively influence human health and dietary diversity (7.4.3).

The protection and restoration of peatlands conserves unique biodiversity, including many critically endangered species, improves water quality and regulation, and improves public health by reducing fire-caused pollutants (7.4.2).

Energy

The energy sector requires a major transition, with a rapid reduction of fossil fuel use and no new fossil fuel infrastructure.
Rapid emissions reductions in the energy sector are possible. Means to achieve this include a substantial reduction in fossil fuel use, deployment of renewable energy sources, switching to alternative energy carriers like hydrogen, and energy efficiency and conservation. The continued installation of fossil fuel infrastructure, however, will 'lock-in' emissions (SPM: C.4).

Decarbonising the energy sector has major economic and health benefits.
Renewable technologies such as wind power, solar power, and storage, are increasingly economically attractive. Maintaining existing, emission-intensive energy systems may be more expensive than transitioning to low-emission energy systems (SPM: C.4.2).

The transition to a low-emission energy sector will have multiple co-benefits, including improvements in air quality and health (SPM: C.4.2). Energy sector mitigation and efforts to achieve Sustainable Development Goals - such as health - generally support one another (6.1).

Transition would also help reduce local negative health impacts. For example, coal mining communities frequently experience significant health and economic burdens from resource extraction (6.7.3).

Renewable energy systems are much cheaper than fossil fuels when health costs and benefits are included.
Even in cases where the initial costs of transition to low-carbon energy are higher, these energy sources may still be the most economic option when health impacts and other co-benefits are included. Increasing electrification also reduces costs in areas such as education, health, and employment (6.7.7).

Energy transitions from fossil fuels to renewables, as well as within fossil fuels (coal to gas switching), are already taking place. These have been spurred by climate concerns, health concerns, market dynamics, or consumer choice (6.7.7).

Fossil fuels are the energy source that is by far the most harmful to our health.
Recent studies have found only weak associations between wind farm noise and measures of long-term human health. Studies on the overall health impacts of nuclear power plants show them to be far less harmful than fossil fuel technologies (6.4.2).

Communicating the health benefits of greener energy is an important motivator for action.
Communicating the financial consequences of energy behaviour seems to be less effective than emphasising social rewards or benefits of actions for people such as public health, comfort and the environment (6.7.6).

Concerns about the health risks of air pollution have been a major reason for the slow-down of coal expansion in Asia.
Both China and India have suspended and cancelled many new coal power projects and retired some old coal plants. These changes are largely driven by non-climate reasons, such air pollution and health, as well as growing investments in renewables (Box 6.2).

Despite the multiple health and other benefits from closing coal-based infrastructure, coal power plants have continued to be commissioned globally, especially in Asian countries (6.7.3).

Effects on health and wellbeing are important socio-cultural indicators that support or inhibit public acceptance, adoption, and use of mitigation policies towards low-carbon energy systems. (6.4.1).

Many people still don't have access to electricity or rely on burning solid fuels.
In 2018, 860 million people were still without access to electricity. About 2.5 billion households were cooking with solid fuels like wood or charcoal - which produce dangerous indoor air pollution. Achieving universal energy access will require energy transitions in the domestic sector, including new developments in off-grid energy technologies, reforming energy subsidies, and increasing efforts to address the health concerns related to the use of traditional fuels (Box 6.1).

Transport

A low-emission transport sector would bring many benefits, including for health.
Many mitigation strategies in the transport sector would have co-benefits, including air quality improvements, health benefits, equitable access to transportation services, reduced congestion, and reduced material demand (SPM: C.8).

Electrification combined with renewable energy, and shifts to public transport can enhance health and employment. Such changes can also strengthen equity and energy security (SPM: D.1.2).

The planning of healthy cities strongly favours public and active transport.
The health benefits from reduced car dependence are increasingly influencing urban planning processes. Decision-making tools that focus on health benefits encourage cities to increase emphasis on public transit and active transport (Table 10.7).

Table: Health benefits from low-carbon, active, and electrified transport (adapted from IPCC table 10.1)

Improved air quality. Low-emission transport reduces air pollution and contributes to positive health outcomes.
Reduced traffic injuries. Reduced injuries and deaths from road traffic injuries.
Active transport. Walking and cycling have major health benefits, such as reducing the risk of many chronic health conditions and improving mental health and wellbeing.
Inclusive cities. Accessible, affordable, and clean public transportation can make mobility more inclusive.
Poverty alleviation. Transport planning can improve energy access and reduce poverty in cities.
Access to services. Accessible, affordable public transportation can improve access to healthcare and other essential services for disadvantaged population groups.
Reduced stress. Reduced stress levels from driving.

Cities

Cities are major centres of consumption and emissions.
The global share of emissions that can be attributed to urban areas is increasing, and amounted to almost three quarters (67-72%) of the global total in 2020 (SPM: B.2.3).

Cities can also be a major driver for climate action.
Cities can achieve net-zero emissions, but only if emissions are reduced within and outside of their administrative boundaries through changes to supply chains. This also has beneficial cascading effects across other sectors (SPM: C.6).

Compact cities with active transport can reduce emissions and improve health.
Policies that lead to more compact cities with shortened travel distances can deliver significant public health benefits and lower emissions. Reducing travel between housing and jobs, supporting a modal shift from private motor vehicles towards walking, cycling, and low-emissions shared or public transportation, passive energy comfort in buildings, and urban green infrastructure, are all important in this process (8.2, 8.4).

The promotion of active transport modes provides a wide range of health and economic co-benefits. For example, it reduces healthcare costs linked with pollution and cardiovascular diseases, improves labour productivity, and decreases congestion costs (8.2.2).

Reducing urban emissions can improve air quality.
Energy savings and cleaner energy supply in urban areas can significantly reduce air pollution. These changes can also lower health risks related to energy poverty, especially among vulnerable groups such as the elderly and in informal settlements.
Improved air quality and positive health co-benefits in urban areas can create positive feedback loops. For example, reducing emissions through switching to active transport leads to better air quality; this in turn increases the size of health co-benefits from walking and bicycling in areas with cleaner air (8.2.1).

Reducing emissions from buildings can improve indoor air quality.
Mitigation actions in the building sector bring health gains through improved indoor air quality and thermal comfort, and have positive economic effects. These positive economic effects include increased productivity of labour, job creation, reduced poverty, especially energy poverty, and improved energy security (9.8).

Cities are getting hotter, and need to be able to keep people cool.
An expected rise in heatwaves will inevitably increase cooling needs in urban areas to limit the health impacts of climate change. Some adaptation measures such as natural ventilation, white walls, and nature-based solutions such as green roofs, can help decrease energy demand for more cooling. Shared cooled spaces with efficient cooling solutions are among

the mitigation strategies which can limit the effect of the expected heatwaves on people's health (9.7, 9.8).

Sustainable urban planning can reduce climate risks and protect health.
Sustainable urban planning and infrastructure design can enhance resilience against climate change impacts while contributing to social equity, public health, and human well-being. Solutions include green roofs and facades, networks of parks and open spaces, urban forests and wetlands, urban agriculture, and water-sensitive design. These solutions can also reduce flood risks, lower pressure on urban sewer systems, protect against urban heat island effects, and deliver health benefits from reduced air pollution (8.2, SPM: D.2.1).

Urban green and blue infrastructure can mitigate climate change while bringing many health benefits.
Urban green and blue infrastructure, including urban forests and street trees, permeable surfaces, and green roofs, can mitigate climate change. Mitigation occurs directly through storing carbon, and indirectly by inducing a cooling effect that reduces energy demand, and reducing energy use for water treatment. They also bring many health benefits such as reducing the urban heat island effect and heat stress, reducing stormwater runoff, improving air quality, and improving the mental and physical health of urban dwellers (8.4.4).

Other health benefits from urban forestry and green infrastructure include reduced cardiovascular morbidity, improved mental health, raised birth weight, and increased life expectancy (8.2.1).

A suite of urban policies is often more effective than a single policy, and can bring more benefits.
Combining emission reduction plans with broader sectoral policies, behaviour changes, and financial regulation is often more effective in overcoming barriers and delivering benefits. For example, measures that promote walkable urban areas combined with electrification and renewable energy can create health co-benefits from cleaner air and benefits from enhanced mobility (SPM: E.2.2). By adopting a more coordinated approach to implementing climate solutions, cities and urban areas can improve both inclusivity and health (8.6.1).

Building more sustainable and fair cities would help us prepare for future pandemics.
Sustainable urbanisation and more equitable urban planning can improve preparedness and resilience against future pandemics. Long-term exposure to air pollution has been found to exacerbate the impacts of COVID-19 infections while socio-economic factors such as poverty, racial and ethnic disparities, and crowding play a role in COVID-19 spread and mortality (8.6.4).

Many cities also saw air pollution levels drop during COVID-related lock-down and travel restrictions. It is unclear if any of these temporary changes in air quality will be retained long-term. Cities could seize this opportunity to provide better infrastructure, e.g. by expanding cycling networks and restricting existing streets to make them more pedestrian- and cycling-friendly. These kinds of structural changes would contribute to health co-benefits, reduce climate risks, and improve resilience against future pandemics (8.6.4).

Part 2
Climate and health justice

Wealthy countries are overwhelmingly the largest polluters.
A handful of rich countries - Australia, Canada, the European Union, the United Kingdom, the United States, Japan and New Zealand - made up 1/5th (22%) of the world's population in 2019, but contributed almost half (43%) of historical cumulative CO2 emissions up to 2019 (Figure SPM2).

The least developed countries - a group of 46 countries - have emitted just 3.3% of global emissions in 2019, while small island developing states emitted only 0.6% (SPM: B.3.1).

Wealthy individuals in all countries disproportionately contribute to climate change.
Globally, the 10% of households with the highest individual (per capita) emissions contribute more than 1/3rd (34-45%) of global consumption-based household greenhouse gas emissions (SPM: B.3.4).

Individuals with high socio-economic status both contribute disproportionately to emissions *and* have the highest potential for reducing their emissions (SPM: C.10.2).

Climate impacts are worsening inequalities, which in turn present barriers to action.
Large shocks, such as pandemics, and slow-growing ones such as climate change, generally worsen inequality. Climate policies are more politically difficult to implement when the setting is one of high inequality. They are easier to implement in places with more evenly distributed incomes and with stronger social safety nets (15.2.4).

A new social compact is needed to protect people and the planet.
A redrawn social compact is needed: one that has strong climate targets, adopts redistributive taxes, helps to lower carbon consumption, and strengthens the state's capacity to deliver safety nets, health, education, and other services (15.2.4).

Providing access to basic services in low-emitting countries would improve lives without significantly raising global emissions.
A substantial share of the population in low emitting countries lack access to basic services such as energy and healthcare (SPM: B.3.3). Ending extreme poverty and energy poverty, and providing decent living standards to all in these regions, in the near-term, can be achieved without significant global emissions growth (SPM: B.3.3).

Bridging the investment gap for these essential services is an essential enabling condition for adapting to climate change (15.4.2).

Climate policies need to pay attention to who wins and who loses.

In addition to existing inequalities in terms of who contributes most to emissions, the transformational shifts that are needed across sectors can impact various groups of society differently. Policies that worsen these inequalities can affect social cohesion and the acceptability of mitigation and other environmental policies. Just transitions that take into account equity can enable much more ambitious mitigation (SPM: D.3.3).

Decision-making processes that pay attention to equity and social justice, and ensure broad and meaningful participation of all relevant actors can build social trust, and deepen and widen support for transformative changes (13.2, SPM: D.3).

Improved finance to developing countries is needed.
Accelerated financial support for developing countries from developed countries is a critical enabler to enhance mitigation and address inequities in access to finance. These inequities include the cost of finance, its terms and conditions, as well as the economic vulnerability to climate change of developing countries (SPM: E.5.3).

Developing countries need financial support to respond to the 'losses and damages' from climate change.
Developing countries are already experiencing big 'losses and damages' from climate impacts, with significant financial costs and health impacts. They need financial protection systems to be able to respond to and recover from climate impacts, especially in order to provide support to the most vulnerable (15.5.2).

However, some ' losses and damages' from climate change are not commonly valued in monetary terms, for example the loss of cultural identity, the loss of lives, or a loss of health. This makes it hard to estimate the financing requirements that are needed for communities and countries to respond to climate impacts (15.5.2).

The depth and quality of change matters, as well as its speed.
Climate action in the context of justice and sustainable development involves not only speeding up the pace of implementing climate solutions, but also ensuring the quality and depth of change. This can be done by addressing the underlying drivers of vulnerability and high emissions, and by enabling diverse communities, sectors, stakeholders, regions and cultures to participate. Accelerating climate action in a just, equitable and inclusive way will improve the health and well-being of people and the planet (17.1.1).

Part 3

Policy pathways to a healthy and sustainable future

The world is on track to breach the 1.5°C threshold, with dire consequences for health. Without a strengthening of policies beyond those implemented at the end of 2020, the world is on track for warming of 3.2°C by 2100 (SPM: C.1). Even the most ambitious IPCC models see temperatures breach the 1.5°C threshold temporarily, peaking at around 1.6°C by mid-century (Table SPM1).

More action is urgently needed to protect our health. Immediate, deep cuts in emissions and systemic, transformative actions across all sectors are needed to deliver a 1.5°C world (SPM: C.3). Without urgent, effective and equitable mitigation action, climate change will increasingly threaten the health and livelihoods of people around the globe, ecosystem health and biodiversity (SPM: D.1.1).

We already have many climate solutions at hand. There are several mitigation options available that would lead to quick wins: solar energy, wind energy, the electrification of urban systems, greening in cities, energy efficiency, demand side management, improved forest-, crop-, and grassland management, and reduced food waste and loss. These are all supported by the public, are technically feasible and increasingly cost-effective (SPM: E.1.1).

Ending fossil fuel subsidies would have massive climate and economic benefits. Removing fossil fuel subsidies would reduce emissions, improve public revenue and macroeconomic performance, yield environmental and sustainable development benefits, and could reduce emissions up to 10% by 2030 (SPM: E.4.2).

Some level of carbon dioxide removal will be needed, but must be deployed carefully. To keep temperatures to below 1.5°C or 2°C, and to counterbalance any residual emissions from sectors which are hard to decarbonise, such as aviation or certain industrial processes, some carbon dioxide removal will be needed (SPM: C.11.4).

Carbon dioxide removal, or CDR, refers to human activities that remove CO2 from the atmosphere and store it away durably, for example in geological, terrestrial, and ocean reservoirs, or even in product (SPM: C.11.1). CDR methods include afforestation, agricultural practices that sequester carbon in soils, bio-energy with carbon capture and storage (BECCS), and direct air capture and storage (CCS). CCS has not been successfully implemented anywhere in the world at scale and is not a viable solution at current levels of technology.

The land use sector can be a crucial part of achieving net zero emissions. The largest share of land-based carbon removal comes from reduced deforestation, protecting and restoring natural ecosystems, and improved and sustainable agricultural practices (SPM: C.9.1).

We rely on the land for our health and many services – food and water security, livelihoods, biodiversity, ecosystem conservation, wood supply, and land tenure and land-use rights for Indigenous Peoples, local communities and small landowners. Trade-offs and equity considerations need to be taken into account with land-based carbon removal (SPM: C.9.2, D.1.5).

Understanding the co-benefits and trade-offs from tackling climate change, including for health, is key to help policymakers prioritise policy options.
Awareness of co-benefits generally increases support of climate policies. For example, emission reduction policies are particularly effective when they take into account co-benefits such as health, biodiversity, and poverty reduction. However, this is most effective when the co-benefits and trade-offs are identified prior to implementing a climate policy, rather than being discovered afterwards (12.3, 13.2, 13.8).

Table: Examples of health co-benefits and trade-offs from various climate policies (adapted from IPCC table 13.3)

Climate policy or action	Health co-benefits and/or trade-offs
Nature-based Solutions	**Co-benefits**: crucial for many health and social services – food and water security, livelihoods, biodiversity, ecosystem conservation, etc. **Trade-offs**: land encroachment, exploitation, and equity concerns.
Climate action in cities	**Co-benefits:** heat stress reduction; air quality improvement, improved human health and well being, resilience against water scarcity, stormwater and flood management, aesthetic, recreation, environmental justice, real estate value, food production, green jobs opportunities.
Green infrastructure	**Co-benefits:** aesthetic, recreation, environmental education, improved human health and wellbeing, social cohesion, poverty reduction.
Sustainable community planning	**Co-benefits:** affordability, biodiversity, public health, community cohesion.
Increasing density of land use	**Trade-offs:** could reduce green open spaces, may increase the urban heat island effect, could increase exposure to coastal inundation.

Resources and Further Reading

Mental Health Support

It can be overwhelming to be confronted with the scale and urgency of the climate crisis. A list of useful resources to help build understanding of the mental health impacts of climate change can be accessed here, while this resource provides a useful introduction on how to cope with climate change distress.

Communicating about Climate Change and Health

The Medical Society Consortium on Climate & Health has a large collection of resources and toolkits on how to communicate on climate change as a health professional.

The project Real, Urgent and Now also provides various resources for health professionals and health advocates on how to best communicate the health impacts of climate change.

The health co-benefits of climate solutions

Taking climate action has many great benefits for our health. This resource provides a quick overview of actions that benefit both our health and the health of the planet.

Previous IPCC Reports

A summary of the health findings of the February 2022 IPCC report on climate impacts, adaptation and vulnerability can be accessed here.

In 2018, the IPCC Special Report on 1.5°C was published, explaining the expected impacts of 1.5°C and 2°C of global warming.

At the time, CAHA produced a briefing paper for MPs on the IPCC Special Report on 1.5°C, along with a document answering frequently asked questions.

The World Health Organization also produced a synthesis report, summarising the health findings in the IPCC Special Report on 1.5°C.