

**PL4**

**PROTECTING AND IMPROVING HUMAN AND PLANETARY HEALTH - A  
SYNDEMIC VIEW**

## | BACKGROUND

The "COVID-19 moment" is poised to be a turning point for the world in terms of the megatrends of population, technology, climate change, environmental factors, geopolitics, conflict and gender. Economic inequities continue to worsen, alongside with other megatrends, demonstrating a clear alteration of the geopolitical situation.

Under the subtheme 4, "COVID-19 and the Global Megatrends", the webinar series has highlighted questions on how to create a green, healthy and more peaceful society. The webinar series have discussed the linkages and syndemics across climate change, environment, food systems and health, identifying synergies and trade-offs, both in HIC and LMICS contexts.[1][2][3] It has been described how health systems have dealt with co-occurrence of the COVID-19 pandemic and climate-related disasters and approaches to developing rapid research responses to catastrophic events. Changes and the way forward on impacts of COVID-19 on population dynamics, particularly on urbanisation, immigration, ageing, and fertility behaviours, have been explored. A health technology perspective on COVID-19 has been discussed and how these solutions will have a lasting impact on global health delivery. Finally, the Lancet-SIGHT Commission on Peaceful Societies through Health and Gender Equality has presented the gendered impact of COVID-19 and response measures in conflict/post-conflict settings, as well as the international community's response to the layered challenges of the pandemic, gender inequality, and armed conflict.

### Overview of the plenary session

Aiming to interlink the global megatrends as presented above, this plenary session will discuss a syndemics perspective to COVID-19, possible approaches for "building back better" and the simultaneous challenges we are facing, as well as how we can apply these approaches to the 2030 Agenda.

The pandemic has exposed the weaknesses in the global community's preparedness and resilience. Simultaneous challenges of the pandemic, the co-occurrence of acute and chronic stressors, inequalities, and conflict are emerging, raising questions on how to take multi-level approaches in creating resilient international (health) systems.

It is also evident how health and climate overlap in many areas: Deforestation and impacts on the environment leading to more significant interaction between animals and humans and consequently risking the increase of zoonoses; pollution inevitably leading to health issues; food systems affecting nutrition and the environment both locally and globally.[4] 1 Notably, food consumption is the single largest driver of environmental pressure load accounting for 80% of land conversion and biodiversity loss, contamination of freshwater and coastal ecosystem, 80% of freshwater consumption and contributing 20-30% of global greenhouse emissions.[5] The effects of COVID-19 have led to discussions regarding human dependence on the planet's ecosystems; a need for recognition of the dependence on ecosystem services, the impact of human development from this and acceptance of the responsibility towards future generations. The pandemic also brings vast demographic implications, including increased mortality rates, a disproportionate impact on the mortality of the elderly, as well as risking the future for immeasurable numbers of children.[6]

### "COVID-19 is a syndemic."

There is a need for conceptual frameworks to improve the understanding of co-occurring risk factors, improving prevention and intervention programmes. Mendenhall et al. state that the term syndemic provides such a framework, referring to "synergistic health problems that affect the health of a population within the context of persistent social and economic inequalities"[7], considering social, environmental, political and economic factors - understanding that health is largely affected and determined by all of these factors.[8]

The Lancet Commission on the Global Syndemic of Obesity, Undernutrition and Climate Change, argues that the three "pandemics" of obesity, undernutrition and climate change represent the Global Syndemic that affects most people in every country and region worldwide - a synergy of epidemics, interacting with each other, sharing common societal drivers.<sup>1</sup>

Richard Horton writes: "COVID-19 is not a pandemic. It is a syndemic. The syndemic nature of the threat we face means that a more nuanced approach is needed if we are to protect the health of our communities", highlighting the prevention of Non Communicable Diseases (NCDs), understanding social inequalities, and virtually all elements playing into the direct and indirect effects of the pandemic.[9] Common systemic drivers need common actions, shedding light on the fact that strategies for rebuilding and policymaking need to take a more holistic approach to combat the COVID-19 virus and its collateral effects.

Given the simultaneous challenges of the COVID-19-era and its syndemic nature - what are then possible approaches for moving forward?

### **What are possible approaches?**

A holistic approach to improving planetary and human wellbeing is provided by Kate Raworth, with her "Doughnut Economics" model, recognising "that wellbeing depends on enabling every person to lead a life of dignity and opportunity while safeguarding the integrity of Earth's life-supporting systems"[10]. Her Doughnut-model combines social and planetary boundaries: The inner limit is a social foundation, below which lie shortfalls in wellbeing, such as hunger, ill-health and illiteracy amongst others, derived from internationally agreed minimum standards for human wellbeing as established in the 2030 Agenda, and the outer boundary represents the planet's ecological ceiling as presented by Rockström et al. [11], thus taking a systematic approach for future sustainability for human and planetary health.

The European Parliament is taking steps towards building a greener future with the recent decision to reduce greenhouse gas emissions with 60% by 2030.[12] In addition, the European Green Deal is aiming to make Europe climate neutral by 2050, boosting the economy through green technology, creating sustainable industry and transport, cutting pollution, and the EU Circular Economy Action Plan focuses on how to foster more sustainable consumption, working towards a climate-neutral economy.[13] [14] These examples are showcasing that large institutions are creating modern strategies to create opportunities for improved planetary and human health, representing designs for multisectoral strategies for human wellbeing, interlinking global megatrends; an exciting way forward in the (post) COVID-19 era.

Multisectoral collaboration is essential for creating a healthy, fair and greener society for future generations. The WHO-UNICEF-Lancet Commission recently published "A future for the world's children?"[15], and prior to this, SIGHT and the Swedish Society of Medicine in 2019 published "Placing Children at the Centre of the SDGs: Road Map on Global Child Health".[16] [17] Both publications discuss the need for prioritising children in policies and development initiatives for transformative change at the centre of the 2030 Agenda. They argue that governments need to move their focus from commercial interests, to securing the rights of the child now, and for the future. Furthermore, such a multisectoral approach needs also to take the gendered impacts of COVID-19 into account. UN Women Secretary-General writes: "This is the time to ensure that gender equality concerns are fully embedded in our short-term responses and longer-term recovery to build the more equal and resilient societies that we will need coming out of this crisis".[18]

The ongoing pandemic thus gives the international community the possibility to find its way back to multilateral collaboration and solidarity; ensuring a strong global governance function. There are salient opportunities for building back better with a Business not As Usual approach[19], maximising co-benefits by addressing interlinkages and common grounds of social and planetary dimensions for future health and planet sustainability, creating multi-level conversations and actions to accelerate progress towards the 2030 Agenda. However – how should we approach these opportunities? How do we approach the synergies and trade-offs that might arise?

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<https://www.foodandlandusecoalition.org/global-report/>

[6] Johns Hopkins Bloomberg School of Public Health estimates that an additional 6,000 children could die every day only due to restrictions and lockdowns, leading to reductions in essential health service and vaccinations, amongst other indirect effects: Robertson et al.: Early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries: a modelling study. Lancet Glob Health 2020; 8: e901-08.

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## | OBJECTIVES

The objective of the plenary session 4 is to:

- Present how COVID-19 is a syndemic with parallel challenges ongoing such as climate crisis and environment, migration and NCDs.
- Discuss possible approaches to view and act upon the multifaced threats for planetary and human health.
- Identify common grounds and synergies for action for a green, fair and healthy recovery following COVID-19.



Speaker

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Dr. Zulfiqar A. Bhutta is the Inaugural Robert Harding Chair in Global Child Health at the Hospital for Sick Children, Co-Director and Director of Research at the SickKids Centre for Global Child Health, and Founding Director of both the Centre of Excellence in Women and Child Health, and Institute of Global Health and Development at Aga Khan University. Dr. Bhutta is a Distinguished National Professor of the Government of Pakistan, co-Chair of the Maternal and Child Health oversight committee of World Health Organization Eastern Mediterranean Region, and the Coalition of Centres in Global Child Health Chairman. He is a leading voice for health professionals supporting integrated maternal, newborn and child health globally. Dr. Bhutta leads large research groups in Toronto, Karachi and Nairobi with special interests in scaling up evidence-based, community setting interventions and implementation of RMNCAH&N interventions in humanitarian contexts.

Dr. Bhutta obtained his MBBS from the University of Peshawar and his PhD from the Karolinska Institute. He is a Fellow of the Royal College of Physicians, the Royal College of Paediatrics and Child Health, the American Academy of Pediatrics, and the Pakistan Academy of Sciences. In 2020 he was awarded the honour of Fellow of the Royal Society.