

## Reducing Healthcare Carbon Emissions in Developing Countries



Plans for universal health coverage must first address the substantial carbon emissions produced by the healthcare systems of low- and middle-income countries, urged researchers from Switzerland, India, Belgium and Brazil in a recent analysis published in *The BMJ*.

The estimated total amount of greenhouse gases released into the environment by health systems worldwide equals 2.0 to 2.4 gigatonnes of carbon dioxide (CO<sub>2</sub>), i.e. about 5% of total global emissions. Healthcare for low- and middle-income countries is a carbon-intensive activity that will likely grow with meeting universal health coverage commitments. The UN 2025 target for affordable healthcare access is one billion more people to benefit. Achieving this goal could result in an additional 382 million tonnes of CO<sub>2</sub>-equivalents a year, which increases healthcare's global carbon footprint by about 16%. To achieve Sustainable Development Goal targets, the World Health Organization (WHO) estimated that 67 low- and middle-income countries need an additional annual investment of US\$371 billion by 2030.

Since climate change can threaten universal health coverage's realisation, emissions reduction should form an integral part of universal health coverage delivery to ensure sustainable healthcare gains. 'Healthcare in low and middle-income countries has a high carbon footprint. Reducing emissions should be integral to plans for universal health coverage', says study author Fawzia Rasheed.

Reducing carbon footprint begins with robust baseline calculations. In high-income countries, regulatory requirements are informed by carbon-footprinting methodologies developed in line with international protocols. Unfortunately, healthcare providers in low- and middle-income countries have limited access to these tools.

Agencies have started addressing this gap with carbon-footprinting methodologies for health operations. Examples include those used by the Aga Khan Development Network, the NHS in England, and the international non-governmental organisation Health Care Without Harm. Achieving a net of zero emissions while achieving universal health coverage requires action on the bulk of the emissions: energy, travel, and the supply chain.

The following recommendations are made for low- and middle-income countries:

- In delivering universal health coverage, health ministries should expect healthcare providers to calculate their organisations' carbon footprints and act on them to reduce emissions.
- Donors and healthcare providers should ensure maximal efficiency and health through iterative cycles.
- Healthcare providers should decrease reliance on fossil fuels and seek opportunities to increase energy efficiency.
- Providers and ministries of health should seek (and act upon) opportunities to reduce supply chain emissions.
- Clinicians should recognise which are particularly damaging products and their mitigation measures.

Source: [The BMJ](#)

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