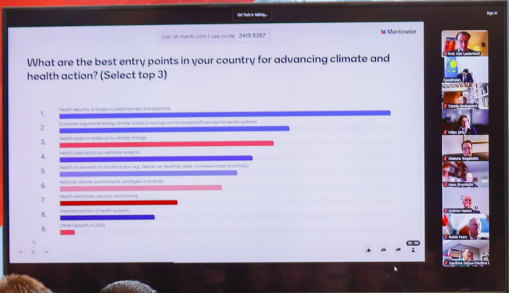


Third hearing of the Pan-European
Commission on Climate and Health:

Mobilizing power and building political will for a healthy climate future

Output report

2 October 2025



PAN-EUROPEAN COMMISSION
CLIMATE AND HEALTH #PECCH

Introduction: from evidence to execution

The third hearing of the Pan-European Commission on Climate and Health (PECCH) marked a transition to addressing challenges for governance to accelerate the implementation of effective climate and health policies. Building on the first hearing's scientific foundation (1,2) and the second hearing's exploration of different areas of opportunity (3), the third hearing focused on how political and institutional governance can translate commitments into equitable, measurable action for health and climate (4).

Opening the session, Dr Hans Henri P. Kluge, Regional Director for Europe, and Mr Robb Butler, WHO Regional Office for Europe's Special Representative for Climate and Health called for moving "beyond evidence to execution", stressing that effective governance is essential to bridge ambition and delivery. H.E. Katrín Jakobsdóttir, Chair of the PECCH, underlined that countries of the pan-European region already hold multiple commitments, such as the *Declaration of the Seventh Ministerial Conference on Environment and Health: Budapest, Hungary 5–7 July 2023* (known as the Budapest Declaration) (5) and the Seventy-seventh World Health Assembly resolution on Climate change and health (6), but must now demonstrate accountability through transparent, inclusive implementation, with the objectives for this hearing including how to scale-up action and support countries in doing so.

The hearing explored three dimensions: institutional coordination across ministries and sectors; legal and rights-based accountability to sustain political will; and financing and participation to ensure just, community-centred transitions.

The hearing programme combined expert interventions on economics, law, Indigenous leadership and youth participation with ministerial reflections from across the pan-European region. Together, experts examined how power, finance and knowledge can be aligned to deliver measurable health and climate benefits.

Within the PECCH process, the third hearing served as the bridge between knowledge, systems and governance, laying the groundwork for the Call to Action by identifying the political and institutional levers needed to turn evidence into enduring change.

Governing climate and health: expert and policy perspectives

Indigenous resilience and governance

The hearing opened with a dialogue between Dr. Sara Olsvig, International Chair, Inuit Circumpolar Council, Greenland, and the Chair of the PECCH, H.E. Katrín Jakobsdóttir, highlighting how Indigenous governance traditions offer lessons for resilience, foresight and justice in climate–health policy.



Dr Olsvig described the Arctic as an early-warning region where accelerating heating disrupts food systems, travel safety and community health, yet also as a place of deep adaptive knowledge. Inuit governance systems, she noted, are built on collective stewardship, observation-based monitoring and intergenerational responsibility. These practices have sustained well-being across centuries of environmental variability and a history of systemic bias within colonial health systems, and can inform modern governance frameworks that often remain too fragmented or reactive.

She emphasized that Indigenous knowledge is not merely local data, but a system of governance rooted in reciprocity and accountability to the land and community, stating, “we cannot manage nature without being part of it”. Embedding these principles in national and regional policy would strengthen anticipatory capacity and social trust, which are two elements often missing from technocratic adaptation plans.

In discussion with the PECCH Chair, three messages emerged that can be seen as priorities for the inclusion of Indigenous communities in evidence gathering and decision-making, namely:

- 1. partnership over tokenism:** Indigenous participation must move beyond consultation to a shared decision-making authority within climate and health programmes;
- 2. knowledge co-production:** combining Indigenous knowledge and observation networks with scientific systems can enhance early-warning mechanisms for health risks such as zoonoses, mental-health impacts and food insecurity; and
- 3. rights-based frameworks:** the recognition of Indigenous sovereignty, cultural continuity and the right to a healthy environment are governance preconditions, not optional add-ons.

These principles echo broader regional calls for intergenerational equity and inclusion, aligning with the Budapest Declaration’s commitment to participatory governance and with the Seventy-seventh World Health Assembly resolution on Climate Change and Health’s emphasis on protecting vulnerable populations. Commissioners later noted that Indigenous approaches, grounded in stewardship, reciprocity and long-term thinking, illustrate the type of transformative governance needed to sustain the health of people and Earth systems (i.e. planetary health) in a rapidly changing climate.

Mission-oriented economic governance for health and climate

Professor Mariana Mazzucato, University College London, United Kingdom, set out a vision for mission-oriented governance capable of aligning economic policy with public health and planetary goals. She argued that governments must move from “fixing market failures” to actively shaping and co-creating markets that deliver societal missions, such as decarbonized, equitable health systems, linking economic transformation directly to human well-being.

Professor Mazzucato highlighted that public value creation begins with defining a clear purpose and translating it into measurable missions that cut across ministries and sectors. Climate and health provide a “natural mission space,” because both require whole-of-government coordination, long-term investment and citizen participation.



She warned against outsourcing public capacity to consultancy companies, which leads to fragmented accountability and “infantilizes governments”. Instead, States must rebuild internal capabilities – including within finance ministries, health agencies and procurement authorities – to steer innovation and monitor delivery. Strategic procurement, regulation and conditional public finance were presented as powerful governance tools: when public funds are tied to social and environmental conditions, they shape markets toward sustainable health outcomes rather than reinforce extractive practices.

Professor Mazzucato illustrated this through the example of school meal programmes designed as mission-oriented investments, where governments use procurement to source nutritious, low-carbon food from local producers (Box 1).

Box 1. Case study: sustainable school meals

A sustainable healthy future depends on integrating action across sectors, in this case introducing innovation which has implications across health, food security and finance systems.

Integrating lessons from several studies, including from Sweden and the United Kingdom (Scotland), this model of cross-sectoral solutions (7) illustrates the wider potential for public investment in procurement reform. Public procurement can be regarded not as a cost but as a strategy to drive systemic change in food systems, health and economic growth, and to inform the next generation about healthy choices. Analysis of this, and other case studies, is helpful to inform options for replication and upscaling and thereby underpin strategies across sectors.

The proportion of school children provided with any school meals varies among countries. A global modelling study (8) of the health, environmental and cost implications of providing healthy and sustainable school meals for every child by 2030 found significant health and environmental benefits.

Opportunities for the procurement of healthy and sustainable meals by public institutions extend beyond schools to hospitals and workplaces. New criteria for this procurement were published recently by the European Commission’s Joint Research Centre (9).

Professor Mazzucato further stressed the need to redefine metrics of success beyond gross domestic product; integrating indicators for health equity, environmental sustainability and social value into national accounting and budget processes, in alignment with the final report of the WHO Council on the Economics of Health for All, *Health for all: transforming economies to deliver what matters* (10). This reframing, she noted, allows investment in prevention, care, mitigation and adaptation to be treated not as expenditure but as long-term value creation.



Professor Mazzucato's presentation reinforced the notion that effective governance is not only about coordination but also about purposeful direction; anchoring finance, innovation and regulation to a collective mission of protecting health within planetary boundaries.

Commercial determinants of health and climate politics

Professor Anna Gilmore, Co-Director of the Centre for 21st Century Public Health and founding Director of the Tobacco Control Research Group, University of Bath, United Kingdom, examined how the commercial drivers of poor human health and the transgression of planetary boundaries (i.e. planetary health) are the same, with commercial actors obstructing climate and health progress by shaping markets, political and economic systems, rules on policy-making, policy implementation and policy narratives, in their interest (see work by WHO (11)). She emphasized that the corporate actors driving noncommunicable diseases (e.g. fossil-fuel, ultra-processed food, alcohol and tobacco industries) use similar approaches, including political and scientific practices, to advance their agendas. Their influence operates through misleading science, regulatory capture, lobbying and so called "corporate social-responsibility" campaigns that reframe voluntary pledges as substitutes for enforceable regulation.

Professor Gilmore cautioned that voluntary approaches don't work and that partnership models without conflict-of-interest safeguards risk embedding industry agendas into public health and sustainability strategies. Instead, tighter regulation is needed.

Drawing parallels with tobacco control, she argued that strong legal frameworks, transparency rules and independent monitoring are essential to counteract the power asymmetry between public institutions and global corporations and to ensure that policy-making can operate in the public interest. She highlighted the need for governments to adopt a health-in-all-policies approach that explicitly regulates commercial power, eliminates harmful subsidies, and aligns fiscal and trade policies with health and climate goals.

In terms of priorities, governance integrity is high on the list, ensuring that conflicted industries are not at the policy table, so is regulation, including 'high-carbon' advertising bans. In addition, accountable financing is needed, including redirecting subsidies and public investment away from carbon-intensive sectors. Finally, Professor Gilmore mentioned civil society empowerment and the importance of supporting academia, journalists and communities to hold corporations to account and to protect science from vested interests. Addressing the commercial determinants of both ill-health and planetary degradation is a core test of political will, requiring that governments treat regulation as a public health intervention rather than an economic constraint and instead recognize the true costs of commercially driven climate and health harms.



Human rights and legal accountability

Dr Miriam Saage-Maaß, Legal Director, European Centre for Constitutional and Human Rights, Germany, outlined how emerging international and domestic legal mechanisms can drive accountability for the health impacts of climate change. She argued that the right to health and to a clean, healthy and sustainable environment is increasingly recognized as justiciable, giving affected communities and civil society new tools to challenge inaction and harm.

Dr Saage-Maaß drew attention to the rapid evolution of jurisprudence following the International Court of Justice's 2025 advisory opinion (12), which affirmed States' legal duties to reduce greenhouse gas emissions and prevent foreseeable environmental harm. These developments, she noted, shift the framing of climate and health protection from voluntary policy to binding legal obligation. Strategic litigation, targeting both governments and corporations and based on due diligence standards, has already begun to secure stronger emission targets, improved air-quality standards and the recognition of cross-border responsibilities for loss-and-damage.

She emphasized that legal action is not an endpoint but a governance instrument: it compels transparency, strengthens procedural rights to participation and information, and reinforces equality before the law, requiring differentiated protection to target vulnerable groups. Courts can thus complement, rather than replace, political processes by ensuring that commitments are enforceable rather than aspirational: although to be successful the lack of political will must also be addressed. Commissioners reflected that embedding legal accountability within governance frameworks is vital to sustaining trust and aligning public and private actors with the shared duty to protect present and future generations.

Youth leadership and the health workforce of the future

Ms Rebecca Forner, Regional Director for Europe, International Federation of Medical Students' Associations, underscored that meaningful youth engagement is not only a moral imperative but a strategic investment in the future health workforce. She reflected that today's medical and public health students will soon be the professionals responsible for implementing climate-resilient and sustainable health-care systems, yet most receive little formal preparation for this role (13).

Ms Forner called for integrating climate and sustainability competencies into medical and nursing curricula, framing them as core to patient safety and quality of care rather than as electives or advocacy topics. She described how student networks across Europe are already mobilizing to bridge this educational gap – through peer-led training, partnerships with ministries, and collaboration with WHO and academic institutions – but emphasized that progress remains uneven. There are additional opportunities for bridging the educational gap between health and other disciplines that have implications for health (e.g. agriculture, urban planning) by supporting interprofessional, transdisciplinary learning.



She also highlighted the psychological dimension of leadership: confronting eco-anxiety while maintaining agency and hope. Empowering youth requires creating institutional spaces where their expertise and lived experience are valued in decision-making, not limited to side-events or consultations.

Commissioners recognized young people as critical partners in transforming health system culture, from awareness to accountability. Strengthening education, mentorship and representation across professional associations was viewed as essential to building a workforce capable of advancing the PECCH's broader vision of sustainable, equitable health care.

High-level political panel: advancing governance for integrated climate–health action

The high-level political panel brought together ministers and parliamentarians from across the Region to reflect on how to embed climate and health commitments into everyday governance.

H.E. Dr Mónica García Gómez, Minister of Health of Spain, introduced the establishment of a National Observatory on Climate Change and Health in Spain, described as the most climate-vulnerable country in the European Union (Box 2).

H.E. Professor Dr Valentina Prevolnik Rupel, Minister of Health of Slovenia, emphasized that environmental sustainability is now a pillar of national health policy. Slovenia is decarbonizing its health sector through hospital energy-efficiency measures and sustainable procurement, while aligning with European pharmaceutical legislation to include environmental criteria. She underscored the challenge of maintaining coherence across ministries and funding streams, calling for European Union and WHO guidance to harmonize indicators and monitoring.

Mr Timur Muratov, Vice-Minister of Health, Kazakhstan, reflected on central Asia's exposure to heat and water stress and the need to protect vulnerable groups through preventive services and healthy lifestyles. He highlighted Kazakhstan's participation in the WHO Healthy Cities Network, noting that local leadership is essential to adaptation and called for concise WHO guidance to help ministries engage finance, environment and energy sectors more effectively. He referred to the Aral Sea disaster – the large-scale drying of a once vast inland lake and its devastating health and social consequences – as a stark reminder of the costs of fragmented governance and the importance of sustained regional cooperation to protect ecosystems and communities.

Dr Dilorom Fayzieva, Deputy Chairperson, Committee on International Affairs, Defense and Security, Legislative Chamber of the Oliy Majlis, Uzbekistan, outlined efforts to strengthen legislative frameworks linking environmental and health policy, and to use digital platforms to improve transparency and cross-sector monitoring. National parliaments can play important roles in the integration of national and subnational levels and in helping to catalyse regional initiatives. For example, the Inter-Parliamentary Union, for which Uzbekistan provides a regional hub, describes how parliaments can accelerate climate action (14).



Across the panel, speakers converged on a shared message: achieving a healthy, net-zero and a climate-resilient future requires governance mechanisms that institutionalize intersectoral coordination, ensure stable financing and hold all actors accountable.

As Professor Dr Prevolnik Rupel emphasized “we are all in this together”. Without clear mandates and reporting, political ambition risks dissipating before reaching implementation.

Box 2. Cross-sectoral governance: interministerial coordination and regional challenges

The consideration of different governance models helps to evaluate options and challenges for cross-sectoral integration in response to societal priorities.

The model developed by Spain for the National Observatory on Climate Change and Health brings together the Ministry of Health, the Ministry of Ecological Transition and the Ministry of Science and reaches Prime Ministerial level, to put health at the centre of action for environmental damage (e.g. the recent wildfires). The Observatory supports integrated policy development, linking surveillance, research and public communication, and underpins Spain’s action plan addressing heat, air pollution and the mental health impacts of climate change.

The presentations from Kazakhstan and Uzbekistan noted the importance of regional collaboration in bringing together different ministries (e.g. to address complex problems in the regions of the Aral and Caspian seas under climate change). Health problems are associated with toxic dust, contaminated water and collapse of local economies. Challenges are compounded by geopolitical tension and the historical tendency to prioritize unilateral decisions on water use and energy production.

In central Asia, various regional partnership initiatives and policy options have recently been undertaken to respond to climate change impacts, although not all with a strong emphasis on human health (15–18). However, there was failure to progress a focused regional plan at the 29th Conference of the Parties of the United Nations Framework Convention on Climate Change to stop the Caspian Sea receding, indicating a continuing need to bring sectors and countries together in discussion (19).

Other examples of cross-sectoral governance have been discussed by the WHO European Region Member States at the 75th session of the WHO Regional Committee for Europe, such as the Third National Climate Adaptation Plan across sectors at both local and national governance levels in France (20).



PECCH deliberations: towards actionable recommendations

The commissioners underscored the critical role of governance to execute the climate–health agenda and to determine whether the principles of resilience, equity and sustainability can move from frameworks to tangible outcomes for people and communities. The key considerations discussed included:

- transparency and accountability, including the need for a regional mechanism to monitor progress;
- legal and institutional foundations as increasingly influential in shaping accountability;
- participation and equity as cross-cutting principles of good governance;
- integration and coherence, stressing that health must be systematically aligned with mitigation, adaptation and loss-and-damage frameworks; and
- finance and the political economy of transition.

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Acknowledgements

This output report was developed at the request of the PECCH by Iris Martine Blom (London School of Hygiene & Tropical Medicine, London, United Kingdom) and Robin Fears (bioscience consultant based in the United Kingdom). The Commission gratefully acknowledges the valuable contributions provided by the presenters at the hearing that informed the report.



