



OPEN ACCESS

EDITED AND REVIEWED BY

Joris Van De Klundert,
Adolfo Ibáñez University, Chile

*CORRESPONDENCE

Munyaradzi Saruchera
✉ msaruchera@sun.ac.za

RECEIVED 20 April 2025

ACCEPTED 04 August 2025

PUBLISHED 15 August 2025

CITATION

Saruchera M, Folayan MO, Ngcamu BS,
Musakwa W, Kaseje M and Boateng GO (2025)
Editorial: Climate change, human health, and
health systems.
Front. Health Serv. 5:1615206.
doi: 10.3389/frhs.2025.1615206

COPYRIGHT

© 2025 Saruchera, Folayan, Ngcamu,
Musakwa, Kaseje and Boateng. This is an
open-access article distributed under the
terms of the [Creative Commons Attribution
License \(CC BY\)](#). The use, distribution or
reproduction in other forums is permitted,
provided the original author(s) and the
copyright owner(s) are credited and that the
original publication in this journal is cited, in
accordance with accepted academic practice.
No use, distribution or reproduction is
permitted which does not comply with
these terms.

Editorial: Climate change, human health, and health systems

Munyaradzi Saruchera^{1*}, Morenike Oluwatoyin Folayan²,
Bethuel S. Ngcamu³, Walter Musakwa⁴, Margaret Kaseje⁵ and
Godfred O. Boateng⁶

¹Africa Centre for Inclusive Health Management, Stellenbosch University, Cape Town, South Africa,

²Department of Child Dental Health, Obafemi Awolowo University, Ile-Ife, Nigeria, ³Public Administration and Management, University of South Africa, Pretoria, South Africa, ⁴Geography, Environmental Studies & Energy, University of Johannesburg, Johannesburg, South Africa, ⁵Health Science, Tropical Institute of Community Health and Development, Kisumu, Kenya, ⁶School of Global Health, York University, Toronto, ON, Canada

KEYWORDS

climate, health, systems, disasters, environment, energy

Editorial on the Research Topic

Climate change, human health, and health systems

Introduction

Climate change is impacting human life in many ways and affecting health systems and outcomes of healthcare services. This calls for a multidisciplinary approach that includes health policies, environmental science and economics. Research presented here explored the impact of climate change and implications on health outcomes and included actionable strategies for mitigation and adaptation.

The research on pricing strategy and pharmaceutical supply chains (Lu et al.) highlights the important role that pricing strategies play in optimizing pharmaceutical supply chains. Amid climate change challenges, there will be need for health systems to adapt pricing frameworks that reflect environmental costs and promote sustainable practices while ensuring access to essential medications.

A study conducted in Hong Kong on the association between ambient temperature and hospital stay length (Long et al.) revealed that increased ambient temperatures correlated with extended hospital stays for patients suffering from cardiopulmonary diseases. This finding emphasizes the importance of proactive health system adjustments to manage the heat-related health impacts exacerbated by climate change and implies the need for improved services, hospital infrastructure and capacity planning.

The research on Sustainable Solarized Vaccine Cold Chain System in Lebanon (Kapur et al.) showcases the implementation of a solarpowered cold chain system for vaccines, illustrating a practical step towards sustainable healthcare. By transitioning to environmentally viable energy sources, health systems can improve vaccine distribution efficiency while reducing carbon footprints, aligning with global health sustainability goals.

The study on Impact of Infectious Disease Experience on Household Consumption in Rural China (Han et al.) illustrates how infectious disease outbreaks influences household consumption behaviors. Understanding these dynamics will assist in addressing the economic ramifications of healthcare service crises, including climate change disasters and their negative effects on communities.

The research on One Health Economics (Leandri et al.) argues that economics must integrate with health science to tackle pressing public health challenges. By adopting a One Health perspective, health systems can better address the complex interactions between climate, ecosystems, and human health, leading to more effective interventions.

The article on Climate Crisis and HIV Prevention (Williams et al.) explores the relationship between climate change and HIV transmission patterns. It provides actionable recommendations for HIV prevention strategies through the lens of climate adaptation, particularly enhancing PrEP programs to cater to populations vulnerable to both climate and HIV risks.

The research on Climate Change Distress and Impairment in Germany (Konig et al.) points to the need for health systems and services to incorporate mental health into climate change mitigation strategies, recognizing that psychological well-being is integral to overall public health.

Broader context and implications

The convergence of climate change and human health presents significant challenges for health systems globally (1). As climates shift and health risks escalate, there is a need for adaptive measures that go beyond the traditional health systems frameworks. The findings from these studies present ways of adapting health systems to address these challenges that includes economic adaption, infrastructure and capacity building, a One Health framework and inclusion of mental health. An economic strategy that re-evaluates pricing, funding, and resource allocation in health systems may mitigate the effects of climate change. Integrating sustainable practices can not only protect health but also enhance economic viability (2). Health systems need to invest in infrastructure that can withstand climate-related pressures and include expanding hospital capacities and developing emergency response protocols to address heat-related health issues.

Emphasizing the One Health framework encourages collaboration between various sectors, including agriculture, environmental science, and health. Interdisciplinary approaches are needed for effective strategies to combat climate impacts on health. Incorporating mental health services within climate adaptation frameworks will likely improve community resilience and overall health outcomes. The exploration of HIV transmission dynamics amid changing climates points to the need to integrate climate considerations into preventive healthcare programs to reduce vulnerability among at-risk populations.

However, Africa's exclusion is striking, given the impacts of the climate crisis. Inclusive and equitable global solutions to the climate crisis must place Africa and other regions' realities, needs, and innovations at the forefront of a climate-proofed approach to health management for all. Holistic and integrated research to support practice and policies that promote and protect wellbeing and human health while simultaneously improving ecosystem restoration and climate change mitigation

globally are needed. This requires change to break down the silos in research, policymaking, and institutional arrangements, and enabling cross-sectoral, holistic and interdisciplinary approaches and solutions.

Conclusion

Climate change is adversely impacting health infrastructure, services and workforce. The intersection of climate change and health requires a multidisciplinary approach to address the complex and multiple interrelated issues. The above studies' findings provide for the development of interdisciplinary, targeted and innovative strategies and solutions for climate-proofed health services and facilities, policy development, sustainable resource planning and management in the context of climate change. In view of the synthesis, a multiplicity of the specific interdisciplinary priorities for research needs to be explored which include risk assessment and adaptation, extreme events and air pollution, sustainable development, infectious disease and phenology, atmospheric sciences, public health, environment sciences, and policy development both in the Global South and North. Furthermore, an integrated health system should be explored which is focusing on systematic impact of climate change with an aim to achieve effective and efficient risk governance. Another interdisciplinary approach should focus on health system resilience to explore adaptive and transformative strategies to determine the relationships between climate change, migration, and health systems.

Specific interdisciplinary areas for research include improvement of health impact assessment and implementation; development of relevant technologies, infrastructures, policies and human resources; and promotion of research on transformational change towards sustainability. The One Health approach is interdisciplinary and provides a broad research agenda that can benefit health policymaking, resource planning and management. By leveraging the findings of current research, health systems can be better equipped to navigate the evolving landscape of healthcare service and interdisciplinary research collaboration leads to new discoveries and a meaningful difference in health services. A public and private partnerships should be recommended as they have a potential to create a comprehensive and complementary data infrastructure which is accessible to health services and policy research throughout the country. In addition, to reform the health care system, both the public and the private sector should invest on a cost-effective data infrastructure to monitor the impact of health care related and climate change reform initiatives. It is suggested that research funders should strategically invest to quality systematic literature reviews aiming to inform health care management and policy-makers to support them to effectively evaluate the local adaptation processes.

Future researchers should affirm that quality systematic literature reviews effectively inform health care management and policy-making ensuring that managers and policy-makers

understand and make rationale decision informed by the findings emerged from the synthesis.

Author contributions

MS: Writing – review & editing. MF: Writing – review & editing. BN: Writing – review & editing. WM: Writing – review & editing. MK: Writing – review & editing, Writing – original draft. GB: Writing – review & editing.

Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

The author(s) declared that they were an editorial board member of Frontiers, at the time of submission. This had no impact on the peer review process and the final decision.

References

1. Fonjong L, Matose F, Sonnenfeld DA. Climate change in Africa: impacts, adaptation, and policy responses. *Glob Environ Change*. (2024) 89:102912. doi: 10.1016/j.gloenvcha.2024.102912
2. The World Bank. *Health and Climate Change—the Cost of Inaction: Quantifying the Impact of Climate Change on Health in Low- and Middle-Income Countries*.

Generative AI statement

The author(s) declare that no Generative AI was used in the creation of this manuscript.

Any alternative text (alt text) provided alongside figures in this article has been generated by Frontiers with the support of artificial intelligence and reasonable efforts have been made to ensure accuracy, including review by the authors wherever possible. If you identify any issues, please contact us.

Publisher's note

All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.

Washington, DC: The World Bank Group. (2024). Available online at: <https://openknowledge.worldbank.org/server/api/core/bitstreams/bc51aeec-288e-4cbc-b4ca-b5a942057044/content>.