



# Policy position: Climate change and women's health

## Introduction

**Climate change is a substantial and growing threat to women's health and lives in the UK and across the world. Already disproportionately affecting those at risk of poorer health outcomes, the impacts for all women will only accelerate without transformative action.**

This policy position sets out the pivotal role of all four UK governments and health services in creating a liveable, healthy future for women and girls, by reducing emissions, adapting to a changing climate and prioritising health equity.

## Recommendations in brief

- 1. The UK Government must deliver on its commitments under the Paris Agreement and significantly reduce greenhouse gas emissions**, by accelerating policies which support every sector to transition to net zero, prioritising health and equity in these policies, and by rapidly phasing out support for fossil fuels.
- 2. The UK Government must take every opportunity to support women's health and gender equality in countries most vulnerable to climate change**, by reversing cuts to overseas aid, delivering strong international climate finance commitments, and advocating for stronger international action to protect women's health and gender equality.
- 3. The governments across the UK must ensure the health service is both fully supported to decarbonise in line with wider UK net zero commitments, and well-prepared for the increasing climate-related risks to health and health service delivery.** A clear commitment to this goal must be supported by substantial capital investment in NHS estate and infrastructure, wider investment in women's health services and initiatives which are designed and developed with service users.
- 4. Each UK government must ensure robust adaptation plans are in place across all sectors to help prevent changes to the UK climate impacting women's health and pregnancy outcomes.** This includes ensuring access to healthcare during and after flooding and other weather events, considering pregnancy in planning for long-term adaptation to extreme heat, and preparing for future changes to disease risks.

## What is climate change?

**Climate change is the large-scale, long-term shift in weather patterns and average temperatures worldwide, driven primarily by human-caused greenhouse gas emissions.**<sup>1</sup> Burning fossil fuels like coal, oil and gas to provide energy is the main contributor to climate change, responsible for about 75% of global emissions.<sup>2</sup> Significant emissions come from all sectors, including transportation, food production and manufacturing.<sup>3</sup>



**Climate change has created more weather and climate extremes**, which both directly impact people's physical and mental health and access to healthcare,<sup>4</sup> and increase the risks of problems like food insecurity, water scarcity, conflict, displacement and infectious diseases.<sup>5</sup>

**Climate change is also closely linked to the destruction and loss of biodiversity and ecosystems** across the world, which is itself a serious threat to health.<sup>6</sup> These two crises feed each other, with a warming climate creating irreversible changes to the complex systems that sustain life, while the destruction of nature fuels greenhouse gas emissions and reduces resilience to extreme weather events.<sup>7</sup>

**National and international action to limit climate change is an urgent issue, with current and projected greenhouse gas emissions not yet on track for a healthy future.** The Paris Agreement is an international agreement to reduce greenhouse gas emissions to limit global average temperatures to well below 2°C above pre-industrial levels, and ideally below 1.5°C.<sup>8</sup> However, the Intergovernmental Panel on Climate Change (IPCC), the United Nations body for assessing the science related to climate change, has concluded that current and projected emissions will push the world well over the 1.5°C limit.<sup>9</sup>

**There have been serious consequences for health and irreversible damage to the natural world even at the 1.1°C of warming reached in the previous decade (2011-2020).**<sup>10</sup> If global temperatures are allowed to rise even to 2°C, rather than 1.5°C, hundreds of millions more people could be exposed to climate-related risks by 2050.<sup>11</sup> Higher global temperatures also increase the likelihood of irreversible events with severe and unavoidable impacts on people's lives and health, such as significant sea level rise caused by the loss of major ice sheets.<sup>12</sup>

**The health and wellbeing of future generations depends on our response to climate change**, with the IPCC warning that choices and actions taken over this decade will have impacts 'now and for thousands of years'.<sup>13</sup> This means that **taking effective action to reduce emissions now will help protect the health of women and girls living far into the future.**

## Climate change poses particular risks to women's health

**Access to sexual and reproductive healthcare is important across women's life course** to maintain good health and make decisions about their lives.<sup>14</sup> During pregnancy, healthcare services play an essential role in supporting good outcomes for both the woman and her baby, while physiological changes can increase vulnerability to climate-related risks. However, **climate-related disruption can seriously impact healthcare services and the professionals who work within them**, including through preventing or delaying access to vital care, and affecting complex supply chains of essential medicines or equipment.<sup>15</sup>

**Climate-related risks are not felt equally, causing and exacerbating inequalities.** Climate-related disasters and conflict usually lead to an increase in gender-based violence,<sup>16</sup> and people who are on lower incomes or living in poverty – who are more likely to be women – are less able to adapt following extreme weather events or during economic instability.<sup>17</sup> **The intersection of social inequalities particularly threatens health outcomes for women who are, for example, disabled, older, or from minoritised ethnic or indigenous groups.**<sup>18</sup>



## The impact of climate change on women's health in the UK

The UK is already experiencing a changing climate. The number of days considered 'hot' or 'very hot' by the Met Office has increased in recent decades, there are fewer cold spells, and the years are becoming wetter.<sup>19</sup> In 2022 temperatures exceeded 40°C for the first time ever, pressuring NHS, social care and emergency services, disrupting education and transport, and causing excess deaths.<sup>20</sup>

The health burdens of climate change are falling upon an NHS already struggling to deliver timely and high quality women's health services, with increasingly long waiting times for gynaecology care and intense pressures in maternity services.<sup>21</sup> Responding to climate change is a significant opportunity to support government ambitions to prevent ill-health across the population, tackle health inequalities, and achieve ambitions set out in each nation's women's health plan or strategy.

### Specific risks to women's health in the UK over the coming years and decades include:

- **Many more women will be at significant risk of flooding, which can threaten health in the short- and long-term.** Flooding is a significant challenge facing the UK, with a temperature rise of 2°C projected to increase the number of people significantly at risk by 61% by 2050.<sup>22</sup> Flood events can disrupt access to sexual and reproductive healthcare and maternity services, for example by damaging hospital buildings, power supplies or transport routes.<sup>23</sup> Flooding can also lead to outbreaks of infectious disease, and cause long-term mental health impacts.<sup>24</sup>
- **Longer and more intense periods of high temperatures are expected to lead to more heat-related illness and death,<sup>25</sup> with women who are older or pregnant at greater risk.** Particular populations at risk include people with pre-existing health conditions, babies and young children, and older people – with older women at higher risk of heat-related mortality compared to men.<sup>26</sup> Heat exposure is associated with increased risks of poorer pregnancy outcomes including preterm birth and small for gestational age.<sup>27</sup>
- **Rising rates of infectious and vector-borne diseases pose a particular risk to pregnant women.** A warming climate combined with other factors means that diseases carried by ticks and mosquitoes, including those which carry particular risks to both maternal health and fetal development, such as malaria and Zika, could become established in the UK in the coming decades.<sup>28</sup> The warming climate could also lead to a rise in some common infections that can cause food poisoning, which can be more serious in pregnancy because of changes to the immune system.<sup>29</sup>
- **A healthy diet may become more unaffordable, or harder to access at all, shaping health throughout the life course and in pregnancy.** Eating a balanced diet is important for good health throughout our lives, and for a healthy pregnancy.<sup>30</sup> However, a changing climate is a threat to the UK food supply, particularly for foods that make up a healthy diet.<sup>31</sup> Higher prices will particularly impact households on lower incomes, exacerbating health inequalities.<sup>32</sup>
- **Ongoing reliance on fossil fuels pollutes the air, causing and worsening many health problems.<sup>33</sup>** Air pollution is linked to adverse pregnancy outcomes like preterm birth and stillbirth – for example, exposure to UK road traffic pollution during pregnancy is thought to adversely affect fetal growth and lung function into childhood.<sup>34</sup>



## Women's health in regions most vulnerable to climate change

Although climate change is a serious and long-term threat to life and health across the world, the risks are particularly severe for some regions and groups of people. Many factors can increase a region's vulnerability to climate change, including having fewer resources to respond to and recover from extreme weather events, location-specific climate risks such as sea level rise, or the wide-ranging impacts of conflicts or governance challenges.<sup>35</sup>

According to the IPCC, at least 3.3 billion people – 40% of the world's population – live in contexts which are highly vulnerable to climate change, particularly in Africa, Asia, and Central and South America.<sup>36</sup> Within and between countries, some groups are disproportionately at risk, such as Indigenous Peoples, small-scale farmers, and low-income households.<sup>37</sup>

### Evidence of the current impact on women living in regions most vulnerable to climate change includes:

- **Extreme weather events and climate-related displacement can seriously disrupt access to sexual and reproductive healthcare and safe maternity care.**<sup>38</sup> For example, the 2022 Pakistan floods left an estimated 650,000 pregnant women with little to no access to healthcare.<sup>39</sup> Over the next decade, MSI Reproductive Choices estimates that 14 million women are at risk of losing access to contraception due to climate-related disruptions, potentially leading to millions of unintended pregnancies, unsafe abortions and maternal deaths.<sup>40</sup>
- **Extreme weather is a direct threat to women's health and lives,** with risks for women often exacerbated by systemic gender inequalities, family responsibilities and a greater likelihood of being in poverty.<sup>41</sup> Heat exposure during pregnancy can impact maternal health and pregnancy outcomes,<sup>42</sup> for example, a study of 800 women in the southern Indian state of Tamil Nadu found that those working in extreme heat were twice as likely to suffer a stillbirth or miscarriage than those working in cooler environments.<sup>43</sup> In addition, higher temperatures, trauma from extreme weather events and loss of livelihoods have all been linked to negative impacts on mental health.<sup>44</sup>
- **Poverty, food insecurity and water stress directly caused by climate change shapes women's health outcomes throughout their life course, and holds back progress on gender equality.**<sup>45</sup> For example, droughts in Kenya, made stronger and more likely by climate change,<sup>46</sup> have worsened malnutrition for women and girls in particular, and increased exposure to gender-based violence.<sup>47</sup> UN Women estimates that by 2050 in a worst-case scenario, climate change could push up to 158 million more women and girls into poverty, and 236 million more into food insecurity.<sup>48</sup> Climate change can disrupt children's access to education, particularly for girls, when gendered norms mean greater responsibilities for household chores and less priority given to their education.<sup>49</sup>
- **Displacement and conflict puts women at increased risk of gender-based violence.**<sup>50</sup> Climate change can exacerbate and escalate social and political tensions and displace populations between and within regions, which can put women at increased risk of sexual violence or exploitation, trafficking and domestic abuse.<sup>51</sup>



- **The extraction and burning of fossil fuels can harm maternal and neonatal health and causes millions of excess deaths each year globally.**<sup>52</sup> For example, exposure to oil spills and gas flaring in the Niger Delta region of Nigeria is thought to disproportionately affect women, increase pregnancy complications such as postpartum haemorrhage, and significantly increase neonatal mortality rates.<sup>53</sup> Fossil fuel extraction can also fuel conflict, human rights abuses and gender-based violence.<sup>54</sup>

## Recommendations

### **1. The UK Government must deliver on its commitments under the Paris Agreement and significantly reduce greenhouse gas emissions, by accelerating policies which support every sector to transition to net zero, prioritising health and equity in these policies, and by rapidly phasing out support for fossil fuels.**

In 2024 the UK Government committed to reducing UK greenhouse gas emissions by 81% from 1990 to 2035 in support of the Paris Agreement goal of limiting global temperature rises to well below 2°C above pre-industrial levels.<sup>55</sup> However, the Climate Change Committee has noted that credible plans to delivery are still lacking, with urgent action needed across all sectors to decarbonise.<sup>56</sup>

- **The UK Government must accelerate and prioritise policies that support every sector to significantly reduce emissions, as set out by the Climate Change Committee.**<sup>57</sup> This includes ensuring a cohesive cross-departmental approach to reducing emissions which is informed by public health and climate science, and recognises the huge contribution that changes to our agriculture, travel, housing and infrastructure will make to carbon emissions, equity, and health.
- The significant changes needed to reduce emissions can often create more immediate positive benefits for health and equity. **To deliver these benefits, and avoid exacerbating health inequalities, national and local policies to reduce emissions and adapt to climate change must consider everyone's needs, and all opportunities to improve health. This should include taking a health in all policies approach, robust equality impact assessments, and ensuring women are involved in decision making.** You can read more about the need for cross-government action to improve health in our policy positions on [poverty and deprivation](#) and achieving [racial and ethnic equality in women's health](#).
- The transition to renewable energy and away from fossil fuels is key to reducing UK emissions.<sup>58</sup> **The UK Government must rapidly phase out fossil fuel subsidies, and end both direct investment in fossil fuel extraction as well as the provision of new licences for fossil fuel exploration, extraction and sale.** At the same time, the UK Government must increase investment in renewable energy and energy efficiency measures, realise the opportunity to address fuel poverty, and support the workforces and communities most impacted by the energy transition.<sup>59</sup> You can read more about transitioning away from fossil fuels to protect health in the UK Health Alliance on Climate Change (UKHACC) policy position on [a just energy transition for the good of health](#).



## **2. The UK Government must take every opportunity to support women's health and gender equality in countries most vulnerable to climate change, by reversing cuts to overseas aid, delivering strong international climate finance commitments, and advocating for stronger international action to protect women's health and gender equality.**

Through the Paris Agreement and other commitments, the UK has recognised a responsibility to support those countries who are suffering the most extreme consequences of climate change and are least responsible for the greenhouse gas emissions which have driven the crisis.<sup>60</sup> The current UK Government has set out a mission statement to 'create a world free from poverty on a liveable planet'.<sup>61</sup> However, the UK is not yet doing all it can to support women's health across the world in the face of climate change, with three major priorities for the UK Government:

- **As an urgent priority, the UK Government must implement its manifesto commitment to restoring development spending to 0.7% of gross national income as soon as possible.**<sup>62</sup> The 2020 reduction in the UK's official development assistance (ODA) resulted in the closure of vital sexual and reproductive health (SRHR) programmes and had devastating consequences for women's health across the world. In the face of increasing climate-related threats, the importance of restoring support cannot be overstated. You can read more about the case for reinvestment in global SRHR in the RCOG report [Getting back on track](#).
- **Alongside this, the UK Government must better support lower-income countries to properly adapt, decarbonise and meet the costs of irreversible damage, by developing international climate finance goals which reflect the level of need,** and ultimately protect health and lives.<sup>63</sup> This must be additional to ODA funding streams, and include a substantial focus on programmes which seek to address the gendered impacts of climate change. Read more about equity in the global response to climate change in UKHACC's position on [climate justice](#).
- **The UK must also use its participation in global forums such as the United Nations Climate Change Conferences to advocate for stronger international action to protect women's health and gender equality.** It must also demand and facilitate a reversal of the ongoing lack of equal gender representation within these forums.<sup>64</sup>

## **3. The governments across the UK must ensure the health service is both fully supported to decarbonise in line with wider UK net zero commitments, and well-prepared for the increasing climate-related risks to health and health service delivery.**

Contributing around 4% of the UK's total greenhouse gas emissions,<sup>65</sup> the transition to a net zero NHS will play a significant role in reaching national emissions targets.

**It is crucial that each UK government commits to the investment and support needed to achieve a net zero NHS by 2040.** To ensure the transition to low-carbon healthcare is a priority within the NHS, net zero ambitions must form a central pillar of all NHS values and strategies, backed by clear paths of accountability.

To protect women's health and the health and wellbeing of NHS staff, the health system must be made more resilient to climate change. **Substantial capital investment in NHS estate and infrastructure** is needed to ensure buildings are efficient and able to cope with more frequent extreme weather events.



**Wider investment in women's health services is also essential to ensure already stretched services are able to cope with the additional health impacts of climate change.**

**Initiatives to accelerate climate adaptation in the health sector must be designed and delivered in partnership with the people using those services,** to ensure innovation and acceptability, support patient safety and informed choice, and help ensure interventions respond to health inequalities. For example the RCOG is working with partners and people with lived experience to develop [sustainable maternity care](#).

#### **4. Each UK government must ensure robust adaptation plans are in place across all sectors to help prevent changes to the UK climate impacting women's health and pregnancy outcomes.**

As so much of our health is shaped by the wider context of our lives, resilience to the existing and expected changes to the UK climate across the economy and in every sector is important to protect women's health.<sup>66</sup> Adapting to climate change is important even if there are significant reductions in global emissions, as the UK is still expected to experience warmer and wetter winters, hotter drier summers, sea level rise, and the economic costs of climate change, in the next 25 years.<sup>67</sup>

Adaptation to climate change is largely the responsibility of each government in the UK.<sup>68</sup> To protect women's health and support good pregnancy outcomes, the governments of the UK should develop and deliver policies which protect women's health, support access to healthcare and reduce health inequalities, including:

- **Plans and preparations to ensure access to healthcare during and after flooding and other extreme weather events.** Access to healthcare, particularly care across the maternity pathway, must be explicitly considered in national and local flood preparedness plans. This should include targeted support for communities already experiencing poorer maternity and neonatal outcomes.
- **Ambitious strategies to ensure long-term adaptation to extreme heat, which consider the specific risks during pregnancy.** Additionally, the UK Government should consider developing a UK-wide heat resilience strategy that coordinates all governments, health services, local authorities, research funders and employers to improve resilience in response to higher temperatures, as recommended by the Physiological Society and Faculty of Public Health.<sup>69</sup>
- **A robust response to future increased risks from infectious and vector-borne diseases.** This should include being prepared to respond to disease outbreaks, ongoing surveillance, and improved awareness of risks and disease symptoms amongst the public and healthcare professionals.<sup>70</sup>



## A note on language

Within this document we use the terms woman and women's health. However, it is important to acknowledge that it is not only women for whom it is necessary to access women's health and reproductive services in order to maintain their gynaecological health and reproductive wellbeing. Gynaecological and obstetric services and delivery of care must therefore be appropriate, inclusive and sensitive to the needs of those individuals whose gender identity does not align with the sex they were assigned at birth.

## Further reading

The RCOG is prioritising action to supporting our membership to deliver more sustainable care, reduce our own emissions, and advocate for a healthier future for women and girls. You can read more about our ambitions for climate change and sustainability [here](#).

The RCOG is a member of the UK Health Alliance on Climate Change (UKHACC), which coordinates action, provides leadership, and amplifies the voice of health professionals across the UK. You can find UKHACC's policy recommendations [here](#).

Sign up to the RCOG's free learning modules on climate and health [here](#).





## References

- <sup>1</sup> IPCC, [AR6 Synthesis Report: Headline statements](#) (2023); UN, [What Is Climate Change?](#)
- <sup>2</sup> UN, [Causes and Effects of Climate Change](#)
- <sup>3</sup> UN, [Causes and Effects of Climate Change](#); Our World in Data, [Breakdown of carbon dioxide, methane and nitrous oxide emissions by sector](#) (updated January 2024)
- <sup>4</sup> IPCC, [Climate Change 2023 Synthesis Report: Headline statements](#) (2023); Romanello M et al, [The 2024 report of the Lancet Countdown on health and climate change: facing record-breaking threats from delayed action](#) *The Lancet* (2024)
- <sup>5</sup> IPCC, [Climate Change 2023 Synthesis Report: Summary for Policymakers](#) (2023); Romanello M et al, [The 2023 report of the Lancet Countdown on health and climate change: the imperative for a health-centred response in a world facing irreversible harms](#) *The Lancet* (2023)
- <sup>6</sup> UKHACC, [Biodiversity, climate change and health](#) (2023)
- <sup>7</sup> UKHACC, [Biodiversity, climate change and health](#) (2023); IPCC, [Climate Change 2023 Synthesis Report: Summary for Policymakers](#) (2023)
- <sup>8</sup> IPCC, [Special Report: Global Warming of 1.5°C: FAQs](#) (2019)
- <sup>9</sup> IPCC, [Climate Change 2023 Synthesis Report: Summary for Policymakers](#) (2023)
- <sup>10</sup> IPCC, [Climate Change 2023 Synthesis Report: Summary for Policymakers](#) (2023)
- <sup>11</sup> IPCC, [Special Report: Global warming of 1.5°C: Summary for policymakers](#) (2019)
- <sup>12</sup> IPCC, [Climate Change 2023 Synthesis Report: Summary for Policymakers](#) (2023)
- <sup>13</sup> IPCC, [AR6 Synthesis Report: Headline statements](#) (2023)
- <sup>14</sup> RCOG, [Better for women](#) (2019); Pappas A et al, [Extreme weather events and maternal health in low-income and middle-income countries: a scoping review](#) *BMJ Open* (2024)
- <sup>15</sup> NHS England, [Third Health and Care Adaptation Report](#) (2021); WHO, [Protecting maternal, newborn and child health from the impacts of climate change: A call for action](#) (2023)
- <sup>16</sup> Thurston AM et al, [Natural hazards, disasters and violence against women and girls: a global mixed-methods systematic review](#) *BMJ Global Health* (2021); UN Women, [Explainer: How gender inequality and climate change are interconnected](#) (2022)
- <sup>17</sup> IPCC, [Climate Change 2023 Synthesis Report: Longer report](#) (2023); UN Women, [The Progress on the Sustainable Development Goals: The Gender Snapshot 2023](#) (2023)
- <sup>18</sup> UN, Analytical study on the promotion and protection of the rights of persons with disabilities in the context of climate change: Report of the Office of the United Nations High Commissioner for Human Rights (2020); IPCC, [Climate Change 2023 Synthesis Report](#) (2023)
- <sup>19</sup> UKHSA, [Health Effects of Climate Change in the UK: Chapter 3. Climate change, flooding, coastal change and public health](#) (2023); Met Office, [Climate change in the UK](#); Kendon M et al, [State of the UK Climate 2023](#) *International Journal of Climatology* (2024)
- <sup>20</sup> World Weather Attribution, [Without human-caused climate change temperatures of 40°C in the UK would have been extremely unlikely](#) (2022); University of Birmingham, [2022 heatwave struck off surgery in fifth of UK hospitals](#) (2023); UKHSA, [Heat mortality monitoring report: 2022](#) (updated 2024)
- <sup>21</sup> RCOG, [Waiting for a way forward](#) (2024); RCOG, [Maternity safety](#)
- <sup>22</sup> UKHSA, [Health Effects of Climate Change in the UK: Chapter 3. Climate change, flooding, coastal change and public health](#) (2023)
- <sup>23</sup> Landeg O et al, [Coastal flooding and frontline health care services: challenges for flood risk resilience in the English health care system](#) *J Health Serv Res Policy* (2019); UKHSA, [Health Effects of Climate Change in the UK: Chapter 3. Climate change, flooding, coastal change and public health](#) (2023)
- <sup>24</sup> UKHSA, [Health Effects of Climate Change in the UK: Chapter 3. Climate change, flooding, coastal change and public health](#) (2023)
- <sup>25</sup> UKHSA, [Health Effects of Climate Change in the UK: Chapter 2. Temperature effects on mortality in a changing climate](#) (2023)



- 
- <sup>26</sup> Van Steem Y et al, [Sex differences in mortality after heat waves: are elderly women at higher risk?](#) *Int Arch Occup Environ Health* (2018); Physiological Society and Faculty of Public Health, [Red Alert: Developing a Human-centred National Heat Resilience Strategy](#) (2023)
- <sup>27</sup> Bonell A et al, [An expert review of environmental heat exposure and stillbirth in the face of climate change: Clinical implications and priority issues](#) *BJOG* (2023); Giudice LC et al, [Climate change, women's health, and the role of obstetricians and gynecologists in leadership](#) *IJGO* (2021); Samuels L et al, [Physiological mechanisms of the impact of heat during pregnancy and the clinical implications: review of the evidence from an expert group meeting](#) *Int J Biometeorol* (2023)
- <sup>28</sup> UKHSA, [Health Effects of Climate Change in the UK: Chapter 8. Direct and indirect effects of climate change on vectors and vectorborne diseases in the UK](#) (2023); Giudice LC et al, [Climate change, women's health, and the role of obstetricians and gynecologists in leadership](#) *IJGO* (2021)
- <sup>29</sup> UKHSA, [Health Effects of Climate Change in the UK: Chapter 7. Effect of climate change on infectious diseases in the UK](#) (2023)
- <sup>30</sup> NHS England, [Have a healthy diet in pregnancy](#)
- <sup>31</sup> UKHSA, [Health Effects of Climate Change in the UK: Chapter 9. Climate change and food supply](#) (2023); UK Climate Risk, [Health and Social Care Sector Briefing](#) (2021); DEFRA, [UK Food Security Index 2024](#) (2024)
- <sup>32</sup> RCOG, [Position statement: Poverty, deprivation and women's health](#) (2024)
- <sup>33</sup> OHID, [Air pollution: applying All Our Health](#) (updated 2022); Clean Air Fund, [The Pathway to Healthy Air in the UK](#) (2022)
- <sup>34</sup> Smith RB et al, [Impact of London's road traffic air and noise pollution on birth weight: retrospective population based cohort study](#) *BMJ* (2017); Cai Y, [Prenatal, Early-Life, and Childhood Exposure to Air Pollution and Lung Function: The ALSPAC Cohort](#) *Am J Respir Crit Care Med* (2020)
- <sup>35</sup> IPCC, [Climate Change 2023 Synthesis Report: Longer report](#) (2023)
- <sup>36</sup> IPCC, [Climate Change 2023 Synthesis Report: Summary for Policymakers](#) (2023); IPCC, [Climate Change 2023 Synthesis Report: Longer report](#) (2023)
- <sup>37</sup> IPCC, [Climate Change 2023 Synthesis Report: Summary for Policymakers](#) (2023)
- <sup>38</sup> RCOG, [Equitable access to maternity care for refugee, asylum seeking and undocumented migrant women](#) (2022); IPCC, [Climate Change 2023 Synthesis Report](#) (2023); Pappas A et al, [Extreme weather events and maternal health in low-income and middle-income countries: a scoping review](#) *BMJ Open* (2024); Anton B et al, [Opportunities and challenges for financing women's, children's and adolescents' health in the context of climate change](#) *BMJ Global Health* (2024)
- <sup>39</sup> Zaigham et al, [Protecting pregnant women from climate disasters: Strategies in the aftermath of Pakistan's devastating flood](#) *IJGO* (2023)
- <sup>40</sup> MSI Reproductive Choices, [Climate crisis could strip 14 million women of access to contraception by 2035](#) (2024)
- <sup>41</sup> Giudice LC et al, [Climate change, women's health, and the role of obstetricians and gynecologists in leadership](#) *IJGO* (2021); Carbon Brief, [Mapped: How climate change disproportionately affects women's health](#) (2020); Zaigham M et al, [Protecting pregnant women from climate disasters: Strategies in the aftermath of Pakistan's devastating flood](#) *IJGO* (2023)
- <sup>42</sup> Giudice LC et al, [Climate change, women's health, and the role of obstetricians and gynecologists in leadership](#) *IJGO* (2021); Chersich M F et al, [Associations between high temperatures in pregnancy and risk of preterm birth, low birth weight, and stillbirths: systematic review and meta-analysis](#) *BMJ* (2020)
- <sup>43</sup> Rekha S et al, [Heat stress and adverse pregnancy outcome: Prospective cohort study](#) *BJOG* (2023)
- <sup>44</sup> IPCC, [Climate Change 2023 Synthesis Report: Longer report](#) (2023); Romanello M et al, [The 2024 report of the Lancet Countdown on health and climate change: facing record-breaking threats from delayed action](#) *The Lancet* (2023); RCPsych, [Our planet's climate and ecological emergency](#) (2021)
- <sup>45</sup> UN, [Five ways the climate crisis impacts human security](#); UN Women, [Progress on the Sustainable Development Goals: The Gender Snapshot 2023](#) (2023); IPCC, [Climate Change 2023 Synthesis Report](#) (2023); Souza J P et al, [A global analysis of the determinants of maternal health and transitions in maternal mortality](#) *The Lancet Global Health* (2023); RCOG, [Position statement: Poverty, deprivation and women's health](#) (2024)
- <sup>46</sup> World Weather Attribution, [Human-induced climate change increased drought severity in Horn of Africa](#) (2023)
- <sup>47</sup> UNFPA Kenya, [Rapid gender analysis reveals GBV a silent disaster amidst Kenya's drought emergency](#) (2023)



- 
- <sup>48</sup> UN Women, [Progress on the Sustainable Development Goals: The Gender Snapshot 2023](#) (2023)
- <sup>49</sup> Sims K, [Education, Girls' Education and Climate Change](#) (2021)
- <sup>50</sup> Van Daalen et al, [Extreme events and gender-based violence: a mixed-methods systematic review](#) *The Lancet Planetary Health* (2022)
- <sup>51</sup> Van Daalen et al, [Extreme events and gender-based violence: a mixed-methods systematic review](#) *The Lancet Planetary Health* (2022); UN Women, [Explainer: How gender inequality and climate change are interconnected](#) (2022)
- <sup>52</sup> Lelieveld J et al, [Air pollution deaths attributable to fossil fuels: observational and modelling study](#) *BMJ* (2023);
- <sup>53</sup> Oghenetega OB et al, [Exposure to oil pollution and maternal outcomes: The Niger Delta prospective cohort study](#) *PLoS One* (2022); Oghenetega OB et al, [Miscarriage, stillbirth, and infant death in an oil-polluted region of the Niger Delta, Nigeria: A retrospective cohort study](#) *IJGO* (2020); Greenpeace, [Confronting injustice: Racism and the environmental emergency](#) (2022)
- <sup>54</sup> Friends of the Earth, [Tip of the iceberg: The future of fossil fuel extraction](#) (2021); Global Witness, [Oil firms bankroll Azerbaijan's warring regime with billions in fossil fuel money](#) (2023); National Inquiry into Missing and Murdered Indigenous Women and Girls, [Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls](#) (2019)
- <sup>55</sup> DESNZ, [Press release: UK shows international leadership in tackling climate crisis](#) (2024)
- <sup>56</sup> Climate Change Committee, [2024 Progress Report to Parliament](#) (2024)
- <sup>57</sup> Climate Change Committee, [2024 Progress Report to Parliament](#) (2024)
- <sup>58</sup> BMJ, [COP28 decision to "transition away" from fossil fuels is hailed as milestone but loopholes are decried](#) (2023)
- <sup>59</sup> UKHACC, [A just energy transition for the good of health](#) (2024); Institute of Health Equity, [Fuel Poverty, Cold Homes and Health Inequalities in the UK](#) (2022)
- <sup>60</sup> UK Government, Guidance: International Climate Finance (updated 2024); RCOG, [Getting back on track](#) (2023)
- <sup>61</sup> Labour, [Labour Party Manifesto 2024](#) (2024)
- <sup>62</sup> Labour, [Labour Party Manifesto 2024](#) (2024)
- <sup>63</sup> Climate Change Committee, [COP29: Key outcomes and next steps for the UK](#) (2024)
- <sup>64</sup> The Guardian, [Women added to Cop29 climate summit committee after backlash](#) (2024)
- <sup>65</sup> NHS England, [Delivering a 'Net Zero' National Health Service – July 2022](#) (2022); WHO, [Protecting maternal, newborn and child health from the impacts of climate change: A call for action](#) (2023)
- <sup>66</sup> UK Government, [UK Climate Change Risk Assessment 2022](#) (2022); Climate Change Committee, [Independent Assessment of UK Climate Risk](#) (2023)
- <sup>67</sup> UK Government, [UK Climate Change Risk Assessment 2022](#) (2022)
- <sup>68</sup> UK Government, The Third National Adaptation Programme (NAP3) and the Fourth Strategy for Climate Adaptation Reporting (2023)
- <sup>69</sup> Physiological Society, [Developing a Human-centred National Heat Resilience Strategy](#) (2023)
- <sup>70</sup> UKHSA, [Health Effects of Climate Change in the UK: Chapter 8. Direct and indirect effects of climate change on vectors and vector-borne diseases in the UK](#) (2023)