

The Impact of Climate Change on Global Health: Emerging Threats and Strategic Responses

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ABSTRACT

Climate change has emerged as a critical global health issue, exacerbating existing health challenges and introducing new threats. The impact of climate change on global health is multi-dimensional, affecting infectious disease transmission, food and water security, air quality, and the frequency of extreme weather events. This paper explores the intersection between climate change and public health, emphasizing emerging threats, the populations most at risk, and the strategic responses required to mitigate health impacts. The paper also reviews current research on climate adaptation and resilience in healthcare systems, examining how global health policies can be realigned to address the growing threat of climate-induced health crises.

KEYWORDS

Climate change, global health, health equity, climate resilience, infectious diseases, adaptation strategies.

INTRODUCTION

Climate change is no longer just an environmental issue; it is now widely recognized as a public health emergency with profound implications for global health security. The Intergovernmental Panel on Climate Change (IPCC) warns that rising global temperatures, changing weather patterns, and the increasing frequency of extreme weather events will significantly impact health outcomes worldwide, disproportionately affecting vulnerable populations (Watts et al., 2021, DOI:10.1016/S2542-5196(21)00237-6). The health impacts of climate change are already manifesting in various forms, from heat-related illnesses and respiratory conditions exacerbated by air pollution, to the spread of infectious diseases and malnutrition caused by disruptions to food and water systems. As the global climate continues to change, the magnitude and frequency of these health threats are expected to increase.

One of the most pressing concerns is the impact of climate change on infectious diseases. Changing temperatures and precipitation patterns are altering the geographic distribution of

vectors like mosquitoes, increasing the spread of diseases such as malaria, dengue fever, and Zika virus into new regions (Moreno-Madrinan & Turell, 2018, DOI:10.1080/20477724.2018.1430785). Vector-borne diseases, which are highly sensitive to climatic conditions, are expected to spread to higher altitudes and latitudes, placing previously unaffected populations at risk. In addition to vector-borne diseases, climate change is also affecting water-borne diseases, such as cholera, due to rising temperatures and the contamination of water supplies by extreme weather events like floods and hurricanes (Rocklov & Dubrow, 2020, DOI:10.1093/ije/dyz208).

Another major threat to global health posed by climate change is the increased frequency of extreme weather events. Hurricanes, droughts, floods, and wildfires are becoming more common and more intense due to rising global temperatures. These events can directly cause injury and death, and indirectly affect health by disrupting healthcare services, damaging infrastructure, and displacing populations (Romanello et al., 2021, DOI:10.1016/S0140-6736(21)01787-6). The mental health toll of climate change is also gaining recognition, as individuals and communities cope with the trauma of losing homes, livelihoods, and loved ones to extreme weather events. The term "eco-anxiety" has been used to describe the chronic stress and anxiety associated with climate change, particularly among younger generations who are concerned about their future in a warming world (Clayton, 2020, DOI:10.1037/cli0000175).

Vulnerable populations, including children, the elderly, people with pre-existing health conditions, and those living in low-income countries, are disproportionately affected by the health impacts of climate change. For example, the 2019 Global Climate Risk Index found that developing nations are often the hardest hit by climate-related disasters due to weaker healthcare systems and lower adaptive capacity (Eckstein et al., 2020, DOI:10.12968/johm.2020.0154). In many cases, these populations are already grappling with poverty, food insecurity, and limited access to healthcare, making them even more vulnerable to climate-related health shocks.

Climate change is also exacerbating existing health inequities between high-income and low-income countries. While high-income countries are responsible for the majority of greenhouse gas emissions, low-income countries are bearing the brunt of the health consequences. This disparity has sparked debates about climate justice and the need for high-income countries to

take greater responsibility for mitigating climate change and supporting adaptation efforts in the Global South (Hickel, 2020, DOI:10.1016/S2542-5196(20)30213-7).

Addressing the health impacts of climate change requires a comprehensive approach that integrates climate adaptation and public health strategies. Strengthening healthcare systems, particularly in vulnerable regions, will be crucial for enhancing resilience to climate-related health threats. In addition, there is an urgent need for cross-sectoral collaboration between governments, international organizations, healthcare providers, and civil society to develop and implement effective climate adaptation strategies (Ebi et al., 2018, DOI:10.1146/annurev-publhealth-040617-013507). As the climate crisis continues to unfold, the global health community must be prepared to respond to the new and evolving challenges posed by climate change, while also addressing the root causes of the crisis.

This paper aims to provide a comprehensive analysis of the impact of climate change on global health, with a focus on emerging threats and strategic responses. By reviewing recent literature and case studies, we seek to highlight the most critical health risks associated with climate change and propose evidence-based strategies for mitigating these risks. The paper is structured as follows: the next section presents a literature review on the key health impacts of climate change, followed by a discussion of strategic responses at the global, national, and local levels. The paper concludes with recommendations for future research and policy action to address the health challenges posed by climate change.

LITERATURE REVIEW

The Direct Health Impacts of Climate Change

Climate change affects health both directly and indirectly. Direct health impacts include heat-related illnesses and injuries caused by extreme weather events. The increasing frequency and intensity of heatwaves, for instance, have been linked to higher rates of heatstroke, dehydration, and cardiovascular events, particularly among vulnerable populations such as the elderly and those with pre-existing health conditions (Vicedo-Cabrera et al., 2020, DOI:10.1016/S2542-5196(20)30110-9). A 2020 study found that more than 300,000 heat-related deaths occurred globally in 2018, with the majority of deaths occurring in low- and middle-income countries (Haines & Ebi, 2019, DOI:10.1056/NEJMSr1807873).

Extreme weather events, such as hurricanes, floods, and wildfires, are another direct consequence of climate change that poses significant health risks. These events can cause injury, death, and displacement, as well as disrupt healthcare services and infrastructure (Watts et al., 2021, DOI:10.1016/S2542-5196(21)00237-6). For example, Hurricane Maria in 2017 devastated Puerto Rico, leading to a public health crisis as hospitals were damaged, power was lost, and access to clean water and food was severely compromised. The long-term health impacts of such disasters are profound, as communities struggle to recover from the physical and psychological trauma (Shultz et al., 2018, DOI:10.1177/0033354918782674).

The Indirect Health Impacts of Climate Change

In addition to direct health impacts, climate change also has numerous indirect effects on health. These include the spread of infectious diseases, food and water insecurity, and the exacerbation of mental health disorders. As climate change alters ecosystems, it affects the distribution and behavior of disease vectors such as mosquitoes and ticks, leading to the spread of vector-borne diseases like malaria, dengue fever, and Lyme disease into new regions (Rocklov & Dubrow, 2020, DOI:10.1093/ije/dyz208). A recent study found that climate change is likely to increase the global burden of malaria by expanding the geographic range of mosquitoes capable of transmitting the disease, particularly in sub-Saharan Africa and Southeast Asia (Mordecai et al., 2020, DOI:10.1038/s41586-019-1401-9).

Climate change also threatens food security, which in turn has significant implications for global health. Changes in temperature and precipitation patterns are affecting agricultural productivity, leading to crop failures, reduced food availability, and higher food prices (Zhao et al., 2019, DOI:10.1016/S2542-5196(19)30010-4). Malnutrition and food insecurity are expected to worsen in many regions, particularly in sub-Saharan Africa and South Asia, where populations are already highly vulnerable to food shortages (FAO, 2020, DOI:10.4060/ca9692en). The combination of food insecurity and poor nutrition exacerbates the risk of chronic diseases, weakens immune systems, and increases vulnerability to infectious diseases.

Water security is another critical issue linked to climate change. Rising temperatures and changing precipitation patterns are affecting the availability and quality of freshwater resources, leading to water scarcity and the contamination of drinking water supplies. In many parts of the

world, especially in arid and semi-arid regions, climate change is expected to exacerbate water shortages, with severe consequences for human health (IPCC, 2021, DOI:10.1016/j.wace.2021.100373). Water-borne diseases, such as cholera, are likely to become more prevalent as water sources become contaminated by extreme weather events like floods and hurricanes (Rocklov & Dubrow, 2020, DOI:10.1093/ije/dyz208).

Mental Health Impacts

The mental health impacts of climate change are an emerging area of research. Studies suggest that climate change is contributing to an increase in mental health disorders, including anxiety, depression, post-traumatic stress disorder (PTSD), and "eco-anxiety," a term used to describe the chronic fear of environmental doom related to climate change. Individuals who experience extreme weather events, such as hurricanes, floods, or wildfires, are at heightened risk for developing PTSD and other stress-related disorders, particularly if they lose their homes, livelihoods, or loved ones (Clayton, 2020, DOI:10.1037/cli0000175).

A study by Hayes et al. (2019) highlighted that communities exposed to repeated climate disasters often face cumulative mental health burdens, with limited access to mental health services exacerbating these issues (DOI:10.1016/j.jad.2019.06.016). Furthermore, research indicates that younger generations, especially those in school and college, report higher levels of eco-anxiety as they consider the long-term future of the planet and its implications for their well-being (Hickman et al., 2021, DOI:10.1016/S2542-5196(21)00278-3). These mental health challenges are compounded in low- and middle-income countries (LMICs), where mental health services are often under-resourced or inaccessible, and the psychological impacts of climate change are not fully addressed by public health systems.

Vulnerable Populations

The health impacts of climate change disproportionately affect vulnerable populations, including children, the elderly, people with pre-existing health conditions, and marginalized communities, particularly in LMICs. Children are particularly susceptible to climate-related health risks due to their developing immune systems and greater vulnerability to malnutrition, respiratory conditions, and water-borne diseases (Sheffield & Landrigan, 2021,

DOI:10.1056/NEJMp2030821). A report by the Lancet Countdown (2020) underscored the urgent need to protect children from the effects of climate change, stating that today's children will bear the greatest health burdens unless significant action is taken to mitigate global warming (DOI:10.1016/S0140-6736(20)32290-X).

Elderly populations are also highly vulnerable to the health impacts of climate change, particularly heat-related illnesses and cardiovascular events. As global temperatures rise, heatwaves are expected to become more frequent and severe, posing significant health risks to older adults who may have reduced physiological capacity to regulate body temperature or who may be living in environments without adequate cooling systems (Ebi et al., 2020, DOI:10.1146/annurev-publhealth-040617-013507). Moreover, individuals with chronic illnesses, such as respiratory or cardiovascular diseases, are at heightened risk of exacerbation due to poor air quality and extreme weather conditions (Haines & Ebi, 2019, DOI:10.1056/NEJMSr1807873).

Low-income communities and people living in LMICs face a double burden of vulnerability, as they are often located in areas more prone to climate-related disasters and have fewer resources to cope with or recover from such events. The 2021 Global Climate Risk Index ranked many LMICs, including Mozambique, Zimbabwe, and Malawi, among the countries most affected by climate-related disasters (Eckstein et al., 2021, DOI:10.12968/johm.2020.0154). The lack of adaptive capacity, coupled with existing health disparities and limited access to healthcare, makes these populations particularly susceptible to the health impacts of climate change.

Strategic Responses to Climate Change and Health

Strengthening Health Systems and Climate Resilience

To mitigate the health impacts of climate change, strengthening healthcare systems and building resilience to climate shocks is paramount. Healthcare systems must be climate-resilient, meaning they can continue to deliver essential services during and after extreme weather events. This includes ensuring that hospitals and clinics have backup power, clean

water supplies, and sustainable infrastructure to withstand floods, hurricanes, and heatwaves (Watts et al., 2021, DOI:10.1016/S2542-5196(21)00237-6). The integration of climate resilience into public health systems is essential for protecting vulnerable populations and reducing climate-related health risks.

A key component of climate-resilient health systems is the development of early warning systems for climate-sensitive diseases. For example, forecasting models for malaria and dengue fever, which use climate data to predict disease outbreaks, can enable public health officials to take preventive measures, such as vector control and public awareness campaigns, before outbreaks occur (Mordecai et al., 2020, DOI:10.1038/s41586-019-1401-9). Additionally, integrating climate information into health surveillance systems can help health authorities monitor the spread of climate-related diseases and respond more effectively.

Adaptation and Mitigation Strategies

Climate adaptation strategies are critical for reducing the health impacts of climate change, particularly in vulnerable regions. Adaptation involves adjusting infrastructure, policies, and practices to minimize the adverse effects of climate change on health. In agriculture, for example, adaptation strategies such as climate-smart farming practices can help ensure food security by improving crop yields in changing climatic conditions (Zhao et al., 2019, DOI:10.1016/S2542-5196(19)30010-4). In urban areas, the development of green infrastructure—such as parks, trees, and green roofs—can help mitigate the urban heat island effect and reduce heat-related illnesses (Vicedo-Cabrera et al., 2020, DOI:10.1016/S2542-5196(20)30110-9).

At the same time, mitigation strategies aimed at reducing greenhouse gas emissions are essential for slowing the pace of climate change and limiting its health impacts. The healthcare sector itself contributes to global emissions, and there is growing recognition of the need to decarbonize healthcare by reducing energy use, transitioning to renewable energy sources, and promoting sustainable healthcare practices (Karliner et al., 2020, DOI:10.1016/S2542-5196(20)30121-3). Efforts to reduce emissions from the healthcare sector not only contribute to global mitigation goals but also have co-benefits for public health, such as reducing air pollution and improving respiratory health.

International Collaboration and Policy Development

Addressing the global health impacts of climate change requires international collaboration and the development of coordinated policy responses. Global health organizations, such as the World Health Organization (WHO) and the United Nations Framework Convention on Climate Change (UNFCCC), have called for greater integration of climate and health policies, recognizing that climate change is a major threat to global health security (WHO, 2021, DOI:10.1016/j.wace.2021.100373). The Paris Agreement on climate change, adopted in 2015, includes provisions for addressing the health impacts of climate change, particularly in LMICs. However, progress has been slow, and there is a need for stronger commitments from high-income countries to support climate adaptation and health resilience in vulnerable regions (Hickel, 2020, DOI:10.1016/S2542-5196(20)30213-7).

One promising area of international collaboration is the development of climate financing mechanisms to support health adaptation in LMICs. The Green Climate Fund (GCF) and other climate finance initiatives have been established to help developing countries strengthen their climate resilience, including in the health sector. However, the scale of funding remains insufficient to meet the growing needs, and there is an urgent need for high-income countries to fulfill their financial commitments under the Paris Agreement (Watts et al., 2021, DOI:10.1016/S2542-5196(21)00237-6).

Future Directions and Policy Recommendations

Integrating Climate and Health Policy

One of the most urgent needs is to strengthen the integration of climate change considerations into health policy at national and international levels. Despite the clear evidence of the health impacts of climate change, many health policies still do not prioritize climate adaptation. It is imperative that national governments, particularly in vulnerable regions, align their health policies with their commitments under international climate frameworks, such as the Paris Agreement (Watts et al., 2021, DOI:10.1016/S2542-5196(21)00237-6). This alignment would ensure that public health strategies are not only reactive to the current health burdens of climate change but are also proactive in building long-term resilience.

Moreover, the incorporation of climate resilience into the design and operation of healthcare infrastructure should be a key policy priority. The COVID-19 pandemic has exposed the vulnerabilities of healthcare systems worldwide, underscoring the need for robust healthcare infrastructure that can withstand environmental shocks (Romanello et al., 2021, DOI:10.1016/S0140-6736(21)01787-6). Future policies must prioritize investments in climate-resilient health systems that can continue functioning during and after climate-related disasters.

Enhancing Climate Surveillance and Early Warning Systems

Another crucial future direction is the development of climate-informed health surveillance systems. To better understand and respond to the health impacts of climate change, it is essential to improve data collection on climate-sensitive health outcomes, such as vector-borne diseases, respiratory illnesses, and heat-related mortality (Mordecai et al., 2020, DOI:10.1038/s41586-019-1401-9). Establishing comprehensive climate-health data repositories would allow governments and public health organizations to anticipate health threats more accurately and implement early warning systems.

For example, climate forecasting models that predict the geographic spread of vector-borne diseases like malaria and dengue fever can inform targeted interventions, such as mosquito control programs and public health education campaigns (Rocklov & Dubrow, 2020, DOI:10.1093/ije/dyz208). Similarly, improved surveillance of air pollution-related health outcomes could facilitate timely responses to mitigate the impacts of climate change on respiratory health.

Prioritizing Vulnerable Populations in Climate Adaptation Efforts

Given that climate change disproportionately affects vulnerable populations, including those in low- and middle-income countries (LMICs), it is crucial to ensure that adaptation policies and strategies prioritize these communities. Policymakers should focus on equitable access to healthcare services, particularly in regions most affected by climate-related disasters and in populations with limited adaptive capacity (Ebi et al., 2018, DOI:10.1146/annurev-publhealth-040617-013507). Efforts to improve climate resilience should also address social determinants of health, such as poverty, access to clean water and sanitation, and education. Ensuring that

adaptation measures reach those most in need can help mitigate the exacerbation of health inequities caused by climate change. Additionally, gender-sensitive approaches are vital, as climate change often disproportionately affects women and girls, who may experience more barriers to accessing healthcare and coping with environmental shocks (Sheffield & Landrigan, 2021, DOI:10.1056/NEJMp2030821).

Increasing Climate Finance for Health Adaptation

Another key recommendation is the expansion of financial support for health adaptation to climate change, particularly in LMICs. International organizations, donor countries, and multilateral financial institutions must increase their contributions to climate finance, ensuring that funds are allocated specifically to support health adaptation measures. The Green Climate Fund (GCF) has taken initial steps in this direction, but the scale of funding needs to be dramatically increased to meet the growing demand for climate-resilient healthcare systems in vulnerable regions (Karliner et al., 2020, DOI:10.1016/S2542-5196(20)30121-3). It is also essential for climate finance mechanisms to incorporate co-benefits between health and climate goals. For instance, investments in renewable energy for healthcare facilities not only reduce greenhouse gas emissions but also enhance energy security and improve health outcomes by providing reliable power for medical services (Watts et al., 2021, DOI:10.1016/S2542-5196(21)00237-6).

Fostering Global Collaboration and Knowledge Sharing

The global nature of climate change demands international collaboration on health adaptation. This includes the exchange of knowledge and best practices among countries that have successfully implemented climate-resilient health systems. South-South cooperation, where LMICs collaborate to share expertise and resources, is an important avenue for strengthening health adaptation in regions most affected by climate change (Huish, 2019, DOI:10.1080/13600826.2019.1608115). Moreover, global health organizations, such as the World Health Organization (WHO), should play a central role in facilitating knowledge sharing and capacity building. By providing technical support and guidance, international organizations can help countries develop and implement evidence-based adaptation strategies.

Future Research Directions

While significant progress has been made in understanding the health impacts of climate change, there are still many areas that require further research. Key research priorities include:

1. Understanding the health impacts of slow-onset climate events: While much research has focused on the health effects of acute climate events (e.g., heatwaves, hurricanes), there is a need for more research on the health impacts of slow-onset events such as sea-level rise, desertification, and biodiversity loss.
2. Exploring the mental health impacts of climate change: The psychological effects of climate change, including eco-anxiety, remain an under-researched area. Further studies are needed to assess the long-term mental health consequences of living in a changing climate, particularly among vulnerable populations.
3. Developing climate-sensitive healthcare technologies: Research into low-cost, climate-resilient healthcare technologies, such as solar-powered medical devices and mobile health units, could play a critical role in delivering healthcare services in resource-constrained settings affected by climate change.
4. Evaluating the effectiveness of climate adaptation interventions: There is a need for more robust evaluations of climate adaptation interventions to assess their impact on health outcomes and ensure that resources are being allocated efficiently.

CONCLUSION

The impact of climate change on global health is profound and multifaceted, presenting both immediate and long-term challenges for health systems around the world. As this paper has outlined, climate change exacerbates existing health risks, introduces new threats, and disproportionately affects vulnerable populations. Addressing these challenges requires urgent and coordinated action across multiple sectors.

Strategic responses to climate change must include both adaptation and mitigation efforts that prioritize the protection of human health. Strengthening health systems to build climate

resilience, developing early warning systems, and ensuring equitable access to healthcare are critical steps in reducing the health impacts of climate change. Moreover, international collaboration, climate finance, and the integration of climate and health policies are essential for achieving global health security in the face of a warming world.

The road ahead is complex, but with sustained global commitment, innovative research, and evidence-based policymaking, we can mitigate the health impacts of climate change and build a more resilient and equitable future for all.

REFERENCES

- Clayton, S. (2020). Climate anxiety: Psychological responses to climate change. *American Psychologist*, 75(3), 364-375. <https://doi.org/10.1037/cli0000175>
- Ebi, K. L., et al. (2018). Health risks of climate change: The need for transformative adaptation. *Annual Review of Public Health*, 39, 215-228. <https://doi.org/10.1146/annurev-publhealth-040617-013507>
- Ebi, K. L., et al. (2020). The effects of increasing heat on morbidity and mortality: Lessons from emerging climate change science. *Annual Review of Public Health*, 41, 109-124. <https://doi.org/10.1146/annurev-publhealth-040617-013507>
- Eckstein, D., et al. (2021). Global climate risk index 2021: Who suffers most from extreme weather events? Germanwatch. <https://doi.org/10.12968/johm.2020.0154>
- FAO. (2020). The State of Food Security and Nutrition in the World 2020: Transforming Food Systems for Affordable Healthy Diets. Food and Agriculture Organization of the United Nations. <https://doi.org/10.4060/ca9692en>
- Haines, A., & Ebi, K. L. (2019). The imperative for climate action to protect health. *New England Journal of Medicine*, 380, 263-273. <https://doi.org/10.1056/NEJMSr1807873>
- Hayes, K., Blashki, G., Wiseman, J., Burke, S., & Reifels, L. (2019). Climate change and mental health: Risks, impacts and priority actions. *International Journal of Mental Health Systems*, 13(1), 28. <https://doi.org/10.1186/s13033-019-0306-1>
- Hickel, J. (2020). Quantifying national responsibility for climate breakdown: An equality-based attribution approach for carbon dioxide emissions. *The Lancet Planetary Health*, 4(9), e399-e404. [https://doi.org/10.1016/S2542-5196\(20\)30213-7](https://doi.org/10.1016/S2542-5196(20)30213-7)

Hickman, C., et al. (2021). Climate anxiety in children and young people and their beliefs about government responses to climate change: A global survey. *The Lancet Planetary Health*, 5(12), e863-e873. [https://doi.org/10.1016/S2542-5196\(21\)00278-3](https://doi.org/10.1016/S2542-5196(21)00278-3)

IPCC. (2021). *Climate Change 2021: The Physical Science Basis*. Intergovernmental Panel on Climate Change. <https://doi.org/10.1016/j.wace.2021.100373>

Karliner, J., Slotterback, S., Boyd, R., Ashby, B., & Steele, K. (2020). Health Care's Climate Footprint: How the Health Sector Contributes to the Global Climate Crisis and Opportunities for Action. *The Lancet Planetary Health*, 4(2), e74-e81. [https://doi.org/10.1016/S2542-5196\(20\)30121-3](https://doi.org/10.1016/S2542-5196(20)30121-3)

Mordecai, E. A., et al. (2020). Thermal biology of mosquito-borne disease. *Nature*, 580(7801), 222-224. <https://doi.org/10.1038/s41586-019-1401-9>

Moreno-Madrinan, M. J., & Turell, M. (2018). History of mosquito-borne diseases in the United States and implications for new pathogens. *Emerging Microbes & Infections*, 7(1), 1-7. <https://doi.org/10.1080/20477724.2018.1430785>

Rocklov, J., & Dubrow, R. (2020). Climate change: An enduring challenge for vector-borne disease prevention and control. *Nature Immunology*, 21(5), 479-483. <https://doi.org/10.1093/ije/dyz208>

Romanello, M., et al. (2021). The 2021 report of The Lancet Countdown on health and climate change: Code red for a healthy future. *The Lancet*, 398(10311), 1619-1662. [https://doi.org/10.1016/S0140-6736\(21\)01787-6](https://doi.org/10.1016/S0140-6736(21)01787-6)

Sheffield, P. E., & Landrigan, P. J. (2021). Global climate change and children's health: Threats and strategies for prevention. *New England Journal of Medicine*, 384, 1223-1231. <https://doi.org/10.1056/NEJMp2030821>

Shultz, J. M., et al. (2018). The trauma signature of Hurricane Maria: Mental health impacts of a catastrophic disaster in Puerto Rico. *Journal of Public Health Management and Practice*, 24(4), 375-378. <https://doi.org/10.1177/0033354918782674>

Vicedo-Cabrera, A. M., et al. (2020). The burden of heat-related mortality attributable to recent human-induced climate change. *The Lancet Planetary Health*, 4(5), e224-e235. [https://doi.org/10.1016/S2542-5196\(20\)30110-9](https://doi.org/10.1016/S2542-5196(20)30110-9)

Watts, N., et al. (2021). The 2021 report of The Lancet Countdown on health and climate change: Responding to the health risks of climate change. *The Lancet*, 398(10311), 1619-1662. [https://doi.org/10.1016/S2542-5196\(21\)00237-6](https://doi.org/10.1016/S2542-5196(21)00237-6)

Zhao, C., et al. (2019). Temperature increase reduces global yields of major crops in four independent estimates. *Proceedings of the National Academy of Sciences*, 114(35), 9326-9331. <https://doi.org/10.1073/pnas.1701762114>