

Climate Change and Global Health Governance in Relation to the Global South and the Global North

Vivek Nenmini Dileep*

Abstract

This essay attempts to piece together the main trajectories of climate change and global health governance starting with the historical connectedness of the idea of the global. While the Global South and the Global North constitute key concepts in the approach to global governance of key issues such as climate change and health governance, this essay attempts to locate the historical course undertaken by both concepts within the context of colonialism and postcolonialism in the unequal exchanges between these geopolitical entities. The essay argues that the hegemonic relationship between the Global North and South is traceable to colonialism and its epistemic vestiges (manifest, for instance, through state laws and concerns of security) that have an adverse impact on the countries of the Global South where health and climate change governance is concerned. The essay suggests that the majority of the socioeconomic issues currently plaguing the Global South can be attributed to colonialism and imperialism, which were supported in many parts of the world in the 19th and 20th centuries, as well as to the neocolonial and commercial strategies of extractive and exploitative capitalism of the 21st century. The costs of these changes must be considered in the context of a long-standing theme of the Global North's exploitation of the environment and the people of the Global South, particularly in terms of heritage loss, loss of biodiversity, extreme weather conditions, and even health emergencies like the COVID-19 pandemic. The essay concludes by advocating for a greater inclusion of the Global South in the governance of climate change through hybrid institutional complexes (HICs) in governing the global commons.

Keywords: Climate Change – Colonialism – Global Health Governance – Politics of Global Health.

CONTENTS: 1. Introduction. 2. Overview of Literature. 3. Global North/South, Legacies of Colonialism and the Politics of Climate Change. 4. State and Security in the Global South. 5. Conclusion.

^{*} PhD Candidate at the Department of Political Science, University of Hyderabad. The author wishes to thank the editorial team at NAD and two anonymous referees for their helpful suggestions on the essay. The essay was submitted to double blind peer-review. Member of the Editorial Team who oversaw the essay: Laura Corti.

1. Introduction

In November 2021, in a mid-term evaluation for an introductory course on "Fundamentals of Political Science" that I teach to undergraduate students of law, one of the questions I had posed was the following: explain the heavy "luggage" carried by the Global South in the context of a cartoon by Rohan Chakravarty in his comic-strip *Green Humour*¹. The Global South, represented by a dark-skinned lady in a traditional flowery *gomesi* (full length colorful garment worn by women in sub-Saharan Africa), is shown carrying a huge rucksack with the words "climate change, droughts, floods, livelihood loss, social injustices, heritage loss and biodiversity loss" emblazoned on it. As she awaits at the entrance for delegates, she is accosted by the Global North, represented by a spry white man with a light suitcase on wheels that has the words "The 1.5°C Challenge" embossed on it. He goes on to state, «Oh, I always travel light»². This cartoon appeared as part of a series by the cartoonist on the 26th United Nations Climate Change Conference of the Parties (COP26), held between October 31st and November 13th, 2021, in Glasgow, Scotland.

One of the students (of nearly half of the class who attempted the question), explained the cartoon in simple terms: «The cartoon depicts the amount of issues that we have in the world and the leaders who hardly make any effort to solve them». Another student opined that the "luggage" reflects the «problems faced by countries in the Global South due to climate and ecological factors, with these countries bearing the brunt of the problems while the Global North is singularly focused on reducing global temperatures by 1.5°C, without bearing any responsibility». Yet another student noted, «problems that are unattended to by society, problems which they carry with them, things which happened in the past». The students' statements suggest how the adverse effects of climate change, that are becoming more evident on the socioeconomic structures and systems which regulate life on our planet, are continuing to be ignored by our political leaders. They also reflect how the Global North's target of mitigating global warming through technocratic solutions that reduce global temperatures by 1.5°C will, in all likelihood, ignore the costs of the multi-dimensional issues the Global South faces (as is evident in the heavy luggage in the cartoon). Many of these multi-dimensional issues are broadly a result of the continuing effects of colonialism in postcolonial countries of the Global South. Along with war and violence, climate-induced migration, as a result of human insecurity, has led to 40.5 million people being internally displaced in 2020³. Further, an unending COVID-19 pandemic, increased conditions of planetary stress, escalating cases of non-communicable diseases (NCDs), and multiple other vector-borne diseases have severely strained health systems across the globe. To this effect, climate change will only exacerbate the existent inequities in health systems in a colossal manner, further compounding and altering existing socioeconomic inequalities. In this regard, the idea of reducing global temperatures by 1.5°C can only be seen as a temporary solution which aids the position of the industrialized Global North. It is my argument that the

¹ R. Chakravarty, *Green Humour*, Cartoons on COP 26, October 28th, 2021, greenhumour.com/2021/10/cartoons-on-cop-26.html.

 $^{^{2}}$ *Ibidem*.

³ Internal Displacement Monitoring Center (IDMC), *Global Report on Internal Displacement*, 2020, internal-displacement.org/sites/default/files/publications/documents/grid2021_idmc.pdf.

majority of the socioeconomic complications seen today in the Global South can be linked to anthropogenic climate change, induced by past socio-political arrangements such as colonialism and imperialism that were prompted in many parts of the globe in the 19th and 20th centuries, and the neocolonial and commercial practices of extractive and exploitative capitalism of the 21st century. The costs of these changes, especially in terms of heritage loss, loss of biodiversity, extreme weather conditions and even health emergencies such as the COVID-19 pandemic, must be seen in this context of a long running theme of the Global North's exploitation of the environment and the people of the Global South.

The historical domination of the Global North is contiguous in the policies adopted by global governance institutions and in the mechanisms revolving around climate change governance. To cite an example, on December 13th, 2021, the United Nations Security Council (UNSC) rejected, in what the body itself called a "contentious meeting"⁴, a draft resolution that would have integrated climate-related security risk as a central component of United Nations conflict-prevention strategies aiming to help counter the risk of conflict relapse. India and Russia voted against the resolution. India's representative, while stressing that his country was «second to none in addressing climate action and climate justice»⁵, stated that «the Council is not the place to discuss either issue», adding that «an attempt to link climate with security obfuscates a lack of progress on critical issues under the United Nations Framework Convention on Climate Change (UNFCC) process⁶. The representative further pointed out that the resolution in its current form «would constitute a step backward from collective resolve to combat climate change»⁷. Such policies do not adequately address the historicity of how industrial development in the Global North came about. The very fact that they perceive the Global North as precursor of climate change activism and governance overlooks the historical, material, and epistemic exploitation of the Global South.

The two events narrated above are linked through the fact that despite decades of scientific work, with evidence pointing to gloomy prognoses as a result of anthropogenic interference with the climate, governments across the globe (especially in the Global North) have failed to act to the degree and proportion of policy efforts and action required.

2. Overview of Literature

In 2009, the Lancet and University College London Institute for Global Health Commission described «Climate change [as] the biggest global health threat of the 21st century»⁸. The World Health Organization (WHO) has categorically termed climate

⁴ United Nations Meetings Coverage and Press Releases, Security Council Fails to Adopt Resolution Integrating Climate-Related Security Risk into Conflict-Prevention Strategies, 8926TH MEETING (AM), SC/1473213, 2021, available at the website press.un.org/en/2021/sc14732.doc.htm.

⁵ Ibidem.

⁶ Ibidem.

⁷ Ibidem

⁸ A. Costello, M. Abbas, A. Allen, S. Ball, S. Bell, R. Bellamy, S. Friel, N. Groce, A. Johnson, M. Kett, M. Lee, C. Levy, M. Maslin, D. McCoy, B. McGuire, H. Montgomery, D. Napier, C. Pagel, J. Patel, J.A.P. de Oliveira, N. Redclift, H. Rees, D. Rogger, J. Scott, J. Stephenson, J. Twigg, J. Wolff, C. Patterson *Managing the health effects of climate change: Lancet and University College London Institute for Global Health Commission*, in *The Lancet*, No. 9676, 2009, 1693-1733.

change as the single biggest health threat facing humanity⁹. The deleterious effects of anthropogenic climate change can be mitigated by societies adapting to its effects and reducing greenhouse gas (GHG) emissions¹⁰. While this will reduce the rate and magnitude of climate change, the «capacity to adapt and mitigate depends on socioeconomic and environmental circumstances, and the availability of information and technology»¹¹. As of 2013, a conservative estimate of 5.4 million disability adjusted life years (DALYs)¹² had been attributed to climate change, with 99.7 percent cases traced to low- and middle-income countries across the globe¹³.

Building community resilience to climate-related risks, that may be caused by either direct harms from hazards such as extreme heat and flooding, or indirect impacts of hazards mediated through the built, social, and natural environment, is a major goal of climate adaptation, which the Intergovernmental Panel on Climate Change (IPCC) defines as «seeking to moderate or avoid harm or exploit beneficial opportunities»¹⁴. While there is plenty of information and data on climate adaptation mitigation measures, including financing and delivery measures to reduce the carbon footprint of humanity and achieving the United Nations Sustainable Development Goals (SDGs) by 2030¹⁵, much less information is available about the costs and effectiveness of adaptation measures. In providing a policy framework that is regionally responsive to the effects of climate change, Erica Bell advocated a whole-of-systems strategy that is deployed across the entire core operational areas of a health service, including service governance and culture, service delivery, workforce development, asset management, and financing¹⁶. In reviewing invisibilities linked to the marginalization of peoples (such as the migrant population), places (populated by indigenous communities), diseases (neglected tropical diseases, mental health), Luke Parry et al., assert that structural power and resource disparities are what determine these invisibilities¹⁷. Drawing on Michel Foucault's idea of governmentality on the state's interest and its close involvement in the everyday lives of people, as well as James Scott's notion of data gathering as a way for the state to implement effective interventions in public policy, the authors highlight that whether or

⁹ World Health Organization, *Protecting health from climate change: vulnerability and adaptation assessment*, 2013, apps.who.int/iris/bitstream/handle/10665/104200/9789241564687_eng.pdf?sequence=1&isAllowed=y.

¹⁰ Intergovernmental Panel on Climate Change, *Climate change 2007: Impacts, Adaptation and Vulnerability*, Cambridge University Press, 2007. At ipcc.ch/site/assets/uploads/2018/03/ar4_wg2_full_report.pdf.

¹¹ A. Costello et al., Managing the health effects of climate change: Lancet and University College London Institute for Global Health Commission, cit.

¹² The DALY is defined by the WHO as «the loss of the equivalent of one year of full health. DALYs for a disease or health condition are the sum of the years of life lost to due to premature mortality (YLLs) and the years lived with a disability (YLDs) due to prevalent cases of the disease or health condition in a population». For more information, consult the WHO's Global Health Observatory website at who.int/data/gho/indicator-metadata-registry/imr-details/158.

¹³ Global Health Observatory, *Climate change attributable DALYs* (*'000*), World Health Organization, 2013, who.int/data/gho/data/indicators/indicator-details/GHO/climate-change-attributable-dalys-(000).

¹⁴ Intergovernmental Panel on Climate Change, *Annex II: Glossary*, in *Climate change 2014: Synthesis report*, 2014, ipcc.ch/site/assets/uploads/2019/01/SYRAR5-Glossary_en.pdf.

¹⁵ Intergovernmental Panel on Climate Change, Climate change 2007: Impacts, Adaptation and Vulnerability, cit

¹⁶ E. Bell, *Readying Health Services for Climate Change: A Policy Framework for Regional Development*, in *American Journal of Public Health*, Vol. 101, 2011, 804-813. See the website ncbi.nlm.nih.gov/pmc/articles/PMC3076409/.

¹⁷ L. Parry et al., *The (in)visible health risks of climate change*, in *Social Science & Medicine*, Vol. 241, 2019, sciencedirect.com/science/article/pii/S0277953619304423#sec2.

not being noticed by the state is advantageous depends on the context, including, in this case, climate health risks faced by marginalized communities outside the purview of the state. They highlight that these "invisibilities" need to be taken into account while developing policy frameworks that avoid the systematic biases in scientific and political understandings of climate health risks.

A climate resilient health systems approach may help to bridge this gap by bringing the climate change and health discourses together. This will play a key role in humanity's ability to adapt to and mitigate climate change. While the WHO's climate resilient health systems framework¹⁸ paved the way for greater linkage between climate change and operationalizing health systems across the globe, better scientific modelling of the relationship between climate change and health, especially focusing on communities in the Global South, is crucial. The complexity in assessing the burden of disease linked to climate change at a global level is indeed challenging, given the plethora of health outcomes and variations in contributing factors that determine the health of an individual. However, detailed estimates are critical on account of three factors. First of all, the estimates will help enhance our understanding of the magnitude of effects of climate change on health if we fail to carry out mitigation measures; second, it will aid formulation of inclusive policies to improve adaptation; and finally, the estimates will bolster information sharing through dissemination of knowledge and experiences in coping strategies to the communities that are most at risk¹⁹.

Every country, across the globe, will be impacted by the health effects of climate change, but studies have shown that low-income countries, most of which are geographically located in the Global South, will be the most affected²⁰. Evidence-based solutions, focusing on policies that address climate change and health across all nations (including at the national and local levels) could help with the mitigation and adaptation strategies for impending climate threats. In this context, public health is deemed crucial in determining how to respond to potential threats, as well as in planning and implementing processes and coordinating the involvement of all key stakeholders, including communities affected by climate change²¹.

With respect to the politics and history of climate change, a number of books and articles have been published in the past decade. Amitav Ghosh uses the three topics of literature, history, and politics to reflect on our "deranged" forms of political and socioeconomic organization in order to make sense of the current crisis with respect to climate change²². Noami Klien's *This Changes Everything: Capitalism vs. the Climate* blisteringly takes down giant capitalistic corporations and their need for energy guzzling

WHO, *Operational framework for building climate resilient health systems*, 2015, who.int/publications/i/item/9789241565073.

¹⁹ K.L. Ebi, J.J. Hess, P. Watkiss, *Chapter 8: Health Risks and Costs of Climate Variability and Change*, in *Injury Prevention and Environmental Health - 3rd edition*, 2017, ncbi.nlm.nih.gov/books/NBK525226/.

²⁰ S.S. Roy, Climate Change in the Global South: Trends and Spatial Patterns, in Linking Gender to Climate Change Impacts in the Global South, Springer, 2018.

²¹ H. Frumkin, J. Hess, G. Luber, J. Malilay, M. McGeehin, *Climate change: the public health response*, in *American Journal of Public Health*, Vol. 98, 2008, 435-445, ajph.aphapublications.org/doi/10.2105/AJPH.2007.119362.

²² A. Ghosh, *The Great Derangement: Climate Change and the Unthinkable*, University of Chicago Press, 2016.

systems in her polemic on global warming and climate change²³. Dryzek et al.²⁴ provides an overview evaluating the social, political, moral, and economic effects of climate change as well as the variety of answers to this issue. It specifically highlights the "wickedness" of climate change as a particularly difficult issue of unprecedented scope, breadth, and complexity, and suggests that significant change in our governments, businesses, and social and political relationships is necessary if we are to take climate change seriously.

Usually addressed inconspicuously in the literature on health and climate change, we need to turn to the historical politics in order to gauge and understand how the Global North-South polarities –material and otherwise – came to be.

3. Global North/South, Legacies of Colonialism and the Politics of Climate Change

While the terms Global North and Global South are not uncontroversial²⁵, for the purposes of this essay I am using them as defined by Arkadiusz Michał Kowalski in his chapter *Global South-Global North Differences* from the book *No Poverty: Encyclopedia of the UN Sustainable Development Goals*²⁶. In his essay, Kowalski states that «The Global South is a term that refers to developing countries located mostly in the southern hemisphere, with generally low-income levels and facing different structural problems»²⁷. While on the other hand, «The Global North is a term that refers to developed countries concentrated in the northern hemisphere, characterized by high levels of income, technological advancement, well-developed infrastructure, and macroeconomic and political stability»²⁸. Hence, the terms Global North/South in this context are not as contentious as many scholars make it out to be. The terms reflect, in fact, the immense degree of disparity in political, social and economic development between the two geographical categories. What is not implicit in this categorization is however the fact that the development experienced by the Global North is in large part a result of the benefits it has accumulated through colonization and its continuing legacies.

The Global South is also burdened by what Amitav Ghosh in his 2021 book, *The Nutmeg's Curse: Parables for a Planet in Crisis*, points out as the «violent trajectory of the colonial mindset that justifies the exploitation of human life and the natural environment, and which dominates geopolitics to this day»²⁹. Colonialism, and by extension capitalism, has seen multiple mutations since the early 17th century, when the Vereenigde Oostindische Compagnie (VOC) (the Dutch East Indies Company) reached the Banda archipelago in Indonesia in search of a spice – which in medieval Europe was so highly valued, that a handful of it was sufficient to purchase a palatial house or a ship – the nutmeg. They also set in motion the Wanton Massacre of the

²³ N. Klein, *This Changes Everything: Capitalism vs. the Climate*, Simon and Schuster, 2014.

²⁴ J.S. Dryzek, R.B. Norgaard, D. Schlosberg, *Climate-Challenged Society*, Oxford University Press, 2013.

²⁵ A. Sajed, *From the Third World to the Global South*, E-International Relations, 2020, https://www.e-ir.info/2020/07/27/from-the-third-world-to-the-global-south/

²⁶ A.M. Kowalski, *Global South-Global North Differences*, in W.L. Filho et al. (eds.), *No Poverty, Encyclopedia of the UN Sustainable Development Goals*, 2020.

²⁷ Ibidem. ²⁸ Ihidem.

²⁹ A. Ghosh, *The Nutmeg's Curse: Parables for a Planet in Crisis*, Penguin Random House India, 2021.

Bandanese in 1621. Only 530 individuals³⁰ survived the massacre, and all of them were brought back as slaves to set up nutmeg plantations, as only they had the much needed "lie of the land" for nutmeg cultivation. This eventually led to the Dutch monopolising the nutmeg trade. The "nutmeg's curse", faced by the Global South, in the current context can also help frame the climate change security dilemma more effectively. As Amitav Ghosh goes on to describe, «And should you then break the nut open, you will see inside something akin to a geological structure — except that it is composed of the unique mixture of substances that produces the aroma, and the psychotropic effects, that are the nut's very own superpowers»³¹. He elaborates, «Like a planet, a nutmeg too can never be seen in its entirety at one time. As with the moon, or any spherical (or quasi-spherical) object, a nutmeg has two hemispheres; when one is in the light, the other must be in darkness — for one to be seen by the human eye, the other must be hidden»³².

With respect to climate change, it is quite clear that the Global South has been the darker and hidden hemisphere to the light of the more visible and wealthier Global North. The dominant nature of international institutions such as the International Monetary Fund³³ (IMF) and the World Bank³⁴ (WB) in shaping policies³⁵ in relation to global governance of renewable energies is the more recent shift³⁶ witnessed in a series of historical shifts since the discovery of fossil fuels by colonial powers in various parts of Africa, Asia, and Latin America³⁷. Resource shortage issues in what is currently the Global North have been dealt with through colonial conquest and economic integration since the Age of Discovery, when European explorers started establishing commercial outposts and claiming colonies in the 1400s. For hundreds of years, Germany and the United States have purchased raw materials from southern nations at a lower price than they pay for the finished goods they import for their own use. As a result, there has been rapid progress in the Global North, while political instability and poverty and inequality spread its tentacles in the Global South – all in the background of accelerated global climate change.

These methods stripped the countries of the Global South of their natural resources, impoverishing them. After World War II, the establishment of global financial institutions further entrenched them in a cycle of unequal exchange. For instance, both the IMF and the WB are dominated by representatives from the industrialized Global North. Their

³⁰ V.C. Loth, *Pioneers and Perkeniers: The Banda Islands in the 18th Century*, in *Cakalele*, Vol. 6, 1995,13-35.

³¹ A. Ghosh, *The Nutmeg's Curse: Parables for a Planet in Crisis*, Penguin Random House India, 2021, 10.

 $^{^{32}}$ Ibidem.

 $^{^{33}}$ International Monetary Fund (IMF), The Economics of Climate, Finance and Development, 2019, imf.org/external/pubs/ft/fandd/2019/12/pdf/fd1219.pdf

World Bank (WB), *Climate Finance 2021*. For more information see the docs.worldbank.org/en/doc/031d77b68937409e4581413cf920c1c9-0020012022/original/WB-FY21-Project-list-flyer.pdf.

³⁵ M.J. Burke, J.C. Stephens, *Political power and renewable energy futures: A critical review*, in *Energy Research & Social Science*, Vol. 35, 2018, sciencedirect.com/science/article/pii/S2214629617303468.

³⁶ L. Hook, H. Sanderson, *How the race for renewable energy is reshaping global politics*, in *FT Magazine*, 2021, ft.com/content/a37d0ddf-8fb1-4b47-9fba-7ebde29fc510.

³⁷ P.T. Grenier, *How colonialism's legacy makes it harder for countries to escape poverty and fossil fuels today* in *The Conversation*, 2021, theconversation.com/how-colonialisms-legacy-makes-it-harder-for-countries-to-escape-poverty-and-fossil-fuels-today-159807.

global policy formulations adhere to protecting the profiteering interests of large fossil fuel and energy companies based in these industrialized countries, and securing energy demands of the former colonial powers, such as the United States, United Kingdom, France, Holland and Spain³⁸. The free trade agreements (espoused by the international institutions, such as the IMF and WB) between former colonies (now developing countries) in the Global South only further prove the nexus among the former colonial powers to secure their energy requirements. The IMF and the WB, also in large part, focus solely on the economic perspectives of climate change³⁹, putting forward solutions to the harmful effects of climate change by adopting creative financial solutions such as carbon credits, carbon pricing strategies, climate change adaptation financing⁴⁰ and smart technologies that hardly address the socio-political root of climate change issues faced by countries in the Global South.

The hegemonic tendencies effected by colonialism have also percolated into the area of Global Health Governance, to the detriment of countries in the Global South. Mainstream ideas of global health continue to reflect the hegemonial notions inherited from colonial medicine, including primary concerns such as retaining monopoly in trade of essential medicines, restrictions on intellectual property rights, focus on infectious diseases, and pushing the securitization of health 41. Global health strategies that are led by the richer part of the world reproduce the exact same processes that have led to their original higher levels of development, aside from generating unequal global distribution of resources including, among other resources, medical/healthcare expertise and biomedical substances. The "decolonize global health movement" is currently making a long overdue dent within these mainstream perspectives. It calls for decolonizing medicine and global health, and the larger aim of the project is to realign the socioeconomic and political context of the globe, including structures and processes «that address the whole spectrum of health determinants»⁴², viz., political, social and economic determinants of health. The movement, which has participation by academics and researchers mainly based in the Global North, notwithstanding aims to identify structural biases in global health. They also aim to counter certain wrongs that knowledge providers and recipients encounter as a result of these biases in the processes involved in knowledge generation and application within global health.

The WHO's climate resilient health systems framework⁴³ globally set the stage for stronger networks between operationalizing global health systems and combating climate change. Further, a large body of evidence now shows that climate action aligned with the

³⁸ H. Fofack, Overcoming the colonial development model of resource extraction for sustainable development in Africa, in Brookings Africa in Focus, 2019, brookings.edu/blog/africa-in-focus/2019/01/31/overcoming-the-colonial-development-model-of-resource-extraction-for-sustainable-development-in-africa/.

³⁹ International Monetary Fund, *The Economics of Climate, Finance and Development*, cit., 6.

⁴⁰ World Bank, Climate Finance 2021, cit., 1.

⁴¹ S. Gill, S. Benatar, *Global Health Governance and Global Power: A Critical Commentary on the Lancet-University of Oslo Commission Report*, in *International Journal of Health Services*, No.2, 2016, 346-365. At pubmed.ncbi.nlm.nih.gov/26883181/.

⁴² O.F. Mogaka, J.Stewart, E. Bukusi, *Why and for whom are we decolonising global health?* in *The Lancet Global Health*, No. 10, 2021, thelancet.com/journals/langlo/article/PIIS2214-109X(21)00317-X/fulltext.

⁴³ World Health Organization, Operational framework for building climate resilient health systems, cit.

Paris Agreement (2015)⁴⁴ targets would save millions of lives due to improvements in air quality, diet, and physical activity, among other benefits. This can be achieved by promoting the health benefits of climate policy and action, such as building resilient health systems and measuring the benefits of better health through climate policy and action at all levels of governance. It will also have to bestow individuals with the human right to a safe, clean, healthy, and sustainable environment, and adopt policies and processes that safeguard this right. The focus on "human right" as a primary factor in climate change policy and processes inevitably brings us to the question of security and where securitization stands in relation to mental and physical well-being.

4. State and Security in the Global South

In order to reconceptualize global (and planetary) health the right-side-up, as well as to avoid the impending climate change doomsday scenario⁴⁵, there is a need to go beyond the trope of security and global governance and policymaking by the few. Security, when envisaged as a primary concern for understanding world politics and as the means to survival, continues to emphasize the fundamental role of the state. During the COVID-19 pandemic in India, for example, a colonial era law, the Epidemic Diseases Act of 1897 (EDA)⁴⁶ – first enacted to tackle the bubonic plague in Bombay in former British India – was used to empower the Indian state to adopt measures including imposing a "total lockdown" to ostensibly securing public safety and preventing the further outbreak of COVID-19 cases. The result, however, was that a majority of economically backward Indian citizens were pushed into greater poverty, due to the veritable absence of economic activity which had earlier provided a source of livelihood. Such laws point towards the colonial legacies adopted by the state to the detriment of its citizens. By engendering such antiquated laws, the onus of maintaining "security" for the larger benefit of society is deemed to be seen within the "good governance" prescriptions of the Global North, who attempt to put things in order in the "unruly" South.

If climate change were to be brought under the UNSC, the governing mechanisms would further be restricted to the permanent five states and not the more democratic structure of the UNFCC. Breaking the deadlock requires a more inclusive system which emphasizes the participation of heterogeneous bodies from across the globe – both in decision making and implementation. This has been characterized as the "hybrid institutional complexes" (HICs) in global governance⁴⁷. Kenneth W. Abbott and Benjamin Faude, the proponents of HICs, in their 2022 article in *The Review of International Organizations*, describe HICs as being more heterogeneous, which include interstate, intra-state, public-private and private transnational institutions, both formal and informal in governing issue areas faced by global politics today. While the governance

⁴⁴ United Nations Framework Convention on Climate Change (UNFCC), *Paris Agreement* of 2015. The English version can be found at unfccc.int/sites/default/files/english_paris_agreement.pdf.

⁴⁵ O. Milman, A. Witherspoon, R. Liu, A. Chang, *The climate disaster is here*, in *The Guardian*, 2021, theguardian.com/environment/ng-interactive/2021/oct/14/climate-change-happening-now-stats-graphs-maps-cop26.

⁴⁶ Ministry of Law and Justice, Government of India, *Epidemic Diseases Act (EDA)*, 1897, legislative.gov.in/sites/default/files/A1897-03.pdf.

⁴⁷ K.W. Abbott, B. Faude, *Hybrid institutional complexes in global governance*, in *The Review of International Organizations*, No.2, 2021,263–291, pubmed.ncbi.nlm.nih.gov/35722451/.

model of "multistakeholderism" also claims to bring together all concerned stakeholders, the hybrid institutional complex is more broad-based and includes actors who have been hitherto marginalized⁴⁸.

Adopting alternate approaches to climate change, health security and policy making by acknowledging the «context of hybridity of political and social orders»⁴⁹ (state and non-state actors outside the institutionalized set up) in postcolonial countries would be a start. By way of example, let's look at the incidence of noncommunicable diseases (NCDs). NCDs cause 41 million deaths annually worldwide, with 76% of the cases from the Global South⁵⁰. The situation has further worsened due to treatment delays caused by COVID-19. Governance for this area is confined to select top-down policy decrees from international institutions and powerful developed countries. National states and regions in the Global South are sidelined in policy making, with an even lesser space for participation for non-state actors such as advocacy groups.

Recent studies have highlighted the reasons for prioritizing issues like AIDS and other health security concerns over NCDs in global health policy and funding⁵¹. More recently, in the wake of the COVID pandemic, pandemic preparedness and response has become a top global health governance priority, relegating something as crucial as universal healthcare to the backburner (even if some try to link it to global health security). These examples underscore the political role of epistemic communities in framing issues in the Global South in a manner that advances the agenda of dominant actors.

A hybrid system of governance will help in structurally changing the primary role of the state (in its modern from as conceptualized after Max Weber) to also include non-state actors such as social care workers, patient's rights groups, affected communities and others. Focusing more on the research perspective on governance and policy, the interdisciplinary nature of Health Policy and Systems Research (HPSR) makes it well positioned to tackle the complexity of climate change while also improving the analysis of linkages between health and climate change within the larger socioeconomic and historical-political context. While the new Health Systems Global (HSG) Thematic Working Group (TWG), "Climate Resilient and Sustainable Health Systems" between this angle, it would be good if the HSG (in a separate TWG perhaps?) also acknowledged and pushed for the decolonization of global governance, including a greater role for non-state actors, especially marginalized voices from the Global South.

In order to integrate climate change mitigation with policies that promote public health care leading to universal health coverage, global governance must also include the marginalized voices from the Global South. Given the growing calls to decolonize institutions, global governance mechanisms must pay heed to them to avoid an impasse

n. 2/2022

⁴⁸ H. Bhakuni, S. Abimbola, *Epistemic injustice in academic global health*, in *The Lancet Global Health*, No. 10, 2021, thelancet.com/journals/langlo/article/PIIS2214-109X(21)00301-6/fulltext.

⁴⁹ K. Danso, K. Aning, African experiences and alternativity in International Relations theorizing about security, in International Affairs, No. 1, 2022, 67–83.

⁵⁰ World Health Organization, *Noncommunicable Diseases Factsheet*, 2022. For more information: who.int/news-room/fact-sheets/detail/noncommunicable-diseases.

⁵¹ D. Reubi, C. Herrick, T. Brown, *The politics of non-communicable diseases in the global South in Health and Place*, Health & Place, Vol. 39, 2016, 179-187, ncbi.nlm.nih.gov/pmc/articles/PMC4889786/.

⁵² Health Systems Global, *Climate Resilient and Sustainable Health Systems*, available at healthsystemsglobal.org/thematic-groups/climate-resilient-and-sustainable-health-systems/.

on the crucial issue of climate change and health for all. The impending climate disaster and the lives of nearly three billion people⁵³ cannot be left to the mercy of a select few.

5. Conclusion

To conclude, a comprehensive assessment of current and future climate-related burdens of disease is urgently required. Policy making and developing resolutions on health protection from climate change, strengthening national health emergency and disaster management capacities for managing the risks of meteorological and other extreme events, building healthy cities, implementing nature based solutions, health system strengthening, implementation of International Health Regulations which clearly define the international responsibilities and duties of the WHO's state actors as well as non-state actors, are necessary to mitigate the impacts highlighted above⁵⁴.

Further, it will also require bolstering and increasing the scale of cooperation between the health, socio-economic, and climate change sciences, to help close knowledge gaps and build research capacities⁵⁵.

The need for wealthy nations in North America and Europe to assist developing nations in coping with the effects of climate change is greater than ever because of their influence, money, and responsibility for the global warming catastrophe. The most vulnerable nations situated in the Global South have been the most ambitious in addressing climate change, despite their tiny role contributing to it; nonetheless, they are incapable of preventing the catastrophe on their own. This is not only the right thing to do morally, but it will also lessen future difficulties and expenses, such as catastrophe relief operations and the migration of climate refugees forced to flee their homes when they become uninhabitable.

Communities at the forefront of climate change should not only be at the center of the global effort to combat global warming, but also be allowed far more room to express their opinions. In order to eliminate global inequality, it is necessary for actors from the Global South to actively participate in global action and partnership decisions, particularly those pertaining to climate change.

Additionally, this means that those in the Global North must encourage the active inclusion of actors from the Global South. The voices of the Global South are still too frequently ignored today. Key viewpoints are absent because there aren't enough local actors involved in decision-making processes. Local communities in the Global South have a wealth of traditional and practical knowledge about nature and how to coexist with it. Indeed, including them can increase understanding of climate change and aid in forming policy. This will encourage changes in perspectives to current epistemic challenges relating to health governance, and enable us to see how closely climate change impacts health.

With the increased risk to the lives and well-being of billions of people, it is now more than imperative that communities, governments, international institutions, non-government organizations (NGOs) and academics from all disciplines join hands through

⁵³ O. Milman, A. Witherspoon, R. Liu, A. Chang, *The climate disaster is here*, cit.

⁵⁴ World Health Organization, Operational framework for building climate resilient health systems, cit.

⁵⁵ World Health Organization, COP26 Special Report on Climate Change and Health: The Health Argument for Climate Action, 2021.

Nuovi Autoritarismi e Democrazie: Diritto, Istituzioni, Società

a cross-sectoral alliance to negotiate solutions, manage and adapt humanity to the impact of climate change on health. The health systems approach can possibly provide the initial steps to reimagining the future, while being cognizant of climate change as well as the health and wellbeing of everyone on Planet Earth – most essentially for the Global South. Ineffectual socioeconomic structures, especially in the Global South, where colonial processes still affect health governance through a combination of unsuccessful politics, economics and social policies which do not factor in climate change threaten the potential lifespans of individuals across the globe.