

MARCH, 2020

Community of Practice Update

A tale of two crises

By Vic Neufeld & Katrina Plamondon

Undoubtedly, the COVID-19 situation is occupying much of your attention in the last few weeks—and so it should. But how shall we, as a community committed to planetary health, think about this new “crisis” in the context of the on-going (and slower moving) climate change crisis. The purpose of this note is two-fold: to highlight some interesting recently published perspectives on the interaction between these two phenomena; and to invite you to share your views on how the COVID-19 story is influencing your thinking.

Two perspectives

Earlier this month, Thomas Homer-Dixon (Executive Director of the soon-to-be announced *Cascade Institute* at the Royal Roads University) wrote an opinion piece in the *Toronto Globe and Mail* entitled:

[Coronavirus will change the world. It might also lead to a better future.](#)

He makes the point that the COVID-19 situation is a “global tipping event”, characterized by two increasing global phenomena—high connectivity and high uniformity that make us all more susceptible to rapidly cascading change, and at increased risk of “synchronized crises”. He goes on to suggest that the coronavirus pandemic could be viewed as a collective problem that “requires global collective action—just like climate change”.

In his March 22 column in the *Victoria Times Colonist*, our colleague Trevor Hancock refers to recent observations that dramatic reductions in air pollution and carbon emissions have been noted in China and Italy, and “this will soon become worldwide”. A Stanford University economist has suggested that “reduction in air pollution in China might have already saved more lives than the COVID-19 epidemic had cost”. Trevor concludes his column with this suggestion: *“It might be that with this combination of reduced consumption and reduced environmental harm, coupled with societal commitment to ensuring the meeting of basic needs for all, we will find ourselves unintentionally creating the well-being economy we need in the 21st century.”*

COVID-19 also presents important opportunities to examine and reconstruct the equity choices that shape our world. Not all countries will experience this pandemic in the same ways. In Canada, healthcare systems are bracing in anticipation of an extreme burden of demand. Our municipal, provincial, and federal public health and political leaders are all working together. They are communicating with their constituents daily. Policies and mechanisms are rapidly being put into place to accommodate for the consequences of a halted economy. And still, we are fearful of our uncertain futures. In contrast, colleagues in the Global South are bracing for complete collapse. Their choices will not be whether or not to stay home, but rather whether or not to risk one’s own life. In settings where healthcare systems are drastically under-resourced, without basic supplies or health professionals, those who become sick enough to need care will likely not get it. Fatality rates from

<https://bcccoalitioninstitute.com/>

Welcome Arnold Okpani as our new SYPN rep for UBC!



Arnold is a PhD candidate in the School of Population and Public Health, UBC. He received his medical degree from Ebonyi State University, Nigeria, and his MSc in Public Health in Developing Countries (now Public Health for Development) from the London School of Hygiene and Tropical Medicine, United Kingdom. He is a fellow of the International Program in Public Health Leadership of the Evans School of Public Policy and Governance of the University of Washington, Seattle. Arnold worked in primary health care systems development in Nigeria where he collaborated on a range of programs that spanned maternal and child health, research, health information systems, advocacy, and resource mobilization. He recently worked with the Centre for Health Economics in London on a multi-country research project focused on designing fit-for-purpose regulation for evolving health care systems. He is interested in the use of research evidence to support better priority-setting and resource use to improve lives in deprived communities.

Webinar

[Climate Change and Health: Working with First Nations](#)

March 31, Tuesday
10:30am PST/ 1:30pm EST

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COVID-19 will not be universal. Once this pandemic spreads through Africa, we can anticipate such a dramatic increase in case fatalities that the global average will increase by several percentage points. COVID-19 is a window into global inequities. This is the time to examine our equity choices, and to leverage the opportunities that Hancock and Homer-Dixon point to through an equity lens.

The CCGHR Principles for Global Health Research provide one useful framework for such a lens. Now is an opportune time to look at these principles, bring them into your classrooms and dinner tables, write to your political leaders—spark a dialogue about the world you'd like to see, and collectively, perhaps we can plant seeds for a more equitable one.

We **welcome** your comments and notes about your thoughts and experiences. In particular, we encourage those of you from home countries other than Canada (such as Nigeria, Uganda, Mexico, Brazil, etc.) to share your stories about how the COVID-19 situation is affecting your families and friends

Our BCCI 2 evaluation survey will be distributed soon!

Your willingness to provide feedback will help us gain a better understanding of the BCCI, including any challenges and recommendations.

Resource Library

Be sure to check out the [BCCI resource library](#) where you can find carefully selected readings, presentations, and session guides.