User insights for a climate change and health digital service

Current practice and perspectives from Local Authority Public Health professionals

February 2024

About this briefing

- **Who should read this?**

  Public Health, Knowledge Mobilisation, Behaviour Change, Academia, Research Funding Bodies.

- **Reading time:** 10 minutes

Executive Summary

Despite the growth in evidence on the health effects of climate change, information about climate and health are reported to not be easily accessible, or transferable to local contexts, by Local Authority Public Health professionals.

Interviews were conducted (n=13) to understand the perceived needs and challenges of Local Authority Public Health professionals when working on climate change and health. Interview-derived insights outline issues regarding organisational visibility, finding quality publications and research, being able to 'self-serve,' data integrity and accuracy, as well as information and data visualisation.

These insights inform the development of digital products and wider support services being developed, including a UKHSA climate change and health digital service.

"What is the evidence, and therefore, what are the recommendations flowing from that evidence? And that needs to be nationwide because we have to be in sync with other Authorities. We need to be seen to be doing what everyone else is doing."

"We'll have to go and search for what is available already. We don't want to recreate the wheel."

Background

The Centre for Climate and Health Security (CCHS) within the UKHSA was launched in October 2022 to lead efforts to protect health in the context of a changing climate. CCHS is working to ensure the health harms from climate change and adverse weather are minimised, and to improve health for all people, across current and future generations.

Climate change is a health security concern which is already impacting human lives and health in a variety of ways. Evidence on the health effects of climate change is substantial and growing, with impacts expected to be wide ranging, potentially significant and unequally distributed across communities[a]. Yet, there continues to be a window for action; many adverse health impacts are avoidable through mitigation or preventable through adaptation.

Policy and literature signal that information about climate and health are not easily accessible by Local Authority Public Health professionals, in addition to institutional, behavioural, and psychological barriers, resulting in a knowledge-action gap[bcde]. To address these challenges, a climate and health digital service is being developed by CCHS.

This briefing outlines current practice and perspectives from Local Authority Public Health professionals working on climate change and health. This work was derived from the 'discovery' phase of development, which took place in Autumn-Winter 2023.

Objectives

To explore the needs of Local Authority Public Health professionals as potential climate and health digital service users, the following objectives were identified:

- To understand users and their context
- To understand the network of users
- To understand the needs and challenges faced in relation to the stimulation of climate and health issues, mobilising research, and influencing or creating policy

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[a] UKHSA, 2023. Health Effects of Climate Change in the UK: state of the evidence 2023.

[b] Woodhall, S.C., Landeg, O. and Kavets, S., 2021. Public health and climate change: How are local authorities preparing for the health impacts of our changing climate? *Journal of Public Health*, vol. 43, no. 2, pp. 425-432.

[c] van Hove, M., Davey, P., and Gopfert, A., 2024. Role of public health professionals in the climate and ecological crisis: a qualitative study. *BMJ Open,* vol. 14, issue 1, doi: 10.1136/bmjopen-2023-076280.

[d] Jacobs, K.L. and Street, R.B., 2020. The next generation of climate services. *Climate Services*, *20*, p.100199.

[e] Boon, E., Wright, S.J., Biesbroek, R., Goosen, H. and Ludwig, F., 2022. Successful climate services for adaptation: What we know, don't know and need to know. *Climate Services*, *27*, p.100314.

Methodology

A non-probability purposive sampling approach was used to ensure representation across all English regions, different population characteristics (urban, rural, coastal, deprived) and types of Local Government organisations (county, district, unitary, metropolitan, London borough).

Contact was initiated through Directors of Public Health who were invited to participate or nominate relevant colleagues. Informed consent was obtained, and interviews (n=13) were conducted using discussion guides and recorded via Microsoft Teams. Interviews were transcribed then analysed using thematic analysis.
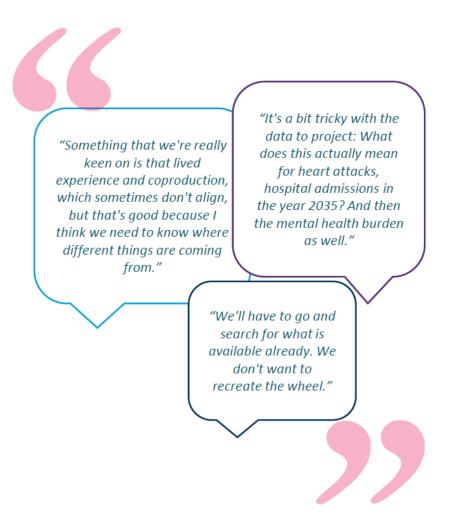
Findings

Analysis of the interview transcripts resulted in the following insights:

1. **Challenges** include being time-poor, competing priorities, limited funding, low subject matter confidence, and translating information to local contexts.

2. Wide and varied remits mean **users need to know 'enough'** rather than 'everything.' Having the correct degree of information and connections in place is more important.

3. Climate change and health feels like a **box-ticking exercise**, rather than a way of working.

"Housing, climate, green space, blue space, transport, town planning, tobacco control, food and obesity, and a bit of physical activity stuff thrown in as well. That's broadly my remit."

"Ensuring that what we are doing isn't having an adverse impact on a particular vulnerability or community."

"I'm trying to find my footing within the climate action and the sustainability part of that agenda, to understand how I weave the case together for health in that space and what my role is, in an area that's crowded with lots of different short, medium, long-term actors."

> *"Something that we're really keen on is that lived experience and coproduction, which sometimes don't align, but that's good because I think we need to know where different things are coming from."*

> *"It's a bit tricky with the data to project: What does this actually mean for heart attacks, hospital admissions in the year 2035? And then the mental health burden as well."*

> *"We'll have to go and search for what is available already. We don't want to recreate the wheel."*

4. Case studies from other Authorities was perceived as useful, time saving, especially avoiding duplication of effort. Users often **rely on unified thinking and activities across Authorities.**

5. Evidence is most useful when it reflects **long term issues**, is **flexible** to suit local levels, and discusses **additional impacts** (such as on wellbeing and mental health).

6. Part of the perceived role of Local Authority Public Health professionals involves promoting the message that climate change is everyone's concern, there are challenges and opportunities, and ensuring **integration into all activities**.

7. There is a perceived **imbalance of evidence** focused on Net-Zero initiatives, leaving climate and health outcomes relatively unknown.

8. Climate change issues are **seen as a problem for the future** in comparison to matters urgently affecting people, causing them to become deprioritised and hidden.

9. Policy direction would be at its most helpful if the evidence is **aligned with local-level plans** and with the climate and health prevention explained.

These qualitative findings have been used to develop Personas (p6 and p7); detailed, semi-fictional characters who describe a typical Local Authority Public Health professional working on climate change and health.

User Research: Personas

Alex – Public Health Consultant

"There can be stuff that's really quite complex, as long as we've got the ability to play with it and make it simpler, to share and tailor to different audiences. It's that flexibility to be able to tailor it locally which is incredibly valuable."

Behaviour/ Motivations

- Wants to embed climate change action across the local authority in the absence of statutory requirements.
- May not know what data they are looking for when starting their search for evidence.
- Wants to understand the science behind the evidence before they trust it.
- Concerned about worsening inequalities across local authority communities.
- Wants to be a source of information for other local authorities.

Sources of Evidence

- Email
- Fingertips
- Internet search engines
- Google scholar
- Cochrane Database of systematic reviews
- The Campbell collaboration
- Medline
- Embase
- Weather Health Alerting system
- Sports England: Active Lives
- National Child Measurement Programme
- Global Burden of disease
- Met Office
- The Lancet Commission
- PubMed
- Medical Research Council

Goals

- To have relevant local up to date plans which include climate and health recommendations.
- To embed sustainability and climate change actions in all areas of Public Health.
- To establish networks and channels between departments and other local authorities for sharing information.
- To influence private sector through recommendations on plans i.e. Planning permissions.

Pain Points

- Often overwhelmed when tasked with public health and climate work due to the complexity of the science and associated data.
- Lack of clear guidance or direction for creating climate change and health policy.
- Struggles translating climate change and health data to local level to make actionable strategies and plans.
- Struggles to predict what the impact of implemented climate and health actions may be.
- Creating the data is one challenge, keeping the data relevant and up to date is another.

Needs

- I need to view health and climate data which has been merged so that we can have more precise information when it comes to climate and health impacts.
- I need flexible data so that we can tailor it to local planning systems.
- I need help translating data and evidence into actionable plans so that it can be made relevant to local authorities.
- I need help implementing metrics for climate and health interventions so that we can ensure that we are reaching targets, observing co-benefits, and not worsening inequalities.
- I need data which is maintained and up to date so that it stays relevant, applicable, and which does not risk becoming obsolete.
- I need all local authorities to access and utilise the same data and evidence so that we are all cohesively acting together.

User Research: Personas

Ashley – Deputy Director of Public Health

"What are the top 10 things we should be doing from a policy point of view to really adapt to climate change?"

Behaviour/ Motivations

- Wants to embed climate change action across the local authority in the absence of statutory requirements.
- Looking for evidence that answers their questions and provides recommendations.
- Concerned about worsening inequalities across local authority communities.
- Looking for spaces and opportunities to embed climate change work into public health.

Sources of Evidence

- Email
- Newsletters
- Fingertips
- Internet search engines
- Google scholar

Goals

- To have relevant local up to date plans which include climate and health recommendations
- To embed sustainability and climate change actions in all areas of Public Health
- To establish networks and channels between departments and other local authorities for sharing information
- To influence behaviour change and engagement with people and public through tools and training.

Pain Points

- No time to shift through vast scientific data and evidence.
- No obvious place for data/evidence source.
- Lack of clear guidance or direction for creating climate change and health policy.
- Climate change and public health evidence seems to speak to a national level.
- Looking for opportunities to embed interventions within local authority planning systems.

Needs

- I need data which is easy to read and digest so that we can act upon it as quickly as possible.
- I need to be able to access to relevant formatted data so that it can be applied to local plans and policies.
- I need all my recommendations to be evidenced based so that they are as compelling as possible.
- I need help tying in climate and health recommendations to all plans and policies so that we are ensuring we're making positive changes in all aspects of the council's communities.
- I need help understanding what the co-benefits of climate and health action are so that they facilitate advocating for change
- I need support when formulating climate and health action so that I don't become overwhelmed by the breadth possible actions and outcomes.
- I need to be aware of other work carried out by other local authorities on climate and health issues so that we're not "recreating the wheel".

Next steps

These findings will inform the on-going development of CCHS digital products and wider support services being developed. Specific to the CCHS digital service, the following table notes current challenges identified (left) by Local Authority Public Health professionals, alongside proposed solutions (right), which a UKHSA climate and health digital service would seek to address. The next steps include testing proposed solutions through prototyping (alpha), further refinement and testing (beta) prior to the UKHSA climate and health digital service becoming publicly available (live).

Challenges identified	Proposed solution
Low levels of user awareness of CCHS; including products, functions, and expertise.	**Organisational visibility**: Increase organisational visibility through a website outlining key information and linking to relevant external services.
A need for users to access trusted sources of information, evidence, and articles relevant to climate change and health, which can be applied to local contexts.	**Publications and research**: Create a website that hosts and signposts to quality information which is available and easy to access. This could include case studies, toolkits, and resources to support local application.
Users need to find information quickly to respond to local enquiries regarding climate and health.	**Self-Service:** Providing users with a central source of information which is easy to navigate in order to self-serve enquiries.
Data is not always accurate or up to date, which omits the trust needed for successful adoption. Data is also needed for various levels of understanding and consumption.	**Data integrity and accuracy:** Create a website that offers access to climate and health data, which can be used for a wide range of purposes.
Interactive presentation of information which is easy to understand and can support action on climate change and health, in the broadest sense.	**Data analytics and visualisation**: Create a suite of visualisation tools to support action on climate change and health.

About the UK Health Security Agency

UKHSA is responsible for protecting every member of every community from the impact of infectious diseases, chemical, biological, radiological and nuclear incidents and other health threats. We provide intellectual, scientific and operational leadership at national and local level, as well as on the global stage, to make the nation health secure. UKHSA is an executive agency, sponsored by the Department of Health and Social Care.

www.gov.uk/government/organisations/uk-health-security-agency

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