East Sussex

Addressing the Health Effects and Impacts of Climate Change

Addressing Environment, Climate and Health
A Systemwide Health Impact Assessment for East Sussex (ECH-HIA)

Taking a Whole Systems Approach for Integrating and Advancing Population and Planetary Health in All of Our Approaches

Main Technical Report

Part 3D: Considerations, Opportunities and Actions Steps to Address the Health Effects of a Changing Climate with regards to Vulnerable Population Groups



East Sussex
County Council

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1. Explanation, Rationale and Principles for Formulation and Implementation of the Consideration and Opportunities for the Whole of the East Sussex System

The following considerations, opportunities and action steps have been co-developed by partners from across the East Sussex system, representing the wide range of organisations, services and sectors described in the Introduction (Part 1). Collectively, they reflect a shared ambition to strengthen climate resilience, improve population and planetary health, reduce inequalities and support sustainable development across the county.

The consideration, opportunities and action steps have been developed through an extensive programme of collaboration, evidence gathering and system-wide engagement, including:

- Individual climate and health conversations with organisations and sector representatives.
- A comprehensive review of policies, strategies and plans relating to environment, climate change and health across the East Sussex system.
- Three multi-agency systemwide workshops with most sectors and services.
- Wider stakeholder engagement and consultation activities.
- Multiple validation and refinement stages, during which considerations, opportunities and action steps were developed, challenged, reviewed, validated and revalidated by partners from across the East Sussex system.

This collaborative process has ensured that the considerations, opportunities and action steps reflect collective expertise, shared ownership and a common commitment to implementation. Rather than developing them solely within individual sectors, partners worked beyond their own organisational responsibilities to identify opportunities for collaboration, remove barriers, challenge assumptions and act as critical friends. This systems-based approach enabled participants to identify shared priorities, maximise co-benefits and developed considerations, opportunities and action steps that deliver value across multiple organisations and sectors.

The process of undertaking an **Environment, Climate and Health – A Systemwide Health Impact Assessment for East Sussex (ECH-HIA)** has encouraged partners to think beyond individual organisational priorities and consider how the wider East Sussex system can work more effectively as a whole. It has helped identify gaps,

barriers, tensions, dependencies and further opportunities that may not have been recognised through a single lens and single-organisation planning. This approach has worked to strengthen understanding of the interconnected relationships between a changing climate, health, inequalities, the environment and sustainable development.

Although the East Sussex County Council Public Health Team – Healthy Places Team facilitated and coordinated the development of this HIA and these opportunities, responsibility for their implementation rests collectively with all partner organisations. Delivery will be taken forward through **Phase 2 (2026–2030)**, with organisations adopting relevant action steps through their own governance arrangements and collectively through the **East Sussex Whole System Climate and Health Partnership**.

The considerations, opportunities and action steps have been intentionally developed to be ambitious whilst remaining grounded in practical implementation. They are designed not only to address current climate and health challenges, but also to articulate what should be made possible through long-term collaboration, innovation and systems leadership.

In developing these considerations, opportunities and action steps, partners sought to:

- Promote a positive, hopeful and solutions-focused narrative around climate and health.
- Balance ambition with realism, recognising financial, organisational and political constraints.
- Reflect emerging national, regional and local policy developments.
- Identify opportunities to influence policy and advocate for wider system change.
- Demonstrate the "art of the possible" by encouraging innovation and collaborative problem-solving.
- Align organisations around shared priorities, reducing duplication and maximising collective impact.
- Provide a confident and collective voice for partners committed to protecting health, reducing inequalities and strengthening resilience in response to climate change.

The considerations, opportunities and action steps presented within this report are intended to provide a strategic framework for action rather than a prescriptive implementation plan. During **Phase 2 (2026–2030)** they will be translated into organisation-specific delivery plans, including SMART objectives (Specific, Measurable, Achievable, Realistic and Time-bound) objectives, enabling partners to implement actions in ways that reflect their individual responsibilities while contributing to the shared vision for a healthier, fairer, more resilient and climate-ready East Sussex.

2. Introduction

The following section and it sub-sections apply the collaborative framework described above to each of the following vulnerable population groups identified through the East Sussex Environment, Climate and Health Impact Assessment (ECH-HIA). These are (in alphabetical order):

- Adults (25-64 years of age)
- Children and Young People
- Ethnic Minority Groups
- Gypsey and Traveller Communities
- The Homeless
- Low Income Households
- Older Adults (65+ years of age)
- People with Disabilities and Long-Term Health Conditions
- Women and Girls

Together, they provide the understanding for how a changing climate is and will affect vulnerable population groups and population health today, how these risks are expected to evolve over the coming decades, and where coordinated action across the East Sussex system can have the greatest impact.

This section and its sub-sections follow a consistent structure to support both strategic decision-making and practical implementation. It begins with a **High-Level Strategic Consideration and Opportunity**, supported by a clear rationale explaining why the issue is important for health, wellbeing and climate resilience. This is followed by a set of **Considerations, Opportunities and Action Steps**, which identify practical actions that organisations across the system can adopt individually and collectively. Each chapter then presents the determinant of health, summarising the latest information on how a changing climate is or will influence that determinant of health as a result of environment and climate hazards and the resulting implications for population health. To support implementation, chapters also review relevant **International and National Responses**, describe the **Current East Sussex Response** and highlight opportunities to build on existing strengths, address identified gaps and strengthen partnership working.

Although each of the vulnerable population groups are presented separately, they should not be considered in isolation. The determinants of health are highly interconnected, with many sharing common drivers, vulnerable populations, health outcomes and opportunities for intervention. For example, people with disabilities, long term conditions and low-income households. Recognising these interdependencies is fundamental to a systems-based approach, enabling partners to

identify actions that deliver multiple health, environmental, social and economic co-benefits across the county.

Taken together, the chapters that follow provide both the strategic context and practical framework for strengthening climate resilience across East Sussex. They are intended to support informed decision-making, encourage collaboration across organisational boundaries and provide a shared evidence base for the development of coordinated local action throughout Phase 2 (2026–2030).

3. Overview and Wider Context

Environmental challenges and a changing climate do not affect everyone equally. Although all residents are likely to experience some health effects from a changing climate, the severity of impacts is influenced by existing health status, age, income, housing, occupation, access to services and the wider social determinants of health. A changing climate therefore acts as a **risk multiplier**, amplifying existing vulnerabilities and widening health inequalities unless adaptation measures are equitable and targeted.

The following sections summarise the principal pathways through which a changing climate may affect key vulnerable population groups within East Sussex.

Adults (25-64 Years)

Adults of working age form the largest proportion of the population and play a central role in supporting families, communities and the economy. A changing climate affects this group through both direct environmental exposures and wider socioeconomic pressures. Heatwaves, poor air quality, flooding and severe weather can affect physical and mental health, while disruption to employment, transport, housing and essential services may increase financial insecurity and stress. Outdoor workers, carers, key workers and those employed in climate-sensitive sectors such as construction, agriculture and transport may face greater occupational risks from heat exposure, poor air quality and extreme weather.

At the same time, this age group represents a significant opportunity for adaptation, as adults will drive much of the transition towards healthier lifestyles, climate-resilient communities and a low-carbon economy through their roles as workers, parents, carers and community leaders.

Children and Young People

Children and young people are among the most vulnerable to the health effects of a changing climate because their bodies and immune systems are still developing and they are likely to experience cumulative exposure over their lifetime. They are more susceptible to heat-related illness, dehydration, poor air quality, aeroallergens, infectious diseases and disruption caused by extreme weather.

A changing climate may also affect education through school closures, reduced concentration during periods of extreme heat and disruption to travel. Growing evidence highlights increasing levels of eco-anxiety and climate-related distress among young people, affecting mental health and wellbeing. Ensuring children have safe schools, healthy environments, opportunities for outdoor play and access to nature will be fundamental to building lifelong resilience.

Ethnic Minority Groups

Ethnic minority communities are not inherently more vulnerable to a changing climate; however, structural inequalities can increase exposure and reduce adaptive capacity. Factors such as poorer housing conditions, lower incomes, occupational exposures, language barriers, discrimination and unequal access to services may increase vulnerability to climate-related health impacts.

Some communities may also have higher prevalence of long-term health conditions that increase sensitivity to heat, poor air quality or infectious diseases. Effective climate adaptation requires culturally appropriate communication, inclusive engagement and equitable access to services to ensure no communities are disproportionately affected.

Gypsy and Traveller Communities

Gypsy and Traveller communities often experience some of the poorest health outcomes in England alongside significant social exclusion. A changing climate may compound existing inequalities through poor-quality accommodation, exposure to flooding, overheating, limited access to healthcare, insecure living conditions and restricted access to essential services.

Many sites may be more vulnerable to extreme weather events and infrastructure disruption. Improving access to safe, resilient accommodation, healthcare, clean water, sanitation and emergency planning will be important for reducing climate-related health risks within these communities.

People Experiencing Homelessness

People experiencing homelessness are among the most exposed to climate hazards because they have limited protection from extreme weather and often experience multiple health and social vulnerabilities simultaneously. Heatwaves, cold weather, storms, flooding and poor air quality can all have immediate and serious consequences for physical and mental health.

Many individuals already experience chronic illness, substance dependency or poor mental health, increasing susceptibility to climate-related illness. Access to cooling, shelter, healthcare, hygiene facilities and coordinated emergency support will become increasingly important as climate risks intensify.

Low-Income Households

Households on lower incomes are often disproportionately affected by a changing climate because they have fewer financial resources to prepare for, respond to or recover from climate-related events. Poor-quality housing, fuel poverty, food insecurity and limited access to insurance or transport can all increase vulnerability.

A changing climate may further increase household costs through higher energy prices, food price inflation and damage caused by flooding or severe weather. Financial pressures contribute to poorer physical and mental health and may widen existing health inequalities. Adaptation measures that improve housing quality, energy efficiency and affordable access to services can therefore generate substantial health and economic benefits.

Older Adults (65 Years and Over)

Older adults are consistently identified as one of the groups most vulnerable to climate-related health impacts. Age-related physiological changes, frailty, multiple long-term conditions and reduced mobility increase susceptibility to heat-related illness, dehydration, cardiovascular disease, respiratory illness and poor recovery following extreme weather events.

Social isolation, digital exclusion and dependence on health and social care services may further increase vulnerability during emergencies. However, many older people also possess valuable knowledge, skills and community networks that contribute to resilience. Supporting healthy ageing, resilient housing, accessible services and strong community connections will become increasingly important as the population ages.

People with Disabilities and Long-Term Health Conditions

People living with physical disabilities, learning disabilities, sensory impairments, mental ill health or long-term health conditions often face greater risks during climate-related events. Many depend on medication, specialist equipment, personal assistance, transport or continuous access to health and social care services, all of which may be disrupted by extreme weather.

Heat, flooding, poor air quality and power outages can significantly affect health, independence and quality of life. Adaptation planning should therefore prioritise accessibility, continuity of care, inclusive emergency planning and the active involvement of disabled people in designing resilient services and communities.

Women and Girls

A changing climate affects women and girls through biological, social and economic pathways. Pregnancy increases susceptibility to heat-related illness and adverse birth outcomes, while women continue to undertake a greater proportion of unpaid caring responsibilities, increasing exposure during climate-related emergencies and service disruption.

Women are also more likely to experience financial insecurity, domestic abuse and mental health impacts following disasters. Conversely, women play a critical role in strengthening community resilience through leadership, caregiving, education and volunteering. Climate adaptation should therefore incorporate gender-responsive planning, protect maternal and reproductive health, promote safety and ensure women are fully represented in climate-related decision-making.

Summary

Across all population groups, a changing climate interacts with existing social, economic and environmental inequalities rather than creating entirely new vulnerabilities. Many individuals belong to more than one vulnerable group—for example, an older adult living on a low income with a long-term health condition—meaning that risks can accumulate and compound over time. This reinforces the need for a **whole-system, equity-focused approach** that prioritises prevention, targets resources according to need and embeds **Health, Environment and Climate in All Approaches**. By recognising both shared and population-specific vulnerabilities, East Sussex can strengthen resilience, reduce inequalities and ensure that adaptation measures protect those most at risk while improving health and wellbeing for all.

“The protection, the prevention and the safeguarding of vulnerable people.”

4. Adults (25-64 years of age) and Working Well

High Level Strategic Opportunity:

Create a climate-resilient workforce and working-age population that is protected from climate-related health risks, empowered to contribute to climate action, and supported by healthy, sustainable and adaptive workplaces that enhance productivity, wellbeing, economic resilience and population health.

Rationale:

Working-age adults are central to the economic, social and community resilience of East Sussex, yet they are increasingly exposed to climate-related health risks including extreme heat, poor air quality, flooding, severe weather, occupational hazards, mental health impacts and disruption to transport, infrastructure and essential services. These risks can reduce productivity, increase sickness absence, exacerbate existing health inequalities and place additional pressures on employers, public services and the wider economy. Creating climate-resilient workplaces and supporting a healthy, adaptable workforce will help protect workers from emerging risks, improve health and wellbeing, strengthen business continuity and economic resilience, support workforce retention and productivity, and enable individuals to contribute to climate adaptation and the transition to a low-carbon economy. Investing in healthy, sustainable and climate-resilient working environments therefore delivers multiple co-benefits for individuals, employers, communities and the wider health and care system.

Considerations, Opportunities and Action Steps:

Opportunity 1: Reduce Occupational Exposure to Climate Hazards

Action Steps:

- Establish evidence-based heat safety standards for indoor and outdoor workplaces, including maximum temperature thresholds, rest breaks, hydration requirements, and shaded rest areas.

- Implement flexible working arrangements during extreme heat events, including remote work, staggered shifts, and altered working hours.
- Require employers to conduct climate-related occupational risk assessments and update health and safety policies accordingly.
- Develop early warning systems and workplace heat action plans linked to national weather alerts.
- Improve workplace infrastructure through cooling technologies, ventilation upgrades, green roofs, and tree shading around work sites.
- Ensure vulnerable workers, including pregnant employees and those with chronic illnesses, receive additional protections during extreme weather.

Expected Outcomes

- Reduced heat-related illness and injury.
- Improved workforce productivity and wellbeing.
- Lower absenteeism during climate-related events.

Opportunity 2: Support Healthy and Sustainable Workplaces

Workplaces can simultaneously improve employee health and reduce environmental impacts.

Action Steps:

- Provide mandatory training for managers and employees on recognising and responding to heat stress, dehydration, and air pollution-related symptoms.
- Promote active travel initiatives such as cycling, walking, and public transport incentives.
- Support employer-sponsored low-carbon commuting schemes, including bike-to-work programmes and electric vehicle charging infrastructure.
- Encourage workplace wellness programmes that integrate climate and health education.
- Increase access to green spaces around workplaces to support physical activity, cooling, and mental wellbeing.
- Introduce sustainable procurement and energy efficiency measures to reduce workplace carbon footprints.

Expected Outcomes

- Increased physical activity and cardiovascular health.
- Reduced transport-related emissions.
- Greater employee engagement in climate action.

Opportunity 3: Increase Climate Literacy Among Health and Social Care Professionals

Healthcare professionals are trusted sources of information and can support climate adaptation at the individual and community level.

Action Steps

- Integrate climate-health competencies into undergraduate, postgraduate, and continuing professional education.
- Incorporate climate-health counselling into primary care consultations, including advice on heat management, hydration, air quality, and medication safety during extreme weather.
- Develop clinical guidance for managing climate-sensitive conditions such as asthma, cardiovascular disease, diabetes, and mental health disorders.
- Equip healthcare professionals to identify and support patients at increased climate risk.
- Incorporate climate preparedness considerations into housing, urban planning, and family support services through cross-sector collaboration.
- Establish multidisciplinary partnerships between health services, local authorities, employers, and community organisations.

Expected Outcomes

- Improved patient resilience to climate-related health risks.
- Earlier identification of vulnerable populations.
- Stronger integration of health and climate policies.

Context and Impacts

A changing climate presents a significant challenge to the health, wellbeing and economic resilience of working-age adults. This age group forms the backbone of the labour market, supports much of the county's unpaid care provision, and drives economic productivity. Climate-related impacts therefore affect not only individual health but also workforce participation, business performance and economic prosperity.

East Sussex has a relatively small working-age population compared with England as a whole. In 2024, there were approximately **307,000 residents aged 18–64**, accounting for **54.7% of the county's population**, compared with **60.5% nationally**. Growth in the working-age population has been modest, increasing by only **2.0% since 2014**, compared with more than 6% nationally and regionally. At the same time, the

population aged 65 and over has grown rapidly, increasing demand for health, social care and unpaid caring support.

The East Sussex Economic Prosperity Strategy identifies a long-term ambition for the county to be a place where people "live and work well", supported by good-quality employment, a healthy workforce and sustainable economic growth. The strategy recognises that environmental change, demographic change and the transition to net zero will be major influences on future prosperity and workforce resilience. A changing climate is therefore both a public health issue and an economic development issue for East Sussex.

Health and Wellbeing Impacts

The most significant climate-related health risks for working-age adults are likely to arise from increasing heat exposure, poor air quality, flooding, mental health impacts and rising financial pressures.

Heat is expected to become an increasingly important occupational health risk. Higher temperatures can lead to dehydration, heat exhaustion, fatigue, reduced concentration and lower productivity. Workers in construction, transport, agriculture, environmental services, utilities and emergency response are particularly exposed because of prolonged outdoor working. However, overheating is also becoming a concern for office workers, retail staff, healthcare workers and those employed in older buildings that were not designed for hotter summers.

A changing climate is also likely to worsen existing long-term conditions among working-age adults. Higher temperatures place additional strain on the cardiovascular system, increasing risks for people with heart disease, hypertension and kidney conditions. Longer pollen seasons and poorer air quality can exacerbate asthma and other respiratory illnesses, increasing sickness absence and reducing work capacity.

Mental health impacts are likely to be substantial. Working-age adults often balance employment alongside childcare, caring responsibilities and financial commitments. Flooding, extreme weather events, housing damage, rising insurance costs and increasing energy and food prices can contribute to stress, anxiety and poor mental wellbeing. Climate anxiety may also affect some individuals, particularly those concerned about future economic security and family wellbeing.

Implications for East Sussex

The implications for East Sussex are amplified by the county's demographic structure and economic profile. The decline in younger working-age adults is particularly notable. Between 2014 and 2024, the number of residents aged **18-24 fell by 12.9%**,

while the number aged 30–44 increased by 8.5%. This creates a workforce that is increasingly concentrated in mid-life age groups who are often simultaneously supporting children and ageing parents.

Climate-related disruption therefore has wider consequences than individual illness alone. Heatwaves and extreme weather may reduce productivity, increase sickness absence and place additional caring burdens on working-age adults supporting older relatives. This is particularly relevant in East Sussex where **149,415 residents are aged 65 and over**, representing **26.6% of the population**, one of the highest proportions in England.

The East Sussex Economic Prosperity Strategy highlights that the county supports approximately **246,000 jobs** and generates around **£9.9 billion in economic output annually**. Climate-related disruption to workforce health, transport networks, infrastructure and businesses therefore has implications not only for individuals but also for the county's long-term economic performance. The strategy specifically identifies adapting effectively to a changing climate as a key requirement for future prosperity.

Flooding presents a particular challenge. Communities across the county, including parts of Eastbourne, Hastings, the Ouse Valley and the Pevensey Levels, face varying degrees of flood risk. Flood events can affect employment, commuting, business continuity and mental wellbeing, while creating financial pressures for households and employers alike.

Gaps

Although there is strong evidence linking a changing climate to workforce health, there is limited local intelligence demonstrating how climate hazards currently affect East Sussex's working-age population. There is little routinely available data on heat-related sickness absence, productivity losses, occupational injuries during extreme weather, or the impacts of flooding on employment and business continuity.

There is also limited understanding of how climate risks affect different employment sectors across the county. Small and medium-sized enterprises, which form a significant part of the East Sussex economy, may be particularly vulnerable but are not routinely monitored for climate resilience.

Barriers

A major barrier is the limited capacity of some employers and households to adapt. Smaller businesses may lack the resources to modify working environments, improve ventilation or develop heat-health plans. Employees working in insecure employment

or lower-paid occupations may have limited flexibility to change working patterns during extreme weather.

Housing also acts as a barrier. Adults living in poorly insulated, poorly ventilated or overcrowded housing may experience overheating, disrupted sleep and poorer mental wellbeing, all of which affect their ability to work effectively.

Awareness remains another challenge. Heat-related risks are often less well recognised in the UK than other occupational hazards despite increasing evidence of their impact on health and productivity.

Tensions

Several tensions emerge when considering climate adaptation and workforce health. One is the balance between maintaining productivity and protecting worker wellbeing during extreme weather. Employers may face operational pressures to continue services during heatwaves while employees require more breaks, flexible hours or altered working practices.

Another tension exists between decarbonisation and adaptation. Buildings may need cooling measures to protect health and productivity, but these can increase energy demand if not carefully designed. Similarly, transport decarbonisation may encourage active travel, but walking and cycling become more challenging during periods of extreme heat.

There is also a tension between short-term economic pressures and long-term resilience. Businesses facing immediate financial challenges may struggle to invest in climate adaptation measures despite clear future benefits.

Opportunities

Climate adaptation offers significant opportunities to improve workforce health, productivity and economic resilience. Many adaptation measures align closely with the ambitions set out in the East Sussex Economic Prosperity Strategy, particularly the vision of enabling people to live and work well in a healthy and sustainable environment.

Improved workplace design, better ventilation, urban greening, shaded public spaces and active travel infrastructure can all support physical and mental health while reducing climate risks. Flexible working arrangements can help protect employees during periods of extreme weather while supporting work-life balance.

There is also an opportunity to align climate adaptation with skills development and economic growth. The Prosperity Strategy recognises the need to develop new skills, attract a skilled workforce and support businesses to adapt to a changing climate and

the transition to adapting infrastructure. Investment in green jobs, sustainable construction, retrofit programmes, low-carbon transport and climate resilience infrastructure could support both economic prosperity and population health.

Summary

For East Sussex, a changing climate poses a growing risk to the health, wellbeing and productivity of working-age adults. The county's relatively small working-age population, ageing demographic profile and reliance on a healthy workforce make resilience particularly important. Rising temperatures, poor air quality, flooding and increasing financial pressures have the potential to worsen existing health inequalities, increase economic inactivity and reduce productivity. However, by integrating climate adaptation into workforce planning, economic development and public health programmes, East Sussex has an opportunity to improve health outcomes while supporting its long-term vision of prosperity, sustainability and good work for all.

5. Children and Young People – Best Start in Life/Starting Well

High Level Strategic Opportunity:

Adopt a child-centred, climate-resilient health approach that prioritises the protection, wellbeing, and future health of children and young people by integrating their needs across climate, public health, education, planning, and environmental policies. This should focus on reducing children’s exposure to climate-related risks such as air pollution, extreme heat, infectious diseases, and flooding; creating safe, healthy, and sustainable environments in homes, schools, and communities; and ensuring health systems are equipped to recognise and respond to climate-related health impacts on children. Action should also prioritise reducing inequalities affecting vulnerable children, support mental health and wellbeing in the context of a changing climate, and enable meaningful participation of children and young people in shaping climate and health solutions. Strengthened monitoring, research, and cross-sector collaboration will be essential to ensure evidence-based policies that safeguard the long-term health and resilience of future generations.

Rationale:

Children and young people are among the population groups most vulnerable to the health impacts of a changing climate because their bodies and immune systems are still developing, they have greater exposure to environmental hazards over their lifetime, and they have limited ability to control or adapt to changing conditions. Climate-related risks—including extreme heat, poor air quality, flooding, infectious diseases, food insecurity and disruption to education and essential services—can adversely affect physical health, mental wellbeing, development and educational attainment, while disproportionately impacting disadvantaged and vulnerable children, thereby widening existing inequalities. Early-life exposures can have lifelong consequences for health, wellbeing and life opportunities. Adopting a child-centred, climate-resilient approach that integrates children's needs across climate, public health, education, planning and environmental policies will help protect current and future generations, reduce inequalities, strengthen resilience, support healthy development and ensure that children and young people are empowered to participate in shaping the decisions that will influence the environment and communities in which they will live.

Considerations, Opportunities and Action Steps:

Opportunity 1: Prioritise Children and Young People in Climate and Health Policy

Action Steps:

- Ensure children and young people are explicitly recognised as a priority population in climate and health strategies, reflecting their increased physiological vulnerability, longer lifetime exposure, and developmental sensitivity to environmental risks.
- Policies should adopt a “child health in all climate policies” approach, integrating child health considerations into planning, transport, housing, education, and environmental decision-making.

Opportunity 2: Protect Children from Climate-Related Environmental Exposures

Action Steps:

- Reduce children's exposure to climate-related health risks such as **air pollution, extreme heat, allergens, flooding, and infectious diseases**. This should include creating **clean air zones around schools and childcare settings**, ensuring climate-resilient school environments with shading, ventilation, and cooling measures, and integrating climate risk considerations into school infrastructure and urban planning.

Opportunity 3: Strengthen Climate-Resilient Health Services for Children

Action Steps:

- Health systems should be equipped to anticipate and respond to climate-related health impacts on children, including respiratory disease, heat-related illness, vector-borne diseases, and mental health impacts.
- Paediatric services and community health teams should receive training on climate-related health risks, and surveillance systems should monitor emerging health trends affecting children.

Opportunity 4: Promote Healthy, Climate-Friendly Environments for Children

Action Steps:

- Support environments that deliver **co-benefits for both climate and child health**, including safe walking and cycling routes to schools, access to green spaces, healthy sustainable food systems, and reduced exposure to harmful environmental pollutants. These measures can support **physical activity, mental wellbeing, and healthier lifestyles** while contributing to climate mitigation.

Opportunity 5: Support Climate-Related Mental Health and Wellbeing

Action Steps:

- Recognise and address the growing impact of **eco-anxiety, climate distress, and disaster-related trauma** among children and young people.

- Schools, community services, and healthcare providers should provide accessible mental health support, climate education, and opportunities for constructive engagement in climate action.

Opportunity 6: Reduce Health Inequalities Among Children

Action Steps:

- A changing climate disproportionately affects children living in **deprived communities, poor-quality housing, flood-risk areas, and areas with high pollution exposure**. Interventions should prioritise these communities through targeted support, improved housing quality, safe neighbourhood environments, and equitable access to health services.

Opportunity 7: Engage Children and Young People in Climate Action

Action Steps:

- Children and young people should be **actively involved in shaping climate and health policies that affect them**. Government and local authority, and schools should support meaningful youth participation through consultation, co-design, and youth advisory groups to ensure policies reflect their perspectives and priorities.

Opportunity 8: Strengthen Monitoring, Research, and Data on Child Climate Health Impacts

Action Steps:

- Lobby and invest in research and surveillance systems to better understand the **short- and long-term health impacts of a changing climate on children**, including air pollution, heat exposure, infectious diseases, nutrition, and mental health. Data should inform evidence-based policies and enable tracking of progress in protecting child health.

Pre-Conception and Pregnancy

Climate impacts: heat stress, air pollution, vector-borne disease, food insecurity.

Opportunity 1: Protect maternal health from climate hazards.

Action Steps:

- Incorporate climate risks into antenatal care (e.g., dehydration risk, heat-related hypertension).
- Strengthen screening for stress and mental health exacerbated by climate anxiety.

Opportunity 2: Reduce exposure to air pollution and extreme heat.

Action Steps:

- Provide clinical alerts for high-risk pregnant women during heatwaves.

Opportunity 3: Ensure safe housing and indoor air quality.

Action Steps:

- Offer air quality guidance, access to cool spaces, and hydration plans.
- Ensure emergency planning for maternity services during extreme weather.

Infants and Early Childhood (0–5 yrs)

Climate impacts: overheating, dehydration, asthma, infectious diseases.

Opportunity 1: Reduce exposure to heat and poor air quality.

Action Steps:

- Enforce maximum indoor temperature standards in childcare settings.
- Provide clean-air rooms with HEPA filtration during wildfire smoke days or high pollution days.

Opportunity 2: Enhance infection prevention.

Action Steps:

- Increase immunisation uptake for climate-sensitive diseases (e.g., rotavirus).

Opportunity 3: Provide climate-safe childcare environments.

Action Steps:

- Support parents with safe home-cooling strategies and subsidies.
- Expand shaded play areas in early years centres.

Children (5–12 yrs)

Climate impacts: heat stress, mental health anxiety, asthma, reduced outdoor play.

Opportunity 1: Adapt schools for a changing climate.

Action Steps:

- Retrofit schools with passive cooling, ventilation, and shade canopies.
- Train teachers in climate and heat-related first aid.
- Develop school emergency plans for extreme heat, PM2.5 spikes, floods.

Opportunity 2: Increase climate education.

Action Steps:

- Integrate a changing climate and health topics into school curricula.

Opportunity 3: Promote sustainable behaviours early.

Action Steps:

- Establish active travel programs (walking buses, cycling networks).
- Monitor school air quality and publicly report results.

Adolescents and Young Adults (13–24 yrs)

Climate impacts: mental health (eco-anxiety), heat impacts during physical activity, risk-taking behaviours, transitioning to independence.

Opportunity 1: Strengthen youth empowerment in climate action.

Action Steps:

- Create youth climate advisory panels for local planning.
- Promote youth engagement campaigns through social media.

Opportunity 2: Support mental health.

Action Steps:

- Expand mental health supports for climate anxiety and peer-led models.

Opportunity 3: Promote sustainable and healthy lifestyle habits.

Action Steps:

- Offer green skills training and vocational pathways in sustainability.
- Support safe active travel infrastructure around colleges/unis.
- Provide guidance on hydration, heat safety during sports.

Context and Impacts

A changing climate is a “starting well” issue because it affects the conditions that shape health from pregnancy through childhood and adolescence: safe housing, stable family income, food security, school attendance, play, sleep, clean air, access to green space, emotional wellbeing and protection from harm. For children, these risks are not only immediate. Exposure to heat, poor air quality, flooding, disrupted education or family stress can affect development, attainment and long-term health.

East Sussex has around **104,428 children aged 0-17**. Unlike older age groups, the number of 0–17-year-olds has remained almost static over the last decade, rising by only **0.1% since 2014**, compared with increases of **5.6% in England** and **6.9% in the South East**. However, the school-age profile is changing. Children aged **4-15 increased by 4.2%**, with secondary-age children aged **11-15 increasing by 11.3%**. This matters because climate impacts affect age groups differently: babies and young children are most physiologically vulnerable to heat, while adolescents may be more exposed through independent travel, outdoor activity, climate anxiety, risk-taking around open water, and disrupted schooling.

The East Sussex Children and Young People’s Plan is already framed around **Best Start for Life, Physical Health, Mental Health and Emotional Wellbeing, Education, and Safeguarding**. It also recognises poverty, housing, education and health as strongly linked to poor outcomes, and identifies cross-cutting principles including tackling inequalities, prevention, user voice, trauma-informed practice and reducing carbon emissions. A changing climate cuts across all of these priorities because it can worsen the same determinants that local partners are already trying to improve.

For the Best Start for Life, the key concern is that climate risk begins before birth. Extreme heat during pregnancy is associated with higher risks of preterm birth, low birth weight and stillbirth; while flooding or housing disruption can increase maternal stress and reduce access to routine antenatal and postnatal care. Infants and young children are less able to regulate body temperature, depend entirely on adults for hydration and cooling, and are more vulnerable to dehydration during heatwaves. The local plan's Best Start vision is for all children, including those with SEND and those who are looked after, to be supported from birth to age five so that strong foundations are laid for physical wellbeing, emotional wellbeing and educational development. Climate adaptation should therefore be treated as part of early years prevention, not only emergency planning.

The strongest local intelligence comes from the My Health My School Survey 2023–2024, which received **16,441 responses**, the largest number to date. The survey included pupils from years 3–13 and asked about health, wellbeing, physical activity, safety, sleep, relationships and lifestyle behaviours. Its value is that it provides direct child and young person voice, but it also has limitations: participation is voluntary, some year groups are under-represented, and the report notes that secondary pupils from Hastings were under-represented despite Hastings containing some of the county's most deprived areas.

Several findings are directly relevant to a changing climate. Sleep is one example. Hotter nights are likely to worsen sleep quality, yet sleep is already an issue for many older pupils. In the survey, **57% of Key Stage 2 pupils** reported getting eight or more hours of sleep on a normal school night, compared with **30% of Key Stage 5 students**. Poor sleep affects concentration, emotional regulation, learning and mental health, so hotter homes and bedrooms could amplify existing pressures.

Food and nutrition are another route through which a changing climate can affect children. Climate-related disruption to food systems and rising prices are likely to affect lower-income families first. Locally, the survey found that **74% of primary pupils** and **51% of secondary pupils** reported eating breakfast on most school days, while **22% of secondary students** and **21% of college students** reported never having breakfast. This is important because food insecurity, poor diet and heat can interact: children who are already nutritionally vulnerable may be less resilient to illness, heat stress and poor concentration.

Physical activity is both a protective factor and a climate-sensitive behaviour. Active travel, outdoor play and sport support healthy weight, mental wellbeing and social development, but extreme heat, poor air quality and flooding can reduce safe opportunities to be active. The survey found that **84% of primary pupils**, **76% of secondary pupils** and **66% of college students** reported being physically active for at least 60 minutes on most days. However, activity was lower among girls and those

identifying as another gender identity; among college students, **75% of boys** reported this level of activity compared with **58% of girls** and **46% of those identifying as another gender identity**. Climate adaptation therefore needs to protect safe, shaded, inclusive places for play, sport and active travel.

A changing climate also has a safeguarding dimension. Flooding, heatwaves and severe weather can disrupt school attendance, family routines, transport and access to trusted adults. The My Health My School Survey found that **96% of pupils in years 5-13 felt safe at home**, meaning **4%**, or **557 pupils**, reported feeling unsafe. It also found that the school toilets were the place where pupils most often reported feeling unsafe, with **30% of secondary pupils** saying they felt unsafe there. Climate-related disruption may not cause safeguarding risks directly, but it can increase family stress, reduce supervision, disrupt services and make existing vulnerabilities harder to identify.

Mental health is central. The Sussex Children and Young People's Mental Health and Emotional Wellbeing Local Transformation Plan recognises that the pandemic increased mental health risks, particularly for children with pre-existing mental health challenges or disabilities, children from low-income families, and families experiencing trauma or domestic abuse. Climate anxiety, flooding, school disruption, family financial stress and reduced access to green space can add to these existing pressures. The plan also describes a move toward the **THRIVE framework**, focusing on children's needs rather than a traditional tiered service model, and reported **£9.870 million** investment in East Sussex children and young people's mental health in 2021/22.

The implications for East Sussex are unequal. Children in poorer housing, low-income households, flood-prone areas, coastal communities, rural areas with transport barriers, and urban neighbourhoods with less shade or green space are likely to experience greater climate-health impacts. The Children and Young People's Plan explicitly recognises the link between poverty and outcomes in education, health and wellbeing, safeguarding, housing and criminal justice involvement. This means a changing climate is likely to widen existing inequalities unless adaptation is targeted toward the children and families least able to protect themselves.

Gaps, Barriers, Tensions and Opportunities

The main gap is that East Sussex has good intelligence on children's health and wellbeing, but less visible local analysis linking climate hazards to child outcomes. There is limited published local evidence connecting heatwaves, flooding or poor air quality with school absence, asthma attacks, sleep loss, safeguarding referrals, mental health presentations, injuries, food insecurity or reduced physical activity.

There is also a data gap around the climate resilience of schools, nurseries, family hubs, youth services and homes where the most vulnerable children live.

The main barriers are practical and structural. Families on low incomes may be least able to cool homes, replace flood-damaged belongings, travel during disruption or pay for safe leisure activities during heatwaves. Schools and early years settings may face ageing buildings, limited capital funding, competing educational pressures and insufficient shaded outdoor space. Rurality adds another barrier in East Sussex, because transport disruption can affect access to education, healthcare and early help.

There are tensions between encouraging outdoor play and protecting children from heat, ultraviolet exposure and poor air quality; between active travel and road safety during extreme weather; between carbon reduction and the need for cooling in schools and early years settings; and between digital service models and digital exclusion for some families. There is also a tension between universal climate messaging and targeted support: all children are affected, but the greatest preventable harms will fall on those already experiencing disadvantage.

The opportunities are strong. East Sussex can integrate climate adaptation into the existing Children and Young People's Plan priorities rather than creating a separate agenda. Best Start services, Family Hubs, schools, school nursing, mental health support teams, youth services and safeguarding partnerships could all use heat-health alerts and flood warnings to identify children who may need extra support. The My Health My School Survey could include climate-related questions on heat, sleep, school travel, access to shade, climate anxiety and safe outdoor space. School estate planning could prioritise ventilation, shading, trees, cool rooms, flood resilience and safe active travel routes. Most importantly, children and young people's voice should shape local adaptation, because the existing survey shows that East Sussex already has a mechanism for listening at scale.

6. Ethnic Minority Groups

High Level Strategic Opportunity:

Create a climate-resilient East Sussex where ethnic minority communities are protected from climate-related health risks, experience equitable access to healthy environments, housing, services and opportunities, and benefit fairly from climate adaptation and the transition to a low-carbon economy. Through inclusive decision-making, culturally responsive services and targeted action on environmental inequalities, climate adaptation should contribute to improved health outcomes,

stronger community resilience, greater social inclusion and reduced health inequalities.

Rationale:

Ethnic minority communities may experience disproportionate health impacts from a changing climate due to the combined effects of existing health inequalities, socioeconomic disadvantage, poorer housing conditions, environmental exposures, occupational risks and barriers to accessing services, information and support. Although East Sussex has a smaller ethnic minority population than many urban areas, diversity is increasing, particularly in Hastings, Eastbourne, Lewes and parts of Wealden. Climate-related risks are often intensified where ethnicity intersects with poverty, insecure employment, migration status, language barriers, discrimination, disability or existing health conditions.

A climate-resilient approach should promote equitable access to healthy environments, quality housing, healthcare, employment opportunities and climate adaptation resources, supported by culturally responsive services and inclusive decision-making. This can help address environmental injustice, strengthen community resilience, improve trust and engagement, reduce health inequalities and ensure that the benefits of climate action and the transition to a low-carbon economy are shared fairly across all communities.

Key climate-health risks include:

- Greater exposure to air pollution, traffic-related emissions and poor-quality housing.
- Higher likelihood of living in overcrowded or energy-inefficient homes.
- Increased vulnerability to fuel poverty and rising energy costs.
- Reduced access to green space, cooling environments and climate adaptation resources.
- Language, cultural and digital barriers that reduce access to climate-health information and emergency support.
- Greater occupational exposure to heat, poor air quality and extreme weather in lower-paid and outdoor occupations.
- Mental health impacts associated with climate anxiety, financial stress, displacement and experiences of discrimination.

Considerations, Opportunities and Action Steps:

Opportunity 1: Deliver Culturally Responsive Climate and Health Interventions

Ensure all climate-health policies, communications, and interventions are culturally competent, accessible, and co-produced with ethnic minority communities to improve trust, engagement, and health outcomes.

Climate adaptation strategies should recognise the diversity of cultures, languages, faiths, migration experiences, and health needs within East Sussex communities.

Action Steps:

Community Co-Production

Establish an Ethnic Minority Climate and Health Advisory Network involving:

- Community leaders
- Faith groups
- Migrant support organisations
- Refugee and asylum support services
- Young people
- Community health champions
- Ensure all major climate-health programmes include community consultation and co-production.
- Undertake annual community engagement events to identify emerging climate-health concerns.

Accessible Climate-Health Communication

- Develop multilingual climate-health information covering:
- Heatwaves
- Flooding
- Cold weather
- Air pollution
- Severe storms
- Emergency preparedness
- Produce information in:
- Translated written formats
- Easy-read formats
- Videos

- Community radio
- Social media content
- Audio formats
- Develop culturally tailored guidance for vulnerable groups including:
- Older people
- Migrant families
- Pregnant women
- Refugees and asylum seekers

Trusted Community Delivery

- Deliver climate-health outreach through:
- faith centres
- mosques
- churches
- temples
- community centres
- cultural organisations
- local events
- Expand Community Health Champion programmes to include climate-health awareness training.

Indicators

- Number of organisations participating in co-production.
- Number of translated resources produced.
- Number of residents reached through community outreach.
- Community awareness of climate-health risks.
- Satisfaction with accessibility of information.
- Participation rates across ethnic groups.

Expected Outcomes

- Increased trust in public services.
- Improved access to climate-health information.
- Greater uptake of preventative measures.
- Reduced communication inequalities.

Opportunity 2: Improve Environmental Quality in Areas Experiencing Ethnic Health Inequalities

Address environmental determinants of health by reducing exposure to air pollution, poor housing, overheating, flooding, and lack of access to quality green space in communities experiencing ethnic health inequalities.

Environmental improvement should be viewed as a health equity intervention.

Action Steps:

Air Quality Improvement

- Identify neighbourhoods experiencing both environmental and ethnic health inequalities using:
- Air quality data
- Deprivation data
- Housing quality indicators
- Population demographics
- Prioritise interventions in high-risk areas including:
- Traffic reduction measures
- Anti-idling enforcement
- Active travel infrastructure
- Low-emission transport initiatives
- Install additional air quality monitoring in priority communities.

Access to Green and Blue Spaces

- Improve access to safe and welcoming:
- Parks
- Community gardens
- Coastal spaces
- Walking routes
- Recreational areas
- Ensure green spaces are:
- Culturally inclusive
- Accessible
- Safe
- Family friendly
- Develop community-led greening projects in partnership with local organisations.

Housing Quality and Climate Resilience

- Strengthen enforcement of housing standards in:
- Private rented accommodation

- Houses in Multiple Occupation (HMOs)
- Overcrowded housing
- Expand referrals for:
- Damp and mould support
- Fuel poverty assistance
- Housing improvement grants
- Integrate overheating and climate resilience assessments into housing inspections.

Indicators

- Air pollution levels in target areas.
- Number of housing inspections completed.
- Number of housing improvements delivered.
- Access to green space by ethnicity.
- Resident perceptions of environmental quality.
- Respiratory illness and cardiovascular disease indicators.

Expected Outcomes

- Reduced environmental health inequalities.
- Improved respiratory and cardiovascular health.
- Increased use of green spaces.
- Better housing conditions.
- Enhanced wellbeing and community resilience.

Opportunity 3: Ensure Fair Access to the Benefits of the Green Transition

Ensure ethnic minority communities benefit equitably from climate mitigation and adaptation programmes, including home retrofit schemes, active travel initiatives, green employment opportunities, and renewable energy programmes.

The transition to a low-carbon economy should reduce inequalities rather than widen them.

Action Steps:

Inclusive Retrofit and Energy Programmes

- Review eligibility and access barriers to:
- Retrofit grants
- Energy efficiency schemes
- Fuel poverty programmes

- Renewable energy initiatives
- Develop targeted outreach campaigns to increase participation among ethnic minority households.
- Provide application support through trusted community organisations.

Green Employment and Skills

- Establish targeted pathways into:
- Retrofit careers
- Renewable energy jobs
- Environmental management
- Sustainable construction
- Green infrastructure maintenance
- Partner with colleges, employers, and community organisations to provide:
- Apprenticeships
- Mentoring
- Work experience
- Accredited training
- Promote green employment opportunities through community networks.

Inclusive Transport and Active Travel

- Assess barriers to active travel and public transport use among ethnic minority communities.
- Improve access to:
- Affordable cycling schemes
- Safe walking routes
- Public transport
- Community transport initiatives
- Ensure transport planning incorporates the needs of diverse communities.

Indicators

- Uptake of retrofit grants by ethnicity.
- Participation in energy efficiency programmes.
- Employment in green economy sectors by ethnicity.
- Number of residents completing green skills training.
- Public transport and active travel participation rates.
- Household energy cost savings.

Expected Outcomes

- Reduced energy costs.

- Increased employment opportunities.
- Improved access to climate adaptation resources.
- Greater economic resilience.
- More equitable climate transition.

Opportunity 4: Strengthen Climate Resilience for Migrant, Refugee and Asylum-Seeking Communities

Recognise that newly arrived migrants, refugees, asylum seekers, and people with insecure immigration status may face additional climate-health vulnerabilities due to housing insecurity, poverty, language barriers, social isolation, and limited knowledge of local services.

Action Steps:

- By 2027, integrate climate-health information into refugee and migrant orientation programmes.
- Develop partnerships with refugee support organisations to deliver climate-health education.
- Ensure emergency planning information is available in relevant community languages.
- Establish referral pathways linking migrant support services with:
- Housing support
- Health services
- Welfare advice
- Climate emergency assistance
- Train frontline staff on the intersection of climate vulnerability, migration, and health inequalities.

Indicators

- Number of migrants receiving climate-health information.
- Climate-health resources available in community languages.
- Service uptake among migrant populations.
- Staff trained on migrant-inclusive climate practice.
- Resident confidence in accessing support.

Expected Outcomes

- Improved preparedness.
- Better service access.
- Reduced vulnerability during climate emergencies.

- Stronger social integration and resilience.

Opportunity 5: Improve Climate-Health Data and Monitoring

Strengthen the collection and use of ethnicity data to identify climate-health inequalities and ensure adaptation measures are reaching those most at risk.

Action Steps:

- Establish a Climate Equity Monitoring Framework for East Sussex.
- Include ethnicity within climate-health surveillance and reporting systems.
- Monitor:
- Heat-related admissions
- Respiratory illness
- Fuel poverty
- Housing conditions
- Service access
- Uptake of climate programmes
- Produce annual climate-health equity reports.
- Use findings to inform commissioning, policy development, and resource allocation.

Indicators

- Completeness of ethnicity data collection.
- Annual publication of climate-health equity reports.
- Number of indicators monitored by ethnicity.
- Evidence of data influencing policy decisions.
- Trends in climate-health inequalities.
- Better evidence for action.
- Improved accountability.
- More targeted interventions.
- Reduction in climate-health inequalities over time.

Cross-Cutting Opportunity: Embed Environmental Justice in Climate Adaptation Planning

Ensure ethnic minority communities are represented within climate governance structures and actively involved in shaping local climate adaptation, emergency planning, environmental improvement, and public health initiatives.

Action Steps:

- Establish representation from ethnic minority communities on climate and health advisory groups.
- Conduct annual engagement exercises with diverse communities.
- Require equality impact assessments for major climate adaptation programmes.
- Monitor participation and representation in climate decision-making.
- Support community-led climate resilience projects through small grants and capacity-building programmes.

Indicators

- Representation on climate governance groups.
- Number of community-led projects funded.
- Participation rates in consultations.
- Equality impact assessments completed.
- Community perceptions of inclusion and influence.

Expected Outcomes

- Greater community ownership of climate adaptation.
- More equitable policies.
- Stronger social cohesion.
- Increased resilience across diverse communities.

Strategic Leads

- East Sussex County Council Public Health
- NHS Sussex Integrated Care Board
- East Sussex Health and Wellbeing Board

Delivery Partners

- Refugee and migrant support organisations
- Faith and community groups
- District and Borough Councils
- Housing providers
- Healthwatch East Sussex
- Primary Care Networks
- Schools and colleges
- VCSE organisations
- Environmental and transport partners

Suggested Climate Equity Dashboard Indicators

- Heat-related hospital admissions by ethnicity.
- Respiratory illness rates by ethnicity.
- Fuel poverty prevalence by ethnicity.
- Housing quality indicators.
- Access to green space.
- Participation in retrofit schemes.
- Green jobs and skills participation.
- Community engagement metrics.
- Service access during climate events.
- Climate-health inequalities over time.

Long-Term Outcome: By 2038, ethnic minority communities in East Sussex should experience equitable access to climate adaptation resources, healthier living environments, improved participation in the green transition, and measurable reductions in climate-related health inequalities.

Context and Impacts

A changing climate has the potential to widen existing ethnic health inequalities because it interacts with many of the social, economic and environmental factors that already contribute to poorer health outcomes for some ethnic minority communities. Ethnic minority groups are not inherently more vulnerable to a changing climate; rather, vulnerability arises from inequalities in income, housing, employment, access to healthcare, environmental exposures and experiences of discrimination that can increase exposure to climate-related risks and reduce capacity to adapt.

The term *ethnic minority communities* encompasses a diverse range of populations with different cultures, migration histories, languages, socioeconomic circumstances and health profiles. It is therefore important not to treat ethnic minority communities as a single homogeneous group. Climate impacts and resilience will vary considerably between communities and individuals.

The relationship between a changing climate and ethnicity is increasingly recognised as an environmental justice issue. Research consistently shows that ethnic minority populations are more likely to experience environmental inequalities, including poorer air quality, poorer housing conditions, overcrowding and reduced access to high-quality green space. These factors influence both exposure to climate hazards and vulnerability to their health impacts.

In England, many ethnic minority communities are disproportionately represented in lower-income households, insecure employment, key worker occupations and urban

areas where exposure to heat and air pollution may be greater. A changing climate therefore has the potential to reinforce existing inequalities unless adaptation measures are designed with equity at their core.

For East Sussex, ethnic diversity is lower than the national average but has increased steadily over recent decades. According to the 2021 Census, around **8.8% of East Sussex residents identified with an ethnic group other than White British**, compared with approximately **26% nationally**. However, ethnic diversity varies significantly across the county, with higher concentrations in Hastings, Eastbourne and parts of Lewes. These communities may experience different climate-related risks depending on housing conditions, employment patterns and access to services.

Health Impacts

A changing climate affects health through several interconnected pathways that can disproportionately affect some ethnic minority communities.

Air quality is one of the most important. Poor air quality is already associated with respiratory disease, cardiovascular disease, stroke, adverse pregnancy outcomes and premature mortality. A changing climate is expected to increase the frequency of high ozone episodes, extend pollen seasons and increase exposure to airborne pollutants during periods of extreme heat. Because some ethnic minority populations already experience higher rates of respiratory illness and are more likely to live in areas with poorer air quality, a changing climate may worsen existing inequalities.

Heat exposure is another significant concern. Urban environments often experience higher temperatures because of the urban heat island effect. Ethnic minority communities are more likely in many parts of England to live in densely populated urban areas where overheating risks may be greater. Overcrowded housing and limited access to green space can further increase vulnerability. Heat can exacerbate cardiovascular disease, diabetes, kidney disease and respiratory illness, all of which may already be more prevalent within some ethnic groups.

A changing climate may also affect maternal and child health. Evidence suggests that heat exposure during pregnancy is associated with increased risks of adverse birth outcomes, including preterm birth and low birth weight. Where ethnic minority women already experience poorer maternity outcomes and barriers to healthcare access, climate-related risks may contribute to widening inequalities.

Mental health impacts are increasingly recognised. Climate-related events such as flooding, extreme weather and housing disruption can contribute to stress, anxiety and reduced wellbeing. These impacts may be amplified among communities already experiencing socioeconomic disadvantage, discrimination or uncertainty relating to immigration status or housing security.

Food security may become another important pathway. A changing climate is expected to affect food systems and increase price volatility. Households on lower incomes, including some ethnic minority households, may be more vulnerable to food insecurity and associated health impacts.

Implications

The implications of a changing climate for ethnic minority communities are closely linked to wider social determinants of health. Climate risks rarely occur in isolation. Instead, they often interact with housing quality, employment conditions, income, language barriers, healthcare access and experiences of discrimination.

Housing is a particularly important factor. Ethnic minority households are more likely nationally to experience overcrowding and housing insecurity. During heatwaves, overcrowded housing can increase overheating risks and reduce opportunities to cool indoor environments. Poor-quality housing may also be more susceptible to flooding, damp and mould.

Employment patterns may also increase exposure. Ethnic minority workers are disproportionately represented in some key worker occupations, including health and social care, transport, retail, hospitality and public services. These roles may involve greater exposure to extreme weather, air pollution or service disruption during climate-related events.

The health impacts may therefore extend beyond direct exposure to environmental hazards. A changing climate can affect economic security, working conditions, access to services and overall wellbeing, potentially widening existing inequalities.

For East Sussex, understanding these implications is increasingly important as the county becomes more diverse and seeks to address health inequalities through its public health, housing and community development strategies.

Gaps

One of the most significant gaps is the limited availability of local evidence linking climate risks to ethnicity and health outcomes. While data exist on ethnicity, deprivation, housing and health, these datasets are not always analysed together to understand climate vulnerability.

There is also a tendency for climate adaptation planning to focus on geographic vulnerability rather than social vulnerability. As a result, the experiences of ethnic minority communities may not always be visible within local climate risk assessments.

Another gap concerns community voice. Many climate-related policies and programmes have not consistently involved ethnic minority communities in design and

decision-making, which can result in interventions that do not fully reflect lived experience or local priorities.

Barriers

Language and communication barriers can affect access to information about climate risks, emergency planning and available support. Public messaging may not always be culturally appropriate, accessible or trusted by all communities.

Trust can be another barrier. Experiences of discrimination or exclusion may reduce engagement with public services and limit participation in climate adaptation initiatives. Building trust is therefore an important aspect of resilience.

Socioeconomic barriers are also significant. Households facing financial hardship may have less capacity to invest in adaptation measures such as home improvements, insurance or transport. Individuals in insecure employment may have less flexibility to respond to extreme weather events or attend healthcare appointments.

Digital exclusion may further limit access to information, services and support during emergencies.

Tensions

A key tension exists between universal and targeted approaches to climate adaptation. A changing climate affects everyone, but the impacts are not experienced equally. Targeting support towards communities facing greater risks is important for reducing inequalities, but this must be balanced against concerns about stigmatisation or treating ethnic minority communities as a single group.

There is also a tension between place-based and population-based approaches. Climate adaptation often focuses on areas at greatest environmental risk, while some vulnerabilities arise from social and economic factors that may be dispersed across different locations.

Another tension concerns representation. Ethnic minority communities are frequently identified as vulnerable groups, yet they are often underrepresented in climate decision-making despite having valuable knowledge, skills and perspectives that could strengthen adaptation efforts.

Opportunities

Climate adaptation provides an opportunity to address both environmental and health inequalities simultaneously. Many adaptation measures that reduce climate risks also support wider health improvement goals.

Improving housing quality, reducing overcrowding, increasing access to green space and improving air quality can deliver substantial benefits for ethnic minority communities while strengthening climate resilience. These interventions can also contribute to reducing wider health inequalities.

There is also an opportunity to strengthen community engagement and co-production. Working directly with diverse communities can help ensure that adaptation measures are culturally appropriate, trusted and responsive to local needs.

Improved data collection and analysis offer another important opportunity. Combining information on ethnicity, health, housing, deprivation and environmental exposure can help identify communities facing multiple risks and support more targeted interventions.

Climate action can also support community empowerment. Ethnic minority communities often have strong social networks, community organisations and cultural assets that can contribute to resilience, mutual aid and local adaptation efforts.

Summary

A changing climate has the potential to widen existing ethnic health inequalities by interacting with factors such as housing, income, employment, environmental exposure and access to services. The greatest risks arise not from ethnicity itself, but from the social and structural inequalities that shape vulnerability and resilience. Heat, poor air quality, flooding, food insecurity and mental health impacts may disproportionately affect some ethnic minority communities if adaptation measures are not designed equitably. However, climate adaptation also presents an opportunity to improve housing, reduce environmental inequalities, strengthen community resilience and support more equitable health outcomes. By embedding inclusion, participation and equity within climate planning, East Sussex can help ensure that ethnic minority communities are protected from climate-related harms and benefit from a healthier, more resilient future.

7. Gypsy and Traveller Communities

High Level Strategic Opportunity:

Create a climate-resilient East Sussex where Gypsy and Traveller communities are protected from climate-related health risks, able to access trusted information and services, live in safe and resilient environments, and are actively involved in shaping the policies and decisions that affect them. Through a strengths-based and

community-centred approach, climate adaptation should contribute to improved health outcomes, reduced inequalities, stronger community resilience and greater trust between services and communities.

Rationale:

Gypsy and Traveller communities often experience some of the poorest health outcomes in the UK and can face multiple, intersecting inequalities, including insecure accommodation, environmental exposures, barriers to healthcare, discrimination and social exclusion. These existing vulnerabilities may increase the health impacts of climate-related risks such as extreme heat, flooding, poor air quality, severe weather and disruption to essential services, particularly for those living on sites with inadequate infrastructure or limited access to utilities. Building climate resilience requires culturally appropriate engagement, trusted communication, equitable access to health and support services, and meaningful involvement of Gypsy and Traveller communities in the design and delivery of policies that affect them. A strengths-based, community-centred approach can help reduce health inequalities, improve preparedness and adaptive capacity, strengthen trust between communities and services, and ensure that climate adaptation contributes to better health, greater resilience and more inclusive outcomes.

Considerations, Opportunities and Action Steps:

Opportunity 1: Build Trusted, Face-to-Face Communication Channels for Climate Health Information

Develop trusted, culturally appropriate communication systems that ensure Gypsy and Traveller residents can access, understand, and act on climate-health information during heatwaves, flooding, storms, cold weather, poor air quality episodes, and other emergencies.

Action Steps:

Develop a Climate Health Communication Toolkit for Gypsy and Traveller communities using plain language, images, audio formats, and culturally relevant messaging.

Distribute climate-health materials to 100% of permanent and transit sites and through all Friends, Families and Travellers (FFT) outreach services.

Establish a climate-health communication pathway through the FFT helpline, minibus outreach service, Traveller Team, and community champions.

Produce seasonal climate-health campaigns twice annually (summer and winter).

Develop short video and voice-note climate alerts for sharing via WhatsApp and community networks.

Indicators

- Number of climate-health materials distributed.
- Percentage of sites receiving seasonal information.
- Number of residents reached through FFT outreach.
- Community understanding of climate-health messages.
- Feedback on accessibility and trustworthiness of communications.
- Uptake of Weather Health Alert information.

Expected Outcomes

- Improved awareness of climate-related health risks.
- Increased uptake of preventative actions.
- Reduced communication inequalities during emergencies.

Opportunity 2: Ensure Health Advice and Services Remain Accessible During Climate Events

Ensure health and wellbeing services remain accessible during extreme weather and climate emergencies, reducing barriers related to discrimination, mobility, literacy, digital exclusion, and lack of fixed addresses.

Action Steps:

- Review all NHS Sussex and East Sussex County Council climate-related communications against Accessible Information Standard requirements.
- Expand mobile health outreach services to provide regular climate-health clinics in Eastbourne, Hastings, Wealden, and Bridie's Tan.
- Ensure all climate emergency plans include provisions for residents without fixed postal addresses.
- Train FFT Young Health Champions to provide peer support on heat, cold, air pollution, respiratory health, and wildfire safety.
- Develop a climate-health outreach programme delivering vaccinations, health checks, and climate advice directly to sites.

Indicators

- Number of outreach clinics delivered annually.

- Attendance at mobile clinics.
- Percentage of services compliant with accessibility standards.
- Number of Young Health Champions trained.
- Service utilisation during climate events.
- Resident satisfaction with service accessibility.

Expected Outcomes

- Improved access to health services.
- Reduced disruption during extreme weather.
- Increased preventative healthcare uptake.

Opportunity 3: Reduce Health Risks Caused by Insecure, Poor Quality or Unauthorised Accommodation

Improve the climate resilience of accommodation and site infrastructure while recognising the health impacts of housing insecurity, unauthorised encampments, and transitions into settled housing.

Action Steps:

- Complete climate resilience assessments of all permanent and transit sites in East Sussex.
- Implement priority improvements including drainage, shade structures, cooling spaces, water access, and storm resilience measures.
- Develop site-specific emergency response plans covering heatwaves, flooding, storms, wildfire risk, and power outages.
- Ensure climate and health needs are considered during management of unauthorised encampments.
- Establish support pathways for families moving into housing, including mental health support, GP registration assistance, and community integration.

Indicators

- Number of sites assessed.
- Number of resilience improvements completed.
- Incidence of flooding, overheating, or infrastructure failures.
- Resident satisfaction with site conditions.
- Number of households supported during housing transitions.
- Emergency incidents linked to accommodation conditions.

Expected Outcomes

- Reduced exposure to climate hazards.
- Improved physical and mental wellbeing.
- Greater housing stability and resilience.

Opportunity 4: Embed Inclusive Practice in All Climate Health Work

Ensure all climate-health planning and service delivery actively address discrimination and promote equitable access for Gypsy and Traveller communities.

Action Steps:

- By March 2027, implement mandatory Gypsy and Traveller inclusion training across health, housing, social care, public health, emergency planning, and local authority services.
- Require all climate adaptation programmes to undertake equality impact assessments that include Gypsy and Traveller communities.
- Adopt "Take the Pledge" commitments across partner organisations.
- Develop reporting mechanisms for discrimination experienced during climate emergencies.
- Include Gypsy and Traveller representatives in climate-health governance structures.

Indicators

- Percentage of staff completing inclusion training.
- Number of organisations adopting inclusion commitments.
- Equality impact assessments completed.
- Reported experiences of discrimination.
- Community confidence in local services.

Expected Outcomes

- Improved trust in services.
- Reduced discrimination.
- More equitable climate adaptation.

Opportunity 5: Use Culturally Embedded Engagement to Share Climate-Related Health Advice

Expanded Opportunity: Use existing cultural networks, traditions, and trusted community activities to improve climate-health awareness and engagement.

Action Steps:

- Deliver climate-health workshops through existing FFT activities, family events, youth programmes, and cultural gatherings.
- Develop culturally tailored educational materials incorporating lived experiences and community stories.
- Use Gypsy, Roma and Traveller History Month to deliver annual climate-health awareness campaigns.
- Support community climate champions to facilitate peer-led discussions.
- Create climate-health resources that celebrate cultural strengths and resilience.

Indicators

- Number of engagement events delivered.
- Attendance at community sessions.
- Number of climate champions recruited.
- Community awareness levels.
- Feedback on cultural relevance of materials.

Expected Outcomes

- Increased engagement.
- Greater trust in health messaging.
- Improved community resilience.

Opportunity 6: Remove Practical Barriers to Contacting Services During Climate Emergencies

Ensure residents can access help quickly during climate-related emergencies regardless of literacy level, technology access, or communication preferences.

Action Steps:

- By March 2027, establish alternative communication routes including WhatsApp voice notes, outreach visits, and drop-in support sessions.
- Develop low-literacy climate emergency guides using visual instructions and translated content where appropriate.
- Create emergency contact cards distributed through outreach teams.
- Implement rapid-response outreach visits during severe weather alerts.
- Establish referral pathways linking health, housing, welfare, and emergency support.

Indicators

- Number of residents receiving communication support.
- Number of emergency outreach visits.
- Uptake of alternative communication methods.
- Response times during severe weather.
- Resident satisfaction with communication accessibility.

Expected Outcomes

- Faster access to support.
- Reduced emergency risks.
- Improved service navigation.

Opportunity 7: Support Gypsy and Traveller Young People as Climate Health Ambassadors

Empower young people to become leaders in climate-health awareness, resilience building, and peer education.

Action Steps:

- By March 2028, provide annual climate-health training to all FFT Young Health Champions.
- Develop accredited climate-health modules within existing Level 2 Health Champion programmes.
- Deliver youth workshops covering heat safety, flood awareness, air quality, wildfire risks, and mental wellbeing.
- Support youth-led climate-health projects and peer education activities.
- Create opportunities for young people to contribute to local climate planning.

Indicators

- Number of young people trained.
- Number achieving qualifications.
- Youth-led projects completed.
- Peer engagement activities delivered.
- Knowledge and confidence measures among participants.

Expected Outcomes

- Increased youth leadership.
- Improved climate-health awareness.

- Stronger community resilience.

Opportunity 8: Strengthen Multi-Agency Coordination for Climate Resilience

Expanded Opportunity: Improve collaboration across organisations to ensure coordinated support before, during, and after climate-related emergencies.

Action Steps:

- Add climate resilience as a standing agenda item at all East Sussex Gypsy and Traveller Professional Group meetings from 2027 onward.
- Develop a multi-agency climate response protocol for Gypsy and Traveller communities.
- Create a shared climate resilience directory identifying available services and responsibilities.
- Conduct annual multi-agency exercises involving climate emergency scenarios.
- Integrate Traveller site planning into wider county emergency planning and climate adaptation strategies.

Indicators

- Number of meetings including climate resilience discussions.
- Completion of response protocols.
- Multi-agency exercise participation rates.
- Number of agencies contributing to resilience planning.
- Community feedback on coordinated responses.

Expected Outcomes

- Better coordinated support.
- Faster emergency response.
- Stronger partnerships.

Opportunity 9: Track Climate Health Inequalities Affecting Gypsy and Traveller Communities

Expanded Opportunity: Develop robust monitoring systems to identify climate-health inequalities and evaluate the effectiveness of interventions.

Action Steps:

- By March 2027, establish a Gypsy and Traveller Climate Health Indicator Framework.
- Create an annual climate-health inequalities report for East Sussex.
- Collect data on:
- Heat-related illness
- Respiratory conditions
- Service access
- Mental health
- Housing conditions
- Emergency incidents
- Outreach participation
- Include qualitative feedback from residents through annual engagement exercises.
- Review progress annually with FFT, NHS Sussex, East Sussex County Council, and community representatives.

Indicators

- Annual report published.
- Number of indicators monitored.
- Participation in annual reviews.
- Trends in health outcomes.
- Changes in service access and uptake.
- Community satisfaction with climate-health interventions.

Expected Outcomes

- Better evidence for decision-making.
- Improved accountability.
- Reduction in climate-related health inequalities over time.

Lead Organisations

- East Sussex County Council Public Health
- NHS Sussex Integrated Care Board
- East Sussex Traveller Team
- Friends, Families and Travellers (FFT)

Supporting Partners

- East Sussex Local Resilience Forum
- Primary Care Networks

- Sussex Community NHS Foundation Trust
- Healthwatch East Sussex
- VCSE Organisations
- Education Providers
- Emergency Services

Cross-Cutting Principle

All actions should be:

- Co-produced with Gypsy and Traveller residents.
- Trauma-informed and culturally competent.
- Accessible regardless of literacy level.
- Delivered through trusted relationships.
- Monitored through annual public reporting and community feedback mechanisms.

Context and Impacts

A changing climate has the potential to exacerbate existing health inequalities experienced by Gypsy and Traveller communities. Across England, Gypsy and Traveller populations experience some of the poorest health outcomes of any ethnic group, including lower life expectancy, higher prevalence of long-term conditions, poorer mental health, higher rates of disability, and greater barriers to accessing healthcare and other public services. These inequalities are driven by a complex interaction of social exclusion, discrimination, poverty, poor living conditions and limited access to services.

A changing climate is unlikely to create new inequalities for Gypsy and Traveller communities; rather, it is likely to amplify existing vulnerabilities. The impacts of heatwaves, flooding, water scarcity, severe weather and poor air quality may be felt more acutely because of housing circumstances, site conditions, occupational exposure and barriers to accessing support.

For many Gypsy and Traveller households, accommodation remains a key determinant of health. People may live on authorised public sites, authorised private sites, unauthorised encampments, roadside locations or conventional housing. The quality, location and environmental resilience of these settings can vary considerably. Climate risks therefore affect different parts of the community in different ways, but common themes include exposure to extreme weather, limited infrastructure resilience and challenges accessing emergency support.

In East Sussex, the Gypsy and Traveller population is relatively small compared with some areas of England, but the county contains a number of authorised sites and

experiences periodic unauthorised encampments. East Sussex County Council and district and borough councils have recognised the need to ensure sufficient site provision and equitable access to services. Climate adaptation must therefore be considered alongside broader efforts to reduce health inequalities and improve inclusion.

Health Impacts

Heat represents one of the most significant climate-related health risks. Caravans, mobile homes and trailers can heat up rapidly during hot weather and may retain heat for prolonged periods, particularly where there is limited shading, ventilation or access to cooling measures. During heatwaves, indoor temperatures can become significantly higher than external temperatures, increasing the risk of dehydration, heat exhaustion and heat stress.

These risks are particularly important for older members of Gypsy and Traveller communities, young children, pregnant women and individuals living with long-term conditions. Heat can worsen cardiovascular disease, respiratory illness, diabetes and kidney disease while also increasing fatigue and reducing wellbeing.

Flooding presents another significant concern. Some Gypsy and Traveller sites are located on lower-cost land that may be more vulnerable to flooding or poor drainage. Flooding can damage accommodation, affect sanitation facilities, interrupt access to clean water and increase exposure to damp and mould. In addition to the physical health impacts, flooding can result in significant stress, anxiety and disruption to family and community life.

Poor air quality may also affect health outcomes. Gypsy and Traveller communities already experience higher rates of respiratory illness than the general population. Increasing temperatures and longer periods of poor air quality may worsen asthma and other respiratory conditions, particularly among children and older adults.

Mental health impacts should not be underestimated. Climate-related disruption can add to existing experiences of uncertainty, exclusion and discrimination. Flooding, heatwaves and displacement can contribute to anxiety, stress and reduced wellbeing. Climate anxiety may also be experienced, particularly where communities feel excluded from decision-making processes that affect their future.

Implications

The health impacts of a changing climate on Gypsy and Traveller communities are likely to be shaped by wider social determinants of health. Lower average incomes,

poorer housing conditions, limited access to healthcare and experiences of discrimination can reduce resilience and increase vulnerability.

Climate-related events may create additional barriers to healthcare access. Severe weather can affect transport, while disruption to services may disproportionately affect individuals who already face challenges registering with primary care services or accessing routine healthcare. Preventative health interventions may therefore be harder to deliver during periods of disruption.

There are also implications for education and employment. Flooding, heatwaves and severe weather can affect school attendance and educational continuity for children and young people. Adults working in occupations with significant outdoor exposure may experience increased health risks during periods of extreme heat.

The impacts are likely to be cumulative. A changing climate may interact with existing health inequalities, resulting in disproportionate effects on physical health, mental wellbeing and quality of life.

Gaps

One of the most significant challenges is the lack of robust data. Gypsy and Traveller communities are often underrepresented in health datasets, making it difficult to fully understand health needs and climate-related vulnerabilities.

There is limited local evidence regarding the climate resilience of Gypsy and Traveller sites, including exposure to overheating, flooding and infrastructure disruption. Information about health outcomes, service access and climate impacts is often incomplete or inconsistently recorded.

This data gap can make it difficult for organisations to identify risks, target interventions and evaluate whether adaptation measures are reaching those most in need.

Barriers

Barriers to climate resilience are closely linked to wider inequalities. Accommodation quality and site infrastructure can limit the ability to adapt to extreme weather. Access to cooling measures, flood protection, energy-efficient housing and insurance may be more restricted than for the general population.

Trust is another important issue. Historical experiences of discrimination and exclusion may reduce engagement with public services, including climate adaptation initiatives. Communication during emergencies may not always be culturally appropriate or accessible, creating additional barriers to preparedness and response.

Financial constraints can also limit adaptation options. Households facing economic hardship may be less able to invest in resilience measures or recover from climate-related damage.

Tensions

There is a tension between addressing immediate accommodation needs and investing in long-term climate resilience. Many discussions regarding Gypsy and Traveller communities focus on site provision and planning, while climate adaptation may be viewed as a secondary concern. However, the two issues are increasingly interconnected.

Another tension relates to visibility. Communities may experience significant vulnerability while simultaneously being poorly represented in datasets and planning processes. This can result in climate risks being overlooked despite evidence of wider health inequalities.

There is also a tension between standardised adaptation approaches and culturally appropriate solutions. Measures designed for conventional housing may not always be suitable for the diverse accommodation arrangements found within Gypsy and Traveller communities.

Opportunities

Climate adaptation provides an opportunity to address both environmental risks and longstanding health inequalities. Improving site infrastructure, drainage, sanitation, shading, access to water and energy efficiency could deliver immediate health benefits while increasing resilience to a changing climate.

There is also an opportunity to improve engagement with Gypsy and Traveller communities through co-production and community-led approaches. Involving community members in planning and decision-making can help ensure that adaptation measures are practical, culturally appropriate and trusted.

Better data collection represents another important opportunity. Improving understanding of local population needs, site conditions and climate vulnerabilities would support more targeted interventions and enable progress to be monitored over time.

More broadly, climate adaptation can be integrated into wider programmes focused on housing, inclusion, health improvement and reducing inequalities. By addressing the underlying social determinants of health alongside climate risks, East Sussex can strengthen resilience and improve health outcomes for Gypsy and Traveller communities.

Summary

A changing climate is likely to amplify existing health inequalities experienced by Gypsy and Traveller communities through increased exposure to heat, flooding, poor air quality and service disruption. These impacts are shaped by wider issues including accommodation quality, poverty, discrimination and access to healthcare. Although evidence gaps remain, particularly at local level, there are significant opportunities to improve resilience through better site infrastructure, stronger community engagement, improved data collection and targeted action to address both climate risks and the broader determinants of health. By embedding climate adaptation within wider efforts to reduce inequalities, East Sussex can help ensure that Gypsy and Traveller communities are not left behind in the transition to a more climate-resilient future.

8. The Homeless

High Level Strategic Opportunity:

Create a climate-resilient East Sussex where people experiencing homelessness are protected from climate-related health risks, have access to safe and climate-adapted accommodation, receive integrated health and support services, and are actively involved in shaping the policies and services designed to protect them. Climate adaptation should contribute to preventing avoidable illness and deaths, improving health outcomes, reducing inequalities and strengthening inclusion health across the county.

Rationale:

People experiencing homelessness are among the populations most vulnerable to the health impacts of a changing climate due to direct exposure to extreme heat, cold, flooding, storms, poor air quality and other environmental hazards, alongside high levels of physical ill health, mental illness, substance dependence and barriers to accessing healthcare and support services. Climate-related events can further disrupt access to safe accommodation, healthcare, medication, food, water and essential support, increasing the risk of illness, injury and premature mortality. Developing a climate-resilient inclusion health approach that provides safe, climate-adapted accommodation, integrated health and support services, and meaningful involvement of people with lived experience in service design will help reduce inequalities, strengthen resilience and improve health outcomes across East Sussex.

Key climate-health risks include:

- Direct exposure to extreme heat, cold, flooding, storms and poor air quality, particularly among people sleeping rough.
- High prevalence of chronic physical and mental health conditions, substance misuse and complex trauma, increasing vulnerability to climate-related illness.
- Poor-quality temporary accommodation vulnerable to overheating, cold, damp and mould.
- Limited access to healthcare, medication, support services and climate adaptation resources.
- Reduced ability to receive climate warnings or take protective action during emergencies.
- Increasing pressure on homelessness, health and support services as climate-related events become more frequent and severe.

Considerations, Opportunities and Action Steps:

Opportunity 1: Deliver Year-Round Severe Weather Protection

Move beyond traditional cold-weather responses by implementing a year-round Severe Weather Emergency Protocol (SWEP) that protects people experiencing homelessness from heatwaves, extreme cold, flooding, storms, poor air quality and other climate-related hazards. Climate resilience should become a core component of homelessness prevention, emergency planning and service delivery.

Action Steps:

- **Develop a climate-responsive SWEP** that includes clear activation thresholds for heatwaves, extreme cold, flooding, storms, wildfires and poor air quality, aligned with UKHSA Weather Health Alerts and Local Resilience Forum arrangements.
- **Provide access to safe emergency accommodation** during severe weather events, ensuring facilities offer essential support including drinking water, heating and cooling, hygiene facilities, charging points, basic healthcare and mental health support.
- **Strengthen outreach and preventative support** by equipping outreach teams with climate-health resources (including water, sun protection, warm clothing, emergency blankets and air quality advice), undertaking proactive welfare checks during weather alerts, and providing emergency transport to safe accommodation where required.

Indicators

- Number of SWEP activations by hazard type.
- Number of individuals accessing emergency accommodation during climate events.
- Number of welfare checks and outreach contacts completed during weather alerts.
- Heat-related and cold-related hospital admissions and mortality among people experiencing homelessness.

Expected Outcomes

- Reduced illness and mortality during extreme weather events.
- Earlier identification and support for vulnerable individuals.
- Improved access to safe accommodation and integrated support services.
- Increased resilience and preparedness across homelessness services.

Opportunity 2: Develop Climate-Resilient Accommodation Standards

Expanded Opportunity: Ensure all temporary accommodation, hostels, supported housing, and emergency shelters are safe, healthy, and resilient to current and future climate conditions.

Housing quality is a critical determinant of health and should be central to climate adaptation efforts for people experiencing homelessness.

Action Steps:

- **Establish minimum climate-health standards** for all homelessness accommodation, covering thermal comfort, ventilation, cooling, insulation, flood resilience, damp and mould prevention, indoor air quality and water efficiency.
- **Assess and improve climate resilience** by undertaking climate resilience audits of hostels, temporary accommodation, supported housing and emergency shelters by 2030, and implementing a risk-based programme of improvements.
- **Invest in climate adaptation and retrofit** by securing funding to improve insulation, ventilation, shading, cooling, flood resilience and energy efficiency across homelessness accommodation.
- **Enhance green infrastructure and wellbeing** by incorporating trees, shade, sustainable drainage, rain gardens and restorative green spaces within and around homelessness services to improve climate resilience and mental wellbeing.

Indicators

- Percentage of homelessness accommodation assessed for climate resilience.
- Number of accommodation units upgraded.

- Reported incidents of overheating, damp and mould.
- Energy performance ratings of accommodation.
- Resident satisfaction with accommodation quality.
- Number of sites incorporating green infrastructure.

Expected Outcomes

- Safer, healthier and more climate-resilient accommodation.
- Reduced heat-related, respiratory and cardiovascular illness.
- Improved mental wellbeing and quality of life.
- Lower energy costs, emissions and operational risks.
- Increased resilience across homelessness services.

Opportunity 3: Integrate Climate and Health Support Within Inclusion Health Services

Embed climate-health risk assessment, prevention, and support within homelessness health services, mental health provision, substance misuse services, and inclusion health pathways.

Climate impacts should be recognised as an additional determinant of health affecting people experiencing homelessness.

Action Steps:

- **Embed climate-health into clinical practice** by developing climate-health guidance for homelessness, inclusion health, mental health, substance misuse and primary care services by 2027, incorporating assessment of heat and cold exposure, air pollution, flooding, housing conditions, and hydration and nutrition needs.
- **Strengthen workforce capability** by training frontline staff on climate-related health risks, including heat illness, hypothermia, air pollution, climate-related mental health and trauma-informed care, and embedding climate-health awareness within induction and continuing professional development.
- **Enhance mental health support** by integrating climate-related stress, anxiety and trauma into routine mental health assessments and developing specialist support pathways for people experiencing repeated climate-related events and environmental trauma.
- **Strengthen climate-health surveillance** by establishing a local monitoring framework to routinely collect and report data on climate-related illness, hospital admissions, mental health impacts, mortality and service utilisation during climate events.

Indicators

- Percentage of staff receiving climate-health training.
- Number of climate-health assessments completed.
- Hospital admissions associated with extreme weather.
- Mental health service utilisation during climate events.
- Number of individuals receiving climate-related support.
- Inclusion of climate-health indicators within homelessness reporting systems.

Expected Outcomes

- Earlier identification of climate-related health risks.
- Improved continuity and quality of care.
- Better mental health and trauma support.
- Stronger integration between health, homelessness and inclusion health services.
- Improved evidence to inform planning, commissioning and service improvement.

Cross-Cutting Opportunity: Strengthen Inclusion of People with Lived Experience in Climate Planning

Ensure people with lived experience of homelessness are actively involved in designing, delivering, and evaluating climate adaptation and emergency planning measures.

People experiencing homelessness have unique knowledge of local climate risks and service barriers that should inform policy and practice.

Action Steps:

- **Establish a Homelessness and Climate Advisory Group** by 2027 to provide ongoing lived experience input into climate adaptation, homelessness strategies, emergency planning and service improvement.
- **Embed co-production across planning and delivery** by involving people with lived experience in policy development, emergency planning exercises, service design, annual engagement events, climate-health communications and emergency response planning.
- **Strengthen peer leadership** by supporting peer mentors and experts by experience to contribute to staff training, service evaluation and community engagement.

Indicators

- Number of people with lived experience involved in planning and decision-making.

- Number of co-produced policies, services and initiatives.
- Evidence of service or policy improvements resulting from lived experience.
- Service user satisfaction, wellbeing and participation rates.

Expected Outcomes

- More effective, person-centred and responsive services.
- Increased trust, engagement and service accessibility.
- Better-targeted climate adaptation and emergency planning.
- Stronger resilience among people experiencing homelessness.

Strategic Leads

- East Sussex County Council Public Health
- District and Borough Housing Authorities
- NHS Sussex Integrated Care Board
- Sussex Resilience Forum

Delivery Partners

- Homeless Link
- St Mungo's
- Southdown Housing
- Change Grow Live
- Primary Care Networks
- Sussex Partnership NHS Foundation Trust
- Voluntary and Community Sector organisations
- Emergency Services
- Faith and Community Organisations

Suggested Dashboard Indicators

- Rough sleeper mortality during extreme weather events.
- SWEP activations (heat and cold).
- Heat- and cold-related emergency admissions.
- Climate resilience and quality of temporary accommodation.
- Overheating incidents within homelessness accommodation.
- Mental health presentations during climate-related events.
- Outreach interventions and emergency accommodation uptake during weather alerts.
- Resident wellbeing and satisfaction.

Long-Term Outcome: By 2038, all homelessness services in East Sussex should operate within a climate-resilient system that prevents avoidable illness and deaths, provides safe accommodation during all weather conditions, and ensures people experiencing homelessness are fully included in climate adaptation planning and public health protection measures.

Context and Impacts

Homelessness includes a broad range of circumstances beyond rough sleeping. It encompasses people sleeping on the streets, living in hostels or shelters, staying in temporary accommodation, sofa surfing, living in insecure or overcrowded housing, and those at imminent risk of losing their home. Many people experiencing homelessness also have multiple and interconnected needs relating to mental health, substance use, physical health, disability, domestic abuse, offending histories or poverty.

The recently adopted East Sussex Housing Partnership Strategy identifies homelessness prevention and ending rough sleeping as central priorities for the county and recognises the importance of integrating housing, health, social care and support services to address these complex needs.

A changing climate poses a particularly severe risk to people experiencing homelessness because housing is one of the primary determinants of resilience to environmental hazards. While most people can seek shelter from heatwaves, storms, flooding or poor air quality, people without stable accommodation often have limited ability to protect themselves from these risks.

A changing climate does not create homelessness, but it can intensify many of the factors associated with it. Rising living costs, housing affordability pressures, flooding, extreme weather events and economic disruption can increase housing insecurity and place more households at risk of homelessness. At the same time, people already experiencing homelessness are disproportionately exposed to climate hazards because they often lack safe, secure and climate-resilient accommodation.

The East Sussex Housing Partnership Strategy highlights the strong relationship between housing and health and identifies homelessness, health inequalities and multiple compound needs as major local priorities. The strategy also recognises a changing climate as a strategic housing issue and has established a dedicated Climate Change and Net Zero Group alongside its homelessness and support structures.

People experiencing homelessness already have significantly poorer health outcomes than the general population. National evidence consistently shows higher rates of cardiovascular disease, respiratory disease, mental ill health, substance dependence,

infectious disease and premature mortality among homeless populations. A changing climate therefore interacts with a population that is already highly vulnerable before any climate-related impacts occur.

Health Impacts

Heat is emerging as one of the most significant climate-related risks. People sleeping rough may spend prolonged periods exposed to direct sunlight, high temperatures and limited access to drinking water. During heatwaves, this can lead to dehydration, heat exhaustion, heatstroke, kidney injury and worsening of pre-existing health conditions.

Many people experiencing homelessness have underlying health conditions that increase vulnerability to heat. Cardiovascular disease, respiratory disease, diabetes, epilepsy, severe mental illness and substance dependence can all reduce resilience during periods of extreme temperature. Some medications, including antipsychotics, antidepressants and medications used in addiction treatment, can further impair the body's ability to regulate temperature.

Flooding and severe weather create additional risks. People sleeping rough may lose possessions, medications, identification documents and contact with support services. Flooding can also damage temporary accommodation, increase exposure to damp and mould, and disrupt access to food, healthcare and social support. For individuals who have experienced trauma, extreme weather events can contribute to further psychological distress and insecurity.

Air quality is another important pathway through which a changing climate affects health. People experiencing homelessness are often exposed to higher levels of outdoor pollution because they spend more time outdoors and may live in areas close to major transport routes or urban centres. Poor air quality can worsen asthma, chronic obstructive pulmonary disease (COPD), cardiovascular disease and other chronic conditions.

Mental health impacts are substantial. Homelessness is already associated with elevated rates of anxiety, depression, post-traumatic stress disorder and severe mental illness. Climate-related events such as flooding, storms and extreme heat can increase stress and uncertainty while disrupting support networks and services that many people depend upon.

Implications for East Sussex

The implications for East Sussex extend beyond rough sleeping. Local housing and homelessness partners have identified increasing pressures relating to temporary accommodation, multiple compound needs and housing affordability. The East Sussex

Housing Partnership Strategy recognises that good housing is fundamental to health and that homelessness is closely linked to wider health inequalities. It also highlights the need for stronger collaboration between housing, health, mental health and care services.

A changing climate is likely to increase pressure on these systems. Heatwaves may increase demand for emergency accommodation and outreach services. Flooding could affect temporary accommodation, disrupt housing services and increase risks for people living in insecure housing. Severe weather may also make it harder for outreach teams, healthcare professionals and voluntary organisations to maintain contact with vulnerable individuals.

The East Sussex housing strategy work highlights the growing importance of housing as a public health intervention and specifically identifies people with multiple compound needs—including homelessness, mental health needs, substance use and domestic abuse—as a priority group. A changing climate is likely to amplify these overlapping vulnerabilities.

Gaps

One of the largest gaps is data. While homelessness and rough sleeping are monitored, there is very limited local evidence linking climate hazards directly to health outcomes among homeless populations. Information on heat-related illness, flooding impacts, service disruption and climate-related mortality among people experiencing homelessness is not routinely collected or reported.

There is also limited understanding of climate risks within different forms of homelessness. People sleeping rough, living in temporary accommodation, sofa surfing or living in insecure housing may face very different climate-related risks, yet these differences are rarely reflected in local climate adaptation planning.

Another gap is the limited inclusion of homelessness within many climate resilience frameworks. Adaptation planning often focuses on infrastructure and buildings, whereas people experiencing homelessness may have little or no access to those protective environments.

Barriers

The most significant barrier is the absence of stable housing itself. Individuals without secure accommodation have limited ability to adapt to heat, flooding or severe weather. They cannot easily install cooling measures, improve insulation, access insurance or modify their environment in response to climate risks.

Financial insecurity creates further challenges. Many people experiencing homelessness lack the resources to replace possessions, travel to safer locations or recover from climate-related losses. Access to healthcare may already be fragmented, making it harder to receive preventative advice or support during extreme weather events.

Service accessibility can also be a barrier. Climate information, heat-health alerts and emergency preparedness messages may not always reach people who are sleeping rough or living in unstable accommodation. Digital exclusion can further limit access to support and information.

Tensions

There is a fundamental tension between emergency response and long-term prevention. During heatwaves or severe weather events, services often focus on immediate crisis responses such as emergency accommodation, welfare checks and outreach. While essential, these interventions do not address the underlying drivers of homelessness.

There is also a tension between housing supply pressures and climate resilience. Temporary accommodation may provide immediate shelter but may itself be vulnerable to overheating, poor ventilation, damp, flooding or poor energy efficiency. The need to provide accommodation quickly can sometimes conflict with the need to provide accommodation that is climate resilient.

Another tension exists between service demand and system capacity. A changing climate is likely to increase pressures on housing, health and social care services at a time when many services are already experiencing high levels of demand.

Opportunities

Climate adaptation presents an opportunity to strengthen homelessness prevention and reduce health inequalities simultaneously. Secure, affordable and healthy housing is one of the most effective climate adaptation measures available because it reduces exposure to environmental hazards while improving physical and mental health.

The East Sussex Housing Partnership Strategy provides a strong foundation for this approach through its emphasis on preventing homelessness, reducing health inequalities and improving integration between housing, health and care services. The strategy's recognition of a changing climate as a housing issue creates an opportunity to embed climate resilience within homelessness prevention, temporary accommodation standards and support services.

There is also an opportunity to develop targeted heatwave and severe weather plans for people experiencing homelessness, improve climate resilience within temporary accommodation, strengthen outreach services during extreme weather and improve the sharing of data between housing, health and emergency planning partners.

More broadly, climate adaptation can support the transition from crisis management to prevention. By addressing housing quality, energy efficiency, affordability and support needs together, East Sussex can improve resilience to a changing climate while also reducing homelessness and improving health outcomes.

Summary

People experiencing homelessness are among the groups most vulnerable to the health impacts of a changing climate because they have limited protection from heatwaves, flooding, storms and poor air quality, while often experiencing multiple pre-existing health and social disadvantages. A changing climate is likely to worsen existing health inequalities and increase pressure on housing, health and support services. However, it also reinforces the importance of housing as a public health intervention. For East Sussex, integrating climate resilience into homelessness prevention, housing provision and support services offers an opportunity to improve both health outcomes and long-term resilience for one of the county's most vulnerable populations.

9. Low Income Households

High Level Strategic Opportunity:

Create a climate-resilient East Sussex where low-income households are protected from climate-related health risks, able to live in safe, affordable and climate-resilient homes, supported by strong community networks and able to benefit from the economic, health and social opportunities created through climate adaptation and the transition to a low-carbon economy. Through targeted investment and inclusive decision-making, climate action should reduce fuel poverty, improve health outcomes, strengthen financial resilience and narrow health inequalities.

Rationale:

Low-income households are disproportionately affected by the health impacts of a changing climate due to poorer housing conditions, fuel poverty, financial insecurity and reduced capacity to prepare for, respond to and recover from climate-related

events. In East Sussex, these risks are concentrated in areas experiencing multiple deprivation, particularly parts of Hastings, Eastbourne, Lewes, Newhaven, Bexhill and some rural communities. Climate-related hazards, including extreme heat, flooding, poor air quality and rising energy costs, can exacerbate existing health inequalities, worsen physical and mental health, increase financial hardship and reduce access to essential services, employment and community support. At the same time, climate adaptation and the transition to a low-carbon economy provide important opportunities to improve housing quality, reduce fuel poverty and energy costs, create employment, strengthen community resilience and improve health and wellbeing. Targeted investment, equitable access to climate adaptation measures and inclusive decision-making will help ensure that low-income households are protected from climate-related risks and share fairly in the benefits of a healthier, more resilient and low-carbon future.

Considerations, Opportunities and Action Steps:

Opportunity 1: Improve Housing Quality, Thermal Comfort and Climate Resilience

Prioritise investment in climate-resilient, energy-efficient housing to reduce health inequalities associated with poor housing, fuel poverty, overheating, damp, mould, and extreme weather exposure.

Improving housing conditions offers one of the greatest opportunities to deliver climate adaptation, reduce health inequalities, lower energy costs, and improve wellbeing simultaneously.

Action Steps:

- **Deliver a targeted housing retrofit programme** by using deprivation, fuel poverty, health vulnerability and climate risk data to identify priority neighbourhoods and improve the energy efficiency and climate resilience of at least 5,000 homes. Priority should be given to households with children, older adults, people with disabilities or long-term health conditions, and those experiencing fuel poverty.
- **Integrate housing and health services** by introducing routine assessment of damp, mould, cold homes, overheating and fuel poverty within health, care and housing services, supported by clear referral pathways between healthcare, housing, environmental health and energy advice providers.
- **Expand community-based energy advice and support** by increasing access to fuel poverty, energy efficiency and retrofit advice through trusted community settings, including outreach for residents who are unable to access digital services.

Indicators

- Number of homes retrofitted and meeting minimum energy efficiency standards.
- Number of households receiving fuel poverty and energy advice support.
- Prevalence of damp, mould and overheating in homes.
- Winter excess deaths and emergency admissions associated with cold- and heat-related illness.
- Average household energy costs in priority communities.

Expected Outcomes

- Reduced fuel poverty and household energy costs.
- Improved housing quality, health and wellbeing.
- Reduced respiratory, cardiovascular, cold- and heat-related illness.
- Lower carbon emissions from the housing sector.
- Reduced excess winter deaths and heat-related illness.
- Improved housing quality and wellbeing.
- Reduced carbon emissions from housing.

Opportunity 2: Strengthen Heatwave, Cold Weather and Climate Emergency Protection

Develop proactive, neighbourhood-based resilience systems that identify vulnerable residents early and provide targeted support before, during, and after extreme weather events.

Moving from emergency response to prevention will improve health outcomes while reducing pressure on health and social care services.

Action Steps:

- **Develop coordinated community early warning systems** by integrating UKHSA Weather Health Alerts with local resilience partners, including social prescribing networks, housing associations, faith organisations and voluntary sector organisations. Establish local vulnerability registers to identify and support residents at greatest risk from heatwaves, cold weather, flooding and power outages.
- **Expand a network of climate-resilient community safe spaces** by providing accessible "Cool and Warm Safe Spaces" within libraries, community centres, family hubs, faith venues and other community facilities, offering drinking water, seating, charging facilities, information, advice and social support during extreme weather events.

- **Embed climate-risk identification within health and care services** by integrating climate-health screening into routine health and social care assessments and ensuring frontline staff are trained to identify and support residents at increased climate-related risk.

Indicators

- Number of residents receiving targeted climate alerts.
- Number and utilisation of community resilience hubs and safe spaces.
- Percentage of health and care services undertaking climate-risk screening.
- Heat-related and cold-related hospital admissions and excess mortality.
- Resident awareness of climate-health support services.

Expected Outcomes

- Earlier identification and protection of vulnerable residents.
- Reduced climate-related illness and mortality.
- Stronger community resilience and neighbourhood support networks.
- Improved public awareness of climate-health risks and available support.

Opportunity 3: Reduce Cost of Living Pressures Through Climate and Health Co-Benefits

Expanded Opportunity: Ensure climate action reduces financial hardship while improving health outcomes, helping low-income residents benefit directly from the transition to a low-carbon economy.

Climate mitigation measures should deliver immediate household benefits, including reduced transport costs, healthier diets, lower energy bills, and improved employment opportunities.

Action Steps:

Affordable Transport and Active Travel

- Prioritise active travel investment in deprived communities, including:
- Safe walking routes
- Cycling infrastructure
- Improved lighting
- Accessibility improvements
- Work with transport providers to improve affordable public transport access to:
- Healthcare
- Education

- Employment
- Community services

Food Security and Healthy Diets

- Expand community food-growing programmes in deprived neighbourhoods.
- Increase support for:
- Community kitchens
- Food cooperatives
- Local food partnerships
- Healthy food voucher schemes
- Promote local procurement initiatives supporting both community health and local economic resilience.

Green Skills and Employment

- Link housing retrofit, energy efficiency, environmental improvement and climate adaptation programmes to local employment and training opportunities.
- Prioritise recruitment from deprived communities into:
- Retrofit programmes
- Renewable energy projects
- Green infrastructure maintenance
- Climate adaptation roles
- Develop pathways into apprenticeships and accredited qualifications linked to the green economy.

Indicators

- Active travel participation rates in deprived communities.
- Public transport accessibility measures.
- Household transport expenditure.
- Number of residents participating in food-growing programmes.
- Food insecurity rates.
- Number of residents accessing green skills training.
- Employment rates in climate-related sectors.
- Household cost-of-living savings attributable to climate programmes.

Expected Outcomes

- Reduced financial hardship.
- Improved nutrition and food security.
- Increased physical activity.
- Better access to employment opportunities.

- Greater economic resilience.
- Reduced health inequalities.

Cross-Cutting Opportunity: Embed Climate Justice in Local Decision-Making

Ensure low-income communities are involved in the design, implementation, and evaluation of climate-health interventions.

Climate adaptation measures are most effective when shaped by the people most affected by climate and socioeconomic inequalities.

Action Steps:

- Establish a Low-Income Communities Climate Advisory Group by 2027.
- Ensure representation from:
- Residents experiencing fuel poverty
- Social housing tenants
- Young people
- Disabled residents
- Carers
- Minority ethnic communities
- Include community representatives in:
- Climate adaptation planning
- Housing strategies
- Transport planning
- Public health programmes
- Conduct annual community engagement exercises in priority neighbourhoods.

Indicators

- Number of residents involved in climate planning.
- Diversity of community representation.
- Evidence of community feedback influencing policy.
- Resident satisfaction with local climate initiatives.
- Reduction in inequalities between deprived and less deprived areas.

Expected Outcomes

- Greater trust in local services.
- More equitable climate adaptation.
- Better-targeted interventions.

- Stronger community resilience.
- Reduced climate-health inequalities.

Suggested Lead Organisations

- East Sussex County Council Public Health
- NHS Sussex Integrated Care Board
- District and Borough Housing Teams
- East Sussex Energy Partnership
- Voluntary, Community and Social Enterprise (VCSE) Sector
- Housing Associations
- Community Development Organisations
- East Sussex Health and Wellbeing Board

Suggested Outcome Measures for a Climate Health Dashboard

- Fuel poverty prevalence
- Excess winter deaths
- Heat-related hospital admissions
- Homes retrofitted
- Damp and mould referrals
- Food insecurity rates
- Climate-related emergency service use
- Active travel participation
- Household energy costs
- Climate-health inequalities by deprivation quintile

These indicators would align strongly with UKHSA climate adaptation ambitions, NHS Core20PLUS5, the East Sussex JSNA, and the Sussex Integrated Care Strategy.

Context and Impacts

There is no single definition of a low-income household, but it generally refers to individuals and families with limited financial resources relative to the wider population. In the UK, low income is often defined as living in a household with an income below **60% of the national median income after housing costs**. Low-income groups include people receiving means-tested benefits, households experiencing poverty, people in insecure or low-paid employment, lone-parent families, some pensioners, people with disabilities, unpaid carers, and households experiencing financial hardship despite being in work.

Importantly, low income is not only about earnings. It is also associated with reduced ability to absorb financial shocks, limited savings, poorer housing conditions, higher energy vulnerability, and fewer resources to adapt to environmental risks. As a result, a changing climate tends to affect low-income groups more severely than higher-income households.

A changing climate is increasingly recognised as a major driver of health inequalities because the people who contribute least to greenhouse gas emissions are often those most exposed to climate-related harms. Low-income groups are particularly vulnerable because they are more likely to live in housing that is susceptible to overheating, damp, flooding or poor energy efficiency, while also having fewer financial resources available to adapt.

A changing climate affects health through direct pathways such as heatwaves, flooding, poor air quality and severe weather, but also through indirect pathways including rising food prices, increasing energy costs, reduced employment security and pressures on health and social care services. These impacts can compound existing disadvantage and widen health inequalities.

The UK Climate Change Committee has repeatedly highlighted low-income households as one of the groups most vulnerable to climate risks. Similarly, the Marmot Review on health inequalities identified a changing climate as a significant threat because it disproportionately affects those already experiencing socioeconomic disadvantage.

In East Sussex, a changing climate intersects with existing inequalities relating to income, employment, housing and health. While the county is often perceived as relatively affluent, significant deprivation exists within parts of Hastings, Eastbourne, Bexhill, Newhaven and some rural communities. These areas often experience poorer health outcomes, lower incomes and reduced resilience to economic and environmental shocks.

Health Impacts

Heat is likely to become one of the most significant climate-related health risks for low-income households. People on lower incomes are more likely to live in housing with poor thermal performance and limited capacity for cooling. Homes may overheat during summer yet remain difficult to heat during winter, creating year-round health risks.

During heatwaves, low-income households may be less able to afford cooling measures, modify working patterns or travel to cooler environments. Heat exposure can increase risks of dehydration, cardiovascular disease, respiratory illness, kidney

disease and poor mental health. For people with existing health conditions, these risks may be amplified.

Food security is another major concern. A changing climate is expected to affect agricultural production, food supply chains and global commodity prices. Rising food prices can disproportionately affect lower-income households because food accounts for a larger proportion of household expenditure. Financial pressures may lead families to purchase cheaper, less nutritious food or skip meals altogether, with consequences for physical and mental health.

Energy affordability is similarly important. Climate change adaptation may increase demand for cooling during summer, while energy price volatility can increase household costs. Low-income households are often already vulnerable to fuel poverty and may face difficult choices between heating, cooling, food and other essentials.

Flooding can have particularly severe consequences for households with limited financial resilience. The costs associated with property damage, temporary accommodation, replacing possessions and insurance can create long-term financial hardship. Flooding is also associated with increased anxiety, depression and stress, effects that may persist for months or years after the event itself.

Poor air quality may further exacerbate health inequalities. Lower-income communities are often more likely to live near busy roads, industrial areas or locations with higher environmental exposure. A changing climate may worsen air pollution episodes and increase respiratory health risks among already vulnerable populations.

Implications

The health impacts of a changing climate on low-income groups are rarely isolated. Instead, they often occur alongside other challenges including poor housing, unemployment, insecure work, disability, caring responsibilities and existing ill health.

A changing climate therefore has the potential to create a cycle of disadvantage. Rising costs, worsening health and increased exposure to environmental risks can reduce resilience and increase dependence on health and support services. Individuals may experience worsening physical health, poorer mental wellbeing, increased social isolation and reduced economic security simultaneously.

The consequences can extend across generations. Children growing up in low-income households may be more exposed to poor housing, food insecurity and educational disruption associated with climate-related events. This can contribute to poorer health outcomes throughout the life course.

For local systems, a changing climate may increase demand for primary care, emergency healthcare, mental health services, social care, housing support and welfare advice services, particularly in communities already experiencing disadvantage.

Gaps

One of the main gaps is the limited availability of local data linking climate risks and socioeconomic vulnerability. While information exists on deprivation, housing quality, fuel poverty, flooding and health outcomes, these datasets are not always analysed together to identify populations facing multiple climate-related risks.

There is also limited understanding of how a changing climate may affect specific low-income groups differently. For example, the experiences of working families, pensioners, people receiving benefits and households in temporary accommodation may vary considerably.

Many climate adaptation plans continue to focus on physical infrastructure without fully considering affordability, social vulnerability and health inequalities.

Barriers

Financial constraints represent the most significant barrier to adaptation. Low-income households may have limited capacity to invest in insulation, ventilation, flood resilience measures, insurance or energy-efficient appliances.

Housing tenure can create additional challenges. Private renters and social housing tenants often have limited control over building improvements and may rely on landlords or housing providers to implement adaptation measures.

Access to information can also be a barrier. Climate risk information and support schemes may not always reach those most in need, particularly where digital exclusion, language barriers or low trust in institutions exist.

The cumulative burden of multiple disadvantages means that climate adaptation may not be viewed as an immediate priority compared with concerns such as employment, debt, housing or food insecurity.

Tensions

A significant tension exists between climate action and affordability. Policies designed to reduce emissions can sometimes increase short-term costs if they are not carefully designed. Low-income households may therefore experience concerns that climate

measures could increase living costs, particularly relating to transport, energy or housing.

There is also a tension between universal and targeted approaches. While a changing climate affects everyone, the greatest health impacts are often concentrated among lower-income groups. Ensuring that adaptation measures are proportionate to need can be challenging but is essential to avoid widening inequalities.

Another tension relates to housing improvement. Energy-efficiency measures can reduce costs and emissions, but poorly designed retrofits may increase overheating risks if ventilation and thermal comfort are not adequately addressed.

Opportunities

Climate adaptation offers an opportunity to reduce health inequalities while improving resilience. Many adaptation measures align closely with wider public health goals. Improving housing quality, reducing fuel poverty, increasing access to green space and improving active travel infrastructure can all support both climate resilience and health improvement.

Targeted investment in deprived communities can deliver multiple benefits. For example, home retrofit programmes can improve thermal comfort, reduce energy bills, improve respiratory health and reduce carbon emissions simultaneously.

There is also an opportunity to better integrate climate action with poverty reduction, public health and economic development strategies. Identifying communities experiencing both deprivation and climate vulnerability can help ensure resources are directed where they will have the greatest impact.

Community resilience programmes, local food initiatives, warm and cool spaces, welfare support services and neighbourhood-based adaptation projects can all strengthen social connections while reducing climate-related health risks.

Summary

Low-income groups are among the populations most vulnerable to the health impacts of a changing climate because they are more exposed to environmental risks and have fewer resources available to adapt. Heatwaves, flooding, poor air quality, rising food prices and energy costs all have the potential to worsen existing health inequalities. A changing climate therefore represents not only an environmental challenge but also a social justice and public health challenge. By integrating climate adaptation with efforts to reduce poverty, improve housing and tackle health inequalities, there is an opportunity to improve resilience and create healthier, fairer communities.

10. Older Adults (65+ years of age) and Ageing Well

High Level Strategic Opportunity:

Develop a climate-resilient ageing population by embedding climate adaptation, health protection, accessible housing, community resilience and age-friendly environments across health and care services, housing, infrastructure, emergency planning and local communities. This will enable older adults to maintain their health, wellbeing, independence and social connectedness while reducing climate-related illness, avoidable hospital admissions, mortality and inequalities.

Rationale:

Older adults are among the groups most vulnerable to the health impacts of a changing climate due to age-related physiological changes, a higher prevalence of long-term health conditions, reduced mobility, social isolation and greater reliance on health, care and community support services. Climate-related hazards, including extreme heat, cold, flooding, poor air quality and severe weather, can increase the risk of illness, injury, hospital admission and premature mortality, particularly for those living alone, in poor-quality housing or with limited support. As East Sussex has one of the oldest populations in England, strengthening climate resilience for older adults is a public health priority. Embedding climate adaptation across health and care services, housing, infrastructure, emergency planning and communities will help protect health and independence, support healthy ageing in place, reduce avoidable demand on health and care services, strengthen community resilience and reduce health inequalities.

Key climate-health risks include:

- Increased heat-related illness, excess mortality, and exacerbation of respiratory and cardiovascular disease.
- Reduced mobility, independence and access to services during extreme weather and power outages.
- Greater social isolation, particularly during prolonged climate-related events.
- Increased vulnerability to emergencies due to frailty, disability and dependence on health and care services.

Considerations, Opportunities and Action Steps:

Opportunity 1: Prioritise Climate-Resilient Services for Older Adults

Older adults face disproportionately high health risks from climate hazards and require targeted support.

Action Steps:

- Train healthcare professionals, caregivers, and community volunteers on recognising heat stroke, dehydration, respiratory distress, and medication-related heat risks.
- Develop climate risk screening protocols during routine health and social care assessments.
- Provide accessible transport services during heatwaves, floods, storms, and other extreme weather events.
- Ensure continuity plans are in place for home care, community nursing, and social support services during climate emergencies.
- Establish priority access pathways for vulnerable older adults during severe weather alerts.
- Integrate climate resilience into care home standards and emergency preparedness plans.

Expected Outcomes

- Reduced hospital admissions and mortality.
- Improved continuity of care during extreme weather.
- Greater safety and independence for older adults.

Opportunity 2: Reduce Isolation and Improve Access to Cooling and Clean Air

Social isolation increases vulnerability to climate-related health impacts and reduces access to support during emergencies.

Action Steps:

- Develop a network of accessible cooling centres, clean-air shelters, libraries, and community hubs.
- Establish targeted heatwave outreach programmes involving telephone check-ins, home visits, and hydration support.

- Create neighbourhood volunteer networks to assist isolated older adults during extreme weather.
- Provide free or subsidised cooling equipment for low-income households.
- Improve public awareness campaigns focused on heat safety and air quality protection.
- Coordinate community transport to cooling centres and healthcare services during high-risk periods.

Expected Outcomes

- Reduced heat-related illness and mortality.
- Increased social connectedness.
- Improved access to protective resources.

Opportunity 3: Adapt Homes and Communities for Accessibility and Heat Resilience

Housing conditions significantly influence climate vulnerability among older adults.

Action Steps:

- Expand grant schemes for home retrofits, including insulation, ventilation improvements, shading, reflective roofing, cooling technologies, and green roofs.
- Improve urban greening initiatives, including tree planting and shaded public spaces.
- Incorporate universal design principles into climate adaptation projects to ensure accessibility.
- Strengthen resilience of energy and water infrastructure supporting older populations.
- Deliver climate alerts through multiple channels including SMS, automated phone calls, radio, television, community networks, and printed materials.
- Support digital inclusion programmes while maintaining non-digital communication options.

Expected Outcomes

- Reduced indoor heat exposure.
- Improved accessibility and independence.
- Enhanced community resilience.

Context and Impacts

A changing climate presents one of the most significant health risks for older adults because it interacts directly with frailty, long-term conditions, reduced mobility, social isolation and increasing care needs. While all age groups are affected by a changing climate, older people are disproportionately vulnerable to heat-related illness, flooding, poor air quality, disruption to health and care services, and the wider impacts of extreme weather.

This is particularly relevant in East Sussex because it has one of the oldest populations in England. In 2024, there were **149,415 residents aged 65 and over**, representing **26.6% of the population**, compared with **18.7% nationally**. Around **22% of residents are aged 70 and over**, while **4.0% are aged 85 and over**, substantially higher than the national average of 2.5%. Rother has one of the highest proportions of people aged 85 and over in England, with almost **1 in 20 residents aged 85+**.

The Sussex Health and Care Partnership's Ageing Well programme recognises that the growing number of older people is increasing demand on health and care services, with a strategic focus on supporting people to remain independent, healthy and connected to their communities for longer. Similarly, East Sussex Adult Social Care's strategy emphasises prevention, independence, community resilience and enabling people to live well at home for as long as possible. A changing climate directly affects all of these ambitions because it increases the likelihood of illness, loss of independence and demand for support services.

Health Impacts

The most immediate climate-related risk for older adults is heat. Physiological changes associated with ageing reduce the body's ability to regulate temperature, while common conditions such as cardiovascular disease, respiratory disease, diabetes and dementia increase vulnerability to heat stress. Many medications prescribed in later life, including diuretics, beta blockers and some antidepressants, can further impair thermoregulation and increase dehydration risk.

Heatwaves are therefore associated with increased hospital admissions, falls, kidney injury, stroke, heart attacks and excess mortality among older people. As temperatures continue to rise across the South East, these risks are expected to increase. For East Sussex, where over a quarter of the population is already aged 65+, a changing climate has the potential to create a significant additional burden on health and care services.

A changing climate also affects respiratory and cardiovascular health through poorer air quality and longer pollen seasons. Older adults with chronic obstructive pulmonary

disease (COPD), asthma, heart failure or coronary heart disease may experience worsening symptoms during periods of high temperatures and air pollution. This can lead to increased GP consultations, hospital admissions and reduced quality of life.

Flooding and severe weather events create additional risks. Beyond the immediate danger of injury, flooding can disrupt access to healthcare, medications, social care, food supplies and community support networks. For older adults who rely on regular care, transport or family support, even short-term disruption can have significant consequences. Flood events are also associated with anxiety, depression and social isolation, particularly among people living alone.

Implications for East Sussex

The implications for East Sussex are amplified by demographic change. Since 2014, the number of residents aged 65 and over has increased by almost **13%**, while the working-age population has grown by only **2%**. This means that more people are likely to require support at the same time as the proportion of the population available to provide formal and informal care is growing much more slowly.

A changing climate could therefore accelerate existing pressures on health and social care systems. Heatwaves may increase emergency admissions, ambulance demand and community healthcare activity. Flooding may disrupt discharge pathways and increase reliance on community support services. More frequent extreme weather events could also place additional strain on unpaid carers, many of whom are themselves older adults.

The Sussex Ageing Well framework highlights the importance of preventing avoidable deterioration, reducing frailty and supporting people to remain independent. Climate-related illness threatens these objectives because heat, flooding and environmental stressors can trigger loss of mobility, worsening frailty and increased dependency. Older adults living in rural areas may face particular challenges because of transport barriers and reduced access to services during extreme weather events.

Gaps

There is strong evidence that older adults are vulnerable to climate-related health impacts, but there is limited local intelligence linking climate hazards directly to outcomes in East Sussex. Data on heat-related hospital admissions, ambulance call-outs, falls, social care demand and excess mortality at a local level are not routinely reported in a way that supports targeted climate adaptation.

There is also limited understanding of which groups of older people are most at risk. For example, information on housing conditions, social isolation, fuel poverty, digital

exclusion and exposure to flood risk is often held separately across organisations rather than being analysed collectively to identify vulnerability.

Barriers

A major barrier is the condition of housing. Many older people live in homes that were not designed for hotter summers and may experience overheating, poor ventilation or flood risk. Some older residents have limited financial resources to invest in adaptation measures such as insulation, shading or home improvements.

Social isolation also creates a barrier to resilience. Older adults who live alone may have fewer opportunities to receive advice, practical support or welfare checks during extreme weather events. Digital exclusion can further reduce access to information and services, particularly where alerts and support are increasingly delivered online.

The capacity of health and social care services presents another challenge. A changing climate is occurring alongside increasing demand associated with population ageing, creating pressure on already stretched services.

Tensions

There is a fundamental tension between supporting independence and managing climate-related risk. The Ageing Well agenda promotes active ageing, social participation and living independently at home. However, extreme weather may increase risks for people who are socially isolated, living alone or managing multiple long-term conditions.

There is also a tension between decarbonisation and adaptation. Improving energy efficiency can reduce fuel costs and carbon emissions, but poorly designed retrofit measures may increase overheating risk if ventilation and cooling are not considered.

A further tension exists between formal and informal care. As climate impacts increase support needs, greater reliance may be placed on family carers at a time when demographic changes mean fewer working-age adults are available to provide care.

Opportunities

Climate adaptation offers significant opportunities to support the Ageing Well agenda. Many measures that increase climate resilience also promote healthy ageing. Better housing, improved insulation, accessible green spaces, active travel infrastructure and stronger community networks can all reduce vulnerability while supporting physical and mental wellbeing.

There is also an opportunity to strengthen preventative approaches. By combining health, social care, housing and environmental data, East Sussex could identify older people most at risk from heat, flooding and social isolation and target support before crises occur.

The Sussex Ageing Well programme's emphasis on community-based support, integrated care and prevention provides a strong foundation for climate adaptation. Climate resilience can be embedded within existing priorities around frailty prevention, falls prevention, healthy ageing, social connectedness and supporting people to remain independent at home.

Summary

A changing climate is likely to disproportionately affect older adults in East Sussex because of the county's older age profile, increasing levels of frailty and rising demand for health and care services. With **26.6% of residents aged 65 and over** and one of the highest proportions of people aged 85 and over in England, East Sussex is more exposed than many areas to heat-related illness, flooding impacts, service disruption and climate-sensitive health conditions.

Without adaptation, a changing climate risks undermining ambitions to support people to age well, remain independent and live healthier lives for longer. However, by integrating climate resilience into healthy ageing, prevention, housing and community support programmes, East Sussex has an opportunity to improve both health outcomes and quality of life for its growing older population.

11. People with Disabilities and Long-Term Health Conditions

High Level Strategic Opportunity:

Create a climate-resilient, inclusive and accessible system that proactively identifies, protects and supports people with disabilities and long-term health conditions before, during and after climate-related events. This should ensure continuity of care, safeguard access to essential medicines, medical equipment and support services, strengthen individual and community resilience, and reduce climate-related health inequalities.

Rationale:

People with disabilities and long-term health conditions are among the groups most vulnerable to the health impacts of a changing climate due to increased sensitivity to extreme heat, poor air quality, flooding, infectious diseases and disruptions to essential services. Many rely on regular healthcare, medications, electricity-dependent medical equipment, personal assistance and accessible transport, making them particularly vulnerable during climate-related emergencies. Disruptions to healthcare, power, communication and support networks can increase the risk of deteriorating health, avoidable hospital admissions and premature mortality, while barriers to information, emergency planning and service access may further widen existing health inequalities. Developing a climate-resilient, inclusive and accessible system that proactively identifies and supports people with disabilities and long-term health conditions will strengthen continuity of care, improve emergency preparedness, protect independence and wellbeing, and ensure climate adaptation reduces rather than exacerbates health inequalities.

Key climate-health risks include:

- Increased health complications during heatwaves, poor air quality episodes and infectious disease outbreaks.
- Dependence on electricity, medical equipment, medications and regular health and care services.
- Disruptions to healthcare, medication supplies, transport and support services during climate-related events.
- Reduced mobility, accessibility and communication during emergencies, including power outages and severe weather.

Considerations, Opportunities and Action Steps:

Opportunity 1: Embed Climate Resilience into Clinical Care Pathways

Individuals with chronic illnesses and disabilities often experience disproportionately severe health consequences from climate hazards.

Action Steps:

- Establish climate vulnerability registers within primary care and community health services.
- Map patients at increased risk due to medical, social, housing, or mobility factors.

- Integrate climate risk assessments into routine healthcare reviews and care planning.
- Develop clinical protocols for managing climate-sensitive conditions during heatwaves, floods, and air pollution events.
- Strengthen coordination between health services, social care, emergency services, and community organisations.
- Use electronic health records to support targeted outreach during climate emergencies.

Expected Outcomes

- Earlier identification of high-risk individuals.
- Improved continuity of care.
- Reduced climate-related health complications.

Opportunity 2: Support Personalised Emergency Planning

Individualised preparedness improves safety and reduces adverse outcomes during emergencies.

Action Steps:

- Develop personalised heat-health and climate resilience plans within GP practices and specialist services.
- Include emergency contact information, evacuation arrangements, medication management, and cooling strategies.
- Provide accessible preparedness materials in multiple formats, including large print, easy-read, audio, and multiple languages.
- Conduct regular reviews and updates of emergency plans.
- Support carers and family members in emergency preparedness training.
- Facilitate community-based resilience programmes that include people with disabilities and chronic illnesses.

Expected Outcomes

- Increased preparedness and self-management capacity.
- Reduced emergency healthcare utilisation.
- Greater confidence during climate-related events.

Opportunity 3: Protect Access to Medicines and Medical Devices

Climate-related disruptions can compromise access to life-sustaining treatments and equipment.

Action Steps:

- Create priority support programmes for individuals reliant on electricity-dependent medical devices.
- Provide backup batteries, emergency power supplies, or access to community resilience hubs during outages.
- Establish emergency medication delivery systems during severe weather events.
- Strengthen pharmaceutical supply chain resilience and contingency planning.
- Educate patients on safe medication storage during extreme temperatures.
- Coordinate with utility providers to prioritise power restoration for medically vulnerable households.

Expected Outcomes

- Reduced interruptions to treatment and care.
- Enhanced patient safety during emergencies.
- Greater resilience of health and social care systems.

Cross-Cutting Opportunity for All Groups - Strengthen Climate Equity and Community Resilience

Action Steps:

- Prioritise interventions for socioeconomically disadvantaged populations.
- Integrate climate adaptation into public health planning and local government strategies.
- Engage communities in co-designing climate-health solutions.
- Improve access to climate and health information through trusted community networks.
- Monitor and evaluate health equity outcomes of climate adaptation policies.

Expected Outcomes

- Reduced health inequalities.
- More equitable climate adaptation.
- Stronger community resilience and social cohesion.

Context and Impacts

A changing climate poses a disproportionate risk to people living with disabilities and long-term conditions because it can worsen existing health inequalities, increase barriers to accessing services, and reduce resilience during extreme weather events. While a changing climate affects the whole population, people with physical disabilities, sensory impairments, learning disabilities, autism, severe mental illness and chronic health conditions are often more exposed to harm and less able to adapt independently.

The health impacts arise not only from direct exposure to heat, flooding, poor air quality and severe weather, but also from disruption to the services, infrastructure and support networks that many people rely upon to maintain their health and independence. For some individuals, climate-related risks are compounded by poverty, poor housing, social isolation, digital exclusion or reliance on carers and specialist equipment.

In East Sussex, the significance of this issue is heightened by the county's older age profile and high prevalence of long-term conditions. The East Sussex Joint Strategic Needs Assessment identifies cardiovascular disease, respiratory disease, diabetes, musculoskeletal conditions, dementia and mental health conditions as major contributors to ill health and disability. The prevalence of long-term conditions is expected to increase as the population ages, meaning that climate-related health risks are likely to affect a growing number of residents.

A changing climate therefore intersects directly with the ambitions of East Sussex Adult Social Care to promote independence, reduce inequalities and enable people to live well in their communities for as long as possible.

Health Impacts

Heat is likely to represent the greatest climate-related health risk for many people with disabilities and long-term conditions. Individuals with cardiovascular disease, respiratory disease, diabetes, kidney disease, neurological conditions and severe mental illness are often more susceptible to heat-related illness. Higher temperatures place additional strain on the body's physiological systems and can worsen symptoms, increase medication-related complications and lead to higher rates of hospital admission.

People with multiple long-term conditions are particularly vulnerable because heat may exacerbate several conditions simultaneously. For example, dehydration can worsen diabetes management, increase cardiovascular strain and affect kidney function. Many medications commonly prescribed for chronic conditions, including

diuretics, antipsychotics and some antidepressants, can also increase vulnerability to heat stress.

Poor air quality is another significant concern. A changing climate is expected to increase exposure to ground-level ozone, allergens and other pollutants. This can worsen asthma, chronic obstructive pulmonary disease (COPD), cardiovascular disease and some neurological conditions. Longer pollen seasons may also increase symptoms for people with allergies and respiratory illnesses.

For people with physical disabilities or mobility impairments, extreme weather can create additional barriers to accessing healthcare, employment, education and community activities. Heatwaves may reduce mobility and increase fatigue, while flooding can disrupt transport networks, damage accessibility infrastructure and make travel more difficult.

The mental health impacts of a changing climate are also significant. People living with severe mental illness may be particularly vulnerable to anxiety, stress and disruption caused by extreme weather events. Climate-related emergencies can interrupt routines, support services and treatment pathways, potentially increasing distress and reducing wellbeing.

Implications for East Sussex

The implications for East Sussex are substantial because many climate-sensitive conditions are already common within the population. The county has a higher proportion of older residents than England overall, and age is strongly associated with disability, frailty and multiple long-term conditions. As the number of older residents increases, so too will the number of people living with complex health needs.

A significant proportion of social care users and community health service users depend on regular support, home care, assistive technology, mobility aids, medications or specialist equipment. Climate-related disruption to power supplies, transport networks or healthcare services could therefore have immediate consequences for health and wellbeing.

Flooding presents a particular challenge in East Sussex. Areas including the Ouse Valley, Pevensey Levels, Eastbourne and parts of Hastings face varying levels of flood risk. For people with mobility impairments, learning disabilities or sensory impairments, evacuation procedures, emergency communication and access to support during flood events can be more complex. Displacement from familiar environments may also have a disproportionate impact on people with autism, dementia or severe mental illness.

A changing climate may also increase demand for health and social care services. More frequent heatwaves, worsening long-term conditions and increased mental health pressures are likely to create additional demand for community services, primary care, hospital services and adult social care.

Gaps

Although national evidence clearly demonstrates increased climate vulnerability among disabled people and those with long-term conditions, there is limited local intelligence identifying who is most at risk in East Sussex and where they live.

Information relating to disability, health conditions, housing quality, social care use, flood risk and social isolation is often held across different organisations and systems. This can make it difficult to identify people who may require targeted support during extreme weather events.

There is also limited local evidence regarding the impacts of heatwaves and flooding on social care demand, home care provision, personal assistant arrangements and independent living outcomes.

Barriers

Many people with disabilities and long-term conditions face barriers that reduce their ability to adapt to a changing climate. Financial constraints can limit access to home adaptations, cooling measures, transport and insurance. People living in rented accommodation may have little control over building improvements that could reduce overheating or improve resilience.

Accessibility remains a challenge during emergencies. Information about climate risks and protective actions may not always be available in formats suitable for people with sensory impairments, learning disabilities or cognitive difficulties.

Reliance on support services creates another barrier. Individuals who depend on carers, community healthcare, medical equipment or assistive technologies may be particularly vulnerable when services are disrupted by extreme weather.

Tensions

A key tension exists between promoting independence and managing climate-related risk. Public policy increasingly focuses on supporting people to live independently within their communities. However, climate-related hazards may increase the need for support, monitoring and intervention, particularly during heatwaves and severe weather events.

There is also a tension between digital innovation and digital exclusion. Many emergency communications, health services and support systems are becoming increasingly digital, yet some disabled people may face barriers to accessing or using these technologies.

A further tension exists between decarbonisation and adaptation. Measures to improve energy efficiency may reduce fuel costs and carbon emissions but can increase overheating risks if accessibility and ventilation are not carefully considered.

Opportunities

Climate adaptation provides an opportunity to reduce health inequalities and strengthen support for people with disabilities and long-term conditions. Better integration of health, social care, housing and environmental data could help identify those most vulnerable to climate impacts and enable targeted interventions before emergencies occur.

Improvements to housing quality, accessibility, energy efficiency and thermal comfort could simultaneously improve health outcomes, reduce fuel poverty and increase resilience to a changing climate. These interventions would deliver particular benefits for people who spend significant amounts of time at home because of disability or illness.

There is also an opportunity to embed climate resilience within existing health and care programmes. Personalised care plans, social prescribing, community support networks and adult social care assessments could all incorporate consideration of climate-related risks.

Strengthening community resilience is particularly important. Community organisations, carers, disability networks and voluntary sector partners often play a critical role in supporting vulnerable individuals during extreme weather events. Building these networks can improve preparedness while also reducing social isolation and supporting independence.

Summary

People with disabilities and long-term conditions are among the groups most vulnerable to the health impacts of a changing climate. Heatwaves, poor air quality, flooding, service disruption and extreme weather can worsen existing conditions, reduce independence and increase demand for health and social care services. In East Sussex, where long-term conditions and disability are likely to increase as the population ages, a changing climate has the potential to widen existing health

inequalities unless adaptation measures are designed with accessibility, inclusion and equity at their core.

By integrating climate resilience into health, social care, housing and community support systems, East Sussex has an opportunity not only to reduce climate-related risks but also to improve independence, wellbeing and quality of life for people living with disabilities and long-term conditions.

12. Women and Girls

High Level Strategic Opportunity:

Create a climate-resilient East Sussex where all women and girls can live safely, healthily and equitably in a changing climate, supported by resilient services, climate-adapted homes and communities, accessible infrastructure, responsive health and care systems, and inclusive decision-making processes that reduce gender inequalities and improve health, wellbeing, safety and opportunity.

Rationale:

Women and girls can experience distinct and disproportionate impacts from a changing climate due to biological, social, economic and gender-related factors that influence health, safety and access to resources. Climate-related hazards such as extreme heat, flooding, poor air quality and severe weather can affect maternal and reproductive health, increase caring responsibilities, disrupt access to healthcare and essential services, and heighten the risk of gender-based violence, financial insecurity and poor mental health. Women are also disproportionately represented in health, social care and other frontline sectors that are directly affected by climate-related events. Existing gender inequalities can therefore amplify vulnerability while limiting opportunities to prepare for, respond to and recover from climate impacts. Creating a climate-resilient East Sussex that embeds gender-responsive planning, inclusive decision-making, accessible infrastructure, resilient health and care services and safe, climate-adapted homes and communities will help reduce inequalities, improve health and wellbeing, strengthen resilience and ensure that women and girls benefit equitably from climate adaptation and the transition to a sustainable future.

Considerations, Opportunities and Action Steps:

Opportunity 1: Strengthen Targeted Protection During Extreme Heat, Cold, Flooding and Poor Air Quality

Develop targeted climate-health protection for women and girls, recognising the specific risks faced by pregnant women, older women, carers, women with chronic illness, women in low-income households, and women living in poorly insulated or overcrowded housing.

Action Steps:

- Produce women-specific extreme weather guidance covering pregnancy, menopause, caring responsibilities, long-term conditions, domestic settings, and medication risks.
- Embed UKHSA Weather Health Alerts into maternity services, women's health hubs, GP practices, sexual health clinics, and health visitor pathways.
- Distribute household cooling and clean-air kits to at least 1,000 low-income women in high-risk areas, prioritising Hastings, Eastbourne, Rother, and Lewes.
- Train frontline maternity, GP, health visiting, and women's health staff to identify and respond to heat-related risks.
- Establish emergency transport support for women needing urgent maternity, contraception, reproductive health, or safeguarding appointments during floods, heatwaves, or storms.

Indicators

- Number of services using women-specific extreme weather guidance.
- Percentage of maternity and women's health services linked to Weather Health Alert systems.
- Number of cooling or air-quality kits distributed.
- Percentage of relevant frontline staff trained.
- Number of women supported with transport during climate-related disruption.
- Heat-related emergency admissions among women.
- Patient-reported awareness of heat, cold, flood, and air-quality risks.

Opportunity 2: Ensure Women and Girls Can Reach Essential Services During Climate Disruption

Improve climate-resilient access to health, education, social care, and safeguarding services, particularly for women and girls in rural, coastal, deprived, or digitally excluded communities.

Action Steps:

- Map transport routes to maternity hubs, GP practices, women's health hubs, schools, refuges, and sexual health services against flood, heat, and storm risk.
- Identify priority climate-resilient bus routes and safe walking routes serving rural and coastal communities.
- Ensure all women's health services offer flexible access options, including face-to-face, telephone, and digital appointments.
- Develop a digital inclusion support offer for women at risk of exclusion, including support with online bookings, translated information, and non-digital alternatives.
- Expand women's health hubs as local climate-health advice points.

Indicators

- Number of essential service routes assessed for climate vulnerability.
- Number of priority routes adapted or protected.
- Percentage of women's health services offering hybrid access.
- Missed appointment rates during extreme weather.
- Number of women supported through digital inclusion pathways.
- Service access rates by district, deprivation level, disability, ethnicity, and age.

Opportunity 3: Protect Maternal, Neonatal and Reproductive Health in a Changing Climate

Make maternity and reproductive health services climate-smart by embedding climate risk assessment, heat protection, infrastructure resilience, and climate-health education into routine care.

Action Steps:

- Develop a countywide "Climate Safe Pregnancy Pathway".
- Include personalised heat-risk assessments in antenatal booking appointments.
- Provide pregnant women with personalised hydration, cooling, travel, medication, and workplace heat advice.
- Assess all maternity wards and community birth settings for overheating risk.

- Include climate-health information in antenatal classes, health visitor visits, and Sussex Local Maternity and Neonatal System resources.
- Monitor maternal climate-health indicators through local surveillance systems.

Indicators

- Percentage of pregnant women receiving a climate-risk assessment.
- Number of maternity staff trained in climate-related maternal risks.
- Number of maternity buildings assessed for overheating.
- Number of women receiving personalised heat advice.
- Rates of heat-period antenatal non-attendance.
- Maternal admissions during heatwaves.
- Preterm birth, hypertension, dehydration, and heat-related presentation trends.

Opportunity 4: Integrate Climate Risk into Domestic Abuse Safety Planning

Recognise that climate events can increase domestic abuse risk through isolation, household stress, service disruption, displacement, and reduced access to safe accommodation.

Action Steps:

- Update domestic abuse risk assessment tools to include climate-related safety questions.
- Train domestic abuse support workers, refuge staff, housing teams, and safeguarding professionals on climate-sensitive safety planning.
- Ensure all refuges and safe accommodation providers have heat, flood, storm, communication, and backup power plans.
- Include domestic abuse risks in Local Resilience Forum emergency planning.
- Establish rapid referral and transport pathways for women fleeing abuse during extreme weather.

Indicators

- Number of domestic abuse services using climate-sensitive risk questions.
- Percentage of refuge and safe accommodation staff trained.
- Percentage of refuges with climate resilience plans.
- Domestic abuse service demand during heatwaves, storms, or floods.
- Number of emergency relocations supported during climate events.
- Inclusion of domestic abuse in emergency planning documents.

Opportunity 5: Support Mental Health and Wellbeing for Women and Girls Under Climate Stress

Expand climate-aware mental health support for women and girls affected by eco-anxiety, heat-related sleep disruption, flooding trauma, caregiving pressure, displacement, and social isolation.

Action Steps:

- Develop climate-aware mental health screening prompts for GP, school counselling, youth hubs, and perinatal services.
- Pilot eco-anxiety and climate resilience sessions in secondary schools.
- Develop targeted support for perinatal women experiencing heat-related sleep disruption, anxiety, or caregiving stress.
- Establish community safe spaces during climate events in Hastings, Eastbourne, Lewes, and Rother.
- Train mental health and youth workers in climate-aware practice.

Indicators

- Number of services using climate-aware mental health screening.
- Number of girls and young women accessing climate-related wellbeing support.
- Number of perinatal women supported.
- Attendance at community safe spaces during climate events.
- Reported levels of climate anxiety, sleep disruption, and wellbeing.
- Referrals to mental health support during and after climate events.

Opportunity 6: Support Women Affected by Fuel Poverty, Poor Housing and Insecure Accommodation

Reduce climate-related health inequalities by prioritising women in poor-quality housing, temporary accommodation, private rented housing, fuel poverty, and low-income households.

Action Steps:

- Map housing-related climate vulnerability among women, including overheating, damp, mould, poor insulation, overcrowding, and fuel poverty.
- Prioritise retrofit grants for single mothers, older women living alone, disabled women, women in temporary accommodation, and women in private rented housing.

- Provide targeted outreach to women in temporary accommodation with heatwave, cold weather, flood, and air-quality guidance.
- Expand support for ventilation, shading, insulation, mould prevention, and energy efficiency.
- Work with landlords and housing providers to improve climate resilience standards in rented accommodation.

Indicators

- Number of women's households assessed for climate-related housing risk.
- Number of retrofit grants awarded to priority groups.
- Number of women in temporary accommodation receiving climate-health advice.
- Reduction in reported damp, mould, overheating, and cold homes.
- Fuel poverty rates among women-led households.
- Housing-related respiratory, cardiovascular, and mental health indicators.

Opportunity 7: Tailor Youth-Focused Climate Health Interventions for Girls

Protect girls from climate-related disruption to education, health, safety, menstrual dignity, mobility, and wellbeing.

Action Steps:

- Assess schools for heat safety, ventilation, shade, hydration access, and air-quality monitoring.
- Introduce school heat-health policies covering hydration, uniform flexibility, shaded breaks, and classroom cooling.
- Provide menstrual health support during climate events, including access to products, toilets, water, and safe disposal.
- Train youth workers and school staff to identify climate-related safety risks for girls.
- Co-design climate-health information with girls and young women using accessible, age-appropriate formats.

Indicators

- Percentage of schools with heat-health policies.
- Number of schools with shade, hydration, and air-quality measures.
- School absence among girls during heatwaves or extreme weather.
- Number of girls receiving menstrual health support during climate events.
- Number of youth workers trained.

- Feedback from girls on safety, information access, and wellbeing.

Opportunity 8: Embed Women and Girls' Voices in Climate Adaptation Planning

Ensure women and girls are directly involved in shaping climate adaptation, emergency planning, transport resilience, flood response, housing improvement, and health service design.

Action Steps:

- Establish an East Sussex Women and Climate Action Panel.
- Ensure representation from young women, older women, carers, women with disabilities, minority ethnic women, LGBTQ+ women, women in poverty, rural women, and survivors of domestic abuse.
- Involve the panel in Local Transport Plan resilience work, coastal flood planning, heatwave preparedness, and community emergency planning.
- Require major climate adaptation programmes to demonstrate how women and girls have been engaged.
- Fund community-led women's climate resilience projects.

Indicators

- Women and Climate Action Panel established and meeting regularly.
- Diversity of panel membership.
- Number of climate plans reviewed by the panel.
- Number of policies changed following women's input.
- Number of community-led projects funded.
- Participant feedback on influence and inclusion.

Opportunity 9: Track Climate Gender Health Inequalities

Create a local monitoring system to identify, track, and respond to gendered climate-health inequalities across health, housing, transport, education, safeguarding, and emergency planning.

Action Steps:

- Agree a shared East Sussex climate-gender-health indicator set.
- Develop an East Sussex Climate Gender Health Dashboard.

- Include indicators on heat-related GP visits, emergency admissions, maternal health, domestic abuse demand, school absence, housing risk, mental health, and service access.
- Establish data-sharing arrangements between NHS Sussex, East Sussex County Council, district councils, police, education, housing, and women's services.

Indicators

- Climate Gender Health Dashboard created.
- Number of indicators reported by sex, age, deprivation, disability, ethnicity, and geography.
- Annual report published.
- Number of partner organisations contributing data.
- Evidence of dashboard findings influencing commissioning or emergency planning.
- Reduction in identified climate-health inequalities over time.

Suggested Delivery Timescales

Short Term: 2026–2027

- Develop guidance, risk assessments, dashboards, and training materials.
- Establish governance structures, including the Women and Climate Action Panel.
- Begin staff training and pilot targeted interventions.

Medium Term: 2027–2029

- Scale up service integration, transport support, school interventions, housing retrofit schemes, and emergency planning.
- Expand women's health hubs as climate-health access points.
- Begin annual public reporting.

Long Term: 2029–2031

- Embed climate-gender-health indicators into routine JSNA and commissioning cycles.
- Demonstrate reductions in avoidable climate-related health harms.
- Ensure climate adaptation planning consistently reflects women and girls' lived experience.

Suggested Lead and Partner Organisations

Strategic Leads

- East Sussex County Council Public Health
- NHS Sussex Integrated Care Board

- East Sussex Health and Wellbeing Board
- East Sussex Local Resilience Forum

Key Delivery Partners

- Primary care networks
- Maternity and neonatal services
- Women's health hubs
- Healthwatch East Sussex
- Domestic abuse services
- Housing providers and landlords
- Schools and colleges
- Youth services
- Voluntary, Community and Social Enterprise (VCSE) organisations
- Transport providers
- Community and faith organisations

Cross-Cutting Principles

All actions should:

- Prioritise women and girls facing the greatest health inequalities.
- Co-design with women and girls.
- Include accessible digital and non-digital communication.
- Address rural, coastal, and deprived communities.
- Consider intersectional risks, including age, disability, ethnicity, income, pregnancy, caring responsibilities, housing status, and domestic abuse.
- Be monitored through transparent public reporting.

Context and Impacts

A changing climate is a women's health issue because it interacts with existing biological, social and economic inequalities. The renewed Women's Health Strategy for England recognises a persistent "health gap" for women, including inequalities in prevention, diagnosis, treatment, research and access to services. A changing climate risks widening that gap because its impacts are not gender-neutral: heat, flooding, poor air quality, displacement, food insecurity, violence, unpaid care and service disruption can affect women and girls differently across the life course.

The "health gap" matters because women already experience structural disadvantages in healthcare. The renewed strategy highlights the need to move from sickness to prevention, improve community-based care, increase female participation

in research, and address inequalities in areas such as heart disease, obesity, smoking and alcohol use. A changing climate adds pressure to these same areas. For example, heat can worsen cardiovascular disease, dehydration, kidney stress, migraine, respiratory illness and mental health. Poor air quality can worsen asthma and pregnancy outcomes. Flooding can disrupt access to contraception, maternity care, menopause care, mental health support, domestic abuse services and routine screening.

Women and girls are also affected through reproductive and maternal health. Pregnancy increases vulnerability to heat stress because of changes in thermoregulation, cardiovascular load and hydration needs. Evidence links heat exposure in pregnancy with increased risks of preterm birth, stillbirth, low birth weight and complications such as pre-eclampsia. These risks are particularly important during heatwaves, when sleep disruption, dehydration, dizziness and anxiety may also increase.

A changing climate also affects women's safety. Extreme weather and displacement can increase risks of gender-based violence, exploitation and reduced access to safe spaces and support. UN sources highlight that women and girls are often disproportionately affected by climate-related displacement and service disruption, while the UN Commission on the Status of Women adopted a global agreement in 2024 recognising the links between gender equality and a changing climate.

For girls, a changing climate can affect health through education, safety, puberty, mental wellbeing and access to safe outdoor space. Hot classrooms can reduce concentration and learning; poor air quality can worsen asthma; flooding can disrupt school attendance and routines; and climate anxiety can add to existing pressures on adolescent mental health. Girls may also be affected by period poverty and access to menstrual hygiene during emergencies, particularly where flooding, displacement or household financial stress disrupts normal routines.

There is also an important unpaid care dimension. Women still provide a large share of unpaid care for children, older relatives and people with disabilities. During heatwaves, floods or service disruption, caring responsibilities often increase. This can affect women's employment, income, mental health and ability to access healthcare. A changing climate can therefore widen inequalities not only through direct health impacts, but also through the social roles and responsibilities that women disproportionately carry.

Gaps

The main gap is that climate-health evidence is often not sufficiently sex- and gender-disaggregated. Local and national climate risk assessments frequently identify

vulnerable groups, but do not always analyse how impacts differ for women, girls, pregnant women, unpaid carers, women with disabilities, ethnic minority women, low-income women, LGBTQ+ women, or women experiencing domestic abuse.

There are also gaps in UK evidence on climate impacts across the full women's health life course, including menstruation, fertility, pregnancy, postnatal health, menopause, gynaecological conditions, endometriosis, cardiovascular disease in women, and mental health. This reflects the wider women's health gap identified in the national strategy: women's symptoms and conditions have historically been under-researched, under-recognised and sometimes under-treated.

Barriers

Barriers include poverty, insecure housing, caring responsibilities, limited transport, digital exclusion, language barriers, disability, fear of violence and difficulty accessing timely healthcare. Women on low incomes may be less able to cool their homes, replace flood-damaged belongings, take time off work during extreme weather, or travel to appointments when transport is disrupted.

Service barriers are also important. Climate events can disrupt maternity, sexual health, mental health, screening and domestic abuse services. Where services are already stretched, extreme weather can increase delays and reduce continuity of care.

Tensions

A key tension is that women and girls are often described as vulnerable, but they are also leaders, carers, workers, activists and decision-makers in climate resilience. Policy needs to avoid framing women only as victims while still recognising unequal risk.

There is also a tension between universal and targeted adaptation. All women and girls may be affected by a changing climate, but the greatest harms are likely among those already facing disadvantage. Another tension sits between decarbonisation and health protection: cooling may be necessary in maternity, community and domestic abuse settings, but it needs to be low-carbon and affordable.

Opportunities

Climate adaptation offers an opportunity to narrow, rather than widen, the women's health gap. This means embedding gender analysis into climate-health planning, collecting sex-disaggregated data, and ensuring women and girls are represented in local climate decision-making.

Practical opportunities include heat-health advice tailored for pregnancy and menopause, climate-resilient maternity and sexual health services, safe and shaded public spaces, better housing standards, continuity planning for domestic abuse services, and targeted support for unpaid carers during extreme weather. The strongest opportunity is to align climate resilience with the renewed Women's Health Strategy's focus on prevention, community care, research and reducing inequalities. Done well, climate action can improve women's health, safety, economic security and participation, rather than simply managing future risk.

13. 3D Section Conclusion

Part 3D demonstrates that the health effects of a changing climate are not experienced equally across the population. Rather than creating entirely new vulnerabilities, climate change acts as a **risk multiplier**, interacting with existing health inequalities, social disadvantage and wider determinants of health to increase exposure, reduce resilience and widen disparities in health outcomes. The evidence consistently shows that those already experiencing poorer health, disadvantage or exclusion are likely to experience the greatest impacts unless adaptation is both equitable and targeted.

This section translates the evidence into population-specific strategic considerations, opportunities and action steps for the vulnerable groups identified through the East Sussex Environment, Climate and Systemwide Health Impact Assessment. While each population group has distinct needs and experiences, the findings demonstrate that many vulnerabilities are interconnected and cumulative. Individuals frequently belong to more than one vulnerable group—for example, older adults living on low incomes with long-term health conditions, or children living in poor-quality housing—meaning that climate risks can compound over time. Consequently, effective adaptation requires an integrated, person-centred and whole-system approach rather than isolated interventions.

A central conclusion of Part 3D is that reducing climate-related health inequalities depends on addressing the wider determinants of health. Safe and resilient housing, access to healthcare, education, employment, transport, green and blue spaces, financial security, social connectedness and inclusive public services all influence an individual's ability to prepare for, respond to and recover from climate-related hazards. Climate adaptation should therefore be viewed not only as environmental protection, but as an opportunity to improve health, wellbeing, social equity and community resilience simultaneously.

The assessment also highlights that vulnerability should never be viewed solely through the lens of risk. Every population group possesses strengths, assets, lived experience and adaptive capacity that can contribute to community resilience. Empowering communities through co-production, inclusive engagement, accessible communication and participation in decision-making will be fundamental to ensuring that adaptation measures are effective, equitable and trusted. Building resilience therefore requires working alongside communities rather than designing solutions on their behalf.

Across all population groups, common priorities emerge. These include strengthening early intervention and prevention; improving access to climate-health information and services; ensuring healthcare, housing and essential services remain resilient during climate-related events; protecting mental wellbeing; improving data and local intelligence; and embedding equity within climate adaptation, emergency planning and public health practice. These cross-cutting priorities provide opportunities for coordinated action that delivers multiple health, environmental, social and economic co-benefits across East Sussex.

Importantly, the considerations and opportunities presented throughout this section are intended to guide long-term system transformation rather than create additional organisational burdens. During the Mobilisation Phase (2026–2030), these strategic opportunities will be translated into population-focused SMART objectives, delivery plans and partnership arrangements, enabling organisations to tailor implementation to local needs whilst contributing to shared county-wide outcomes.

The overarching conclusion from Part 3D is that protecting vulnerable population groups must sit at the heart of climate adaptation. A fair and resilient response to a changing climate will only be achieved by embedding **equity, inclusion and prevention** within every aspect of policy, planning and service delivery. By adopting a **Health in All Policies** and **Population and Planetary Health in All Approaches** philosophy, East Sussex has the opportunity to reduce inequalities, strengthen resilience and ensure that every resident—regardless of age, income, health status or circumstance—is supported to live well in a changing climate.