CORRIGENDA (4 October 2022)

Türkiye: health and climate change country profile 2022

WHO/HEP/ECH/CCH/22.01.05

Page 3, lines 18–21

*Delete:* The objective of Türkiye’s NDC is to reduce greenhouse gas emissions by 21% by 2030, below the business-as-usual estimates (8). Türkiye’s National Adaptation Strategy for Climate Change includes a series of health adaptation measures, such as monitoring the health effects of extreme weather events and preparing guidelines to inform citizens about what to do in case of communicable diseases (9).

*Insert:* The objective of Türkiye’s NDC is to reduce greenhouse gas emissions by 21% by 2030, below the business-as-usual estimates (8). Türkiye’s National Adaptation Strategy for Climate Change includes a series of health adaptation measures, such as monitoring the health effects of extreme weather events and preparing guidelines to inform citizens about what to do in case of communicable diseases (9).

In Türkiye, there are studies on climate change and air pollution in cooperation with the relevant sectors (10).

Waterborne diseases are constantly monitored, recorded and investigated in Türkiye. For example, there is an Early Warning Response Unit for acute intestinal infections. Foodborne diseases are also constantly monitored, recorded and investigated in cooperation with relevant sectors/institutions. Studies on nutrition and health research are carried out (11).

*Delete:* Table: Climate-sensitive health risks - Turkey

Page 7, lines 15–20

*Delete:* Climate change is expected to expose Türkiye’s agriculture sector to desertification, forest fires, diseases and pests, high evaporation and extreme weather events. In addition, the overall rising temperatures and the risk of decreased water availability make existing rainfed farmland areas in Türkiye unsustainable. Due to such effects of climate change, agricultural yields are expected to decrease in general in Türkiye. Such changes pose a risk of food insecurity, especially with
the expected increase in Türkiye’s population from approximately 81 million to 104 million by 2050 (1).

**Insert:**
As a fact, climate change is expected to expose the agriculture sector to desertification, forest fires, diseases and pests, high evaporation and extreme weather events. In addition, rising temperatures and the risk of decreasing water availability in general pose a risk to the sustainability of existing rain-fed farmland areas and can lead to reduced agricultural yields in Türkiye as well. At the same time, global population trends may increase the risks to food security.

**Page 9, line 13**

**Delete:**
Vector distribution and ecological changes may cause vector-borne diseases, and therefore, may result in deaths. Change in vector distribution as a result of climate change, deforestation, habitat change, and ecosystem destruction and degradation may increase the number of cases of vector-borne and zoonotic infections. There is a risk of increasing incidence of sandfly and mosquito-borne diseases, such as cutaneous, visceral leishmaniasis and West Nile virus infection, which has local transmission currently in Turkey. In addition, there is a risk of spreading of malaria, Zika virus disease, dengue virus infection, chikungunya fever and yellow fever diseases of which there has been no local transmission currently in Turkey, but imported cases are being reported. Furthermore, invasive Aedes species, which are the main vectors of such diseases, have been detected in certain regions of Turkey. Zoonotic diseases, such as Crimean-Congo haemorrhagic fever, hantavirus infection, leptospirosis, Lyme disease, Q fever that has local transmission currently in Turkey, could spread to regions where these diseases have not been observed before. Disease control programmes are carried out by the Zoonotic and Vector-borne Diseases Department for the prevention and control of zoonotic and vector-borne diseases (15,16,17,18).

**Insert:**
Vector distribution and ecological changes may cause vector-borne diseases, and therefore, may result in deaths. Change in vector distribution as a result of climate change, deforestation, habitat change, and ecosystem destruction and degradation may increase the number of cases of vector-borne and zoonotic infections. There is a risk of increasing incidence of sandfly and mosquito-borne diseases, such as cutaneous, visceral leishmaniasis and West Nile virus infection, which has local transmission currently. In addition, there is a risk of spreading of malaria, Zika virus disease, dengue virus infection, chikungunya fever and yellow fever diseases of which there has been no local transmission currently, but imported cases are being reported. Türkiye-specific, invasive Aedes species, which are the main vectors of such diseases, have been detected in certain regions. Zoonotic diseases, such as Crimean-Congo haemorrhagic fever, hantavirus infection, leptospirosis, Lyme disease, Q fever that has local transmission currently could spread to regions where these diseases
have not been observed before. Disease control programmes are
carried out by the Zoonotic and Vector-borne Diseases Department for
the prevention and control of zoonotic and vector-borne diseases
(16,17,18,19).

Page 12, line 3

Delete: NDC of Türkiye does not outline specific compliance objectives for
health (4).

Insert: Although the NDC of Türkiye does not clearly outline health action
plans, health co-benefits exist in the priorities identified. The data
collection process is ongoing to reach specific compliance objectives
for health (4).

Page 15, lines 8-9

Delete: Storms = ‘no’ health sector response plan in place/‘no’ health sector
response plan includes meteorological information.
Flooding = ‘no’ health sector response plan in place/‘no’ health sector
response plan includes meteorological information.

Insert: Storms = ‘yes’ health sector response plan in place/‘yes’ health sector
response plan includes meteorological information.
Flooding = ‘yes’ health sector response plan in place/‘yes’ health
sector response plan includes meteorological information.

Page 16, lines 21-33

Delete: Health co-benefits of mitigation are currently not included in Turkey’s
Nationally Determined Contribution (NDC). Ensure that climate
mitigation policies include the health risks posed from
climate change, identify health adaptation priorities, and measure and
optimize the health co-benefits of climate mitigation action.

Measures can be taken to prevent the potentially devastating impacts of
climate change on health care facilities and health service provision
while decreasing the climate and environmental footprint of health care
facilities. A commitment towards climate-resilient, environmentally
sustainable health care facilities can improve system stability, promote
a healing environment and mitigate climate change impacts.

Insert: The accelerated process to make current NDCs formally include health
related ones is ongoing and health co-benefits exist in the priorities
identified. To ensure that climate mitigation policies include the health
risks posed from climate change, identify health adaptation priorities,
and measure and optimize the health co-benefits of climate mitigation action.

The Projects of city hospitals, 20 of which have been built and 13 under construction is the biggest step to renew the hospital infrastructure in the history of Türkiye. The projects have been featuring the large-scale renovation of health infrastructure as well as the commitment towards climate-resilient, environmentally sustainable health care facilities. Addition of these to the already good infrastructure offers important opportunities for sustainable and adaptable approaches such as waste management and green healthcare institutions. Such initiatives can be leveraged to prevent the potentially devastating impacts of climate change on health care facilities and health service provision while decreasing the climate and environmental footprint of health care facilities.

These corrections have been incorporated into the electronic file.