

GLOBAL CONSORTIUM ON CLIMATE AND HEALTH EDUCATION

This survey has been developed by the Global Consortium on Climate and Health Education, based at Columbia University with support from the Capacity Building Subcommittee of the WHO Civil Society Working Group to Advance Action on Health and Climate Change. The purpose of this survey is to gather insights into the current state of curriculum integration regarding climate change in public health institutions. Your participation is invaluable as it will provide us with a broader understanding of the efforts being made and identify areas where improvements can be made.

Your participation is entirely voluntary, and your responses will be kept confidential and anonymous. This study protocol has been approved by Columbia University Institutional Review Board (IRB) review committee (protocol number AAAU7307). The Global Consortium on Climate and Health Education will collect and analyze the survey data in a secure platform and it will be anonymized prior to reporting. No Institution name will be reported. The survey should take approximately 5-15 minutes to complete.

WHO SHOULD COMPLETE THIS SURVEY:

- Faculty members, academics and/or course coordinators who design or teach climate and/or planetary health related content and curriculum.
- Faculty members, academics and/or course coordinators who are familiar with climate and/or planetary health related content currently being taught at the school.

If you believe there are faculty or staff at your institution who might be more familiar with Climate and Health content at your institution, you are welcome to involve them in completing this survey by forwarding the survey link, or reach out to Nico Hamacher (nph2115@cumc.columbia.edu) to suggest that we reach out to them directly.

1. About your institution

Section 1: About your institution

| 1.1 What is your title? | |
|---|----|
| O Professor (any level) O Lecturer (any level) O Research faculty (any level) O Administrative staff O Dean/Head of School O ther | |
| 1.2 What department do you work in? | |
| | |
| 1.3 Name of institution (Please answer all applicable questions) | |
| Name of institution | |
| Name of public health school within institution | |
| Name of department | |
| | |
| 1.4 Please provide URL for your institution | |
| | // |
| 1.5 Which country is your institution of public health located in (select location of main campus if multiple locations)? | |
| 1.6 What type of public health training does your institution offer? | |
| ☐ Doctoral-level training DrPH or PhD | |
| Masters degree or Post-Graduate Certification | |
| Bachelor degree/Undergraduate | |
| Vocational training/Technical degree | |

| degree programs at your institution? (If >1000 students, select 1000) | | | | | | | | | | | |
|---|---------------|----------------|------------|--------------|--------------|--------------|--|--|--|--|--|
| 0 | 100 200 | 300 400 | 500 6 | 800 700 | 800 900 | 1000 | | | | | |
| 2. Climate and health | curricula | | | | | | | | | | |
| 2. Climate and health co | urricula | | | | | | | | | | |
| 2.1 Does your institution | n offer clima | te and healt | h educati | ion? | | | | | | | |
| O Yes O No | | | | | | | | | | | |
| 2.2 For each type of purcurriculum? | blic health c | legree, is the | ere climat | e and healt | h training i | n the | | | | | |
| | Yes | | No | Don't kr | now No | t applicable | | | | | |
| Doctoral-level training DrPH or PhD | 0 | | 0 | 0 | | 0 | | | | | |
| Masters degree or Post-Graduate Certification | 0 | | 0 | 0 | | 0 | | | | | |
| Bachelor degree/Undergraduate | 0 | | 0 | 0 | | 0 | | | | | |
| Vocational training/Technical degree | 0 | | 0 | 0 | | 0 | | | | | |
| 2.3 Approximately how and training this year? (| - | - | | in your clim | ate-health | education | | | | | |
| | 100 555 | Number of s | | | No Applica | | | | | | |
| 0 Doctoral-level training DrPH or PhD | 100 200 3 | 00 400 500 | 600 700 | U 800 900 | 1000 | | | | | | |
| Masters degree or Post-Graduate Certification | | | | | | | | | | | |

1.7 Approximately how many students are currently enrolled in all the above public health

O

degree/Undergraduate

0

| | Less than one year | 1-5 years | 6-10 years | More than 10 years | Not applicable | l don't know |
|--|--------------------------|-----------|---------------|--------------------------|-------------------|-----------------|
| Vocational training/Technical degree | 0 | 0 | 0 | 0 | 0 | 0 |

2.6 How has the number of participants changed in your institution's climate and health programs or curricular offering in the last 5 years?

| | Increased | Decreased | Unchanged | Don't know | Not applicable |
|---|-----------|-----------|-----------|------------|----------------|
| Doctoral-level training DrPH or PhD | 0 | 0 | 0 | 0 | 0 |
| Masters degree or Post-Graduate Certification | 0 | 0 | 0 | 0 | 0 |
| Bachelor degree/Undergraduate | 0 | 0 | 0 | 0 | 0 |
| Vocational training/Technical degree | 0 | 0 | 0 | 0 | 0 |

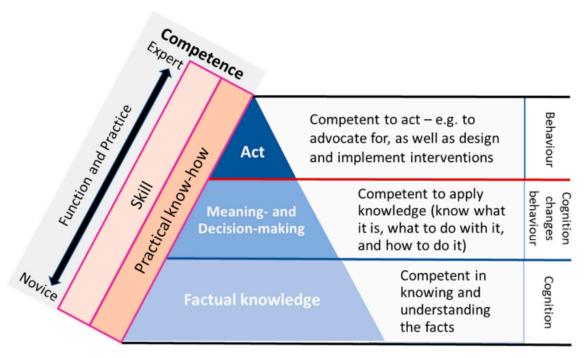


Figure 1. Framework for climate and health competency progression. From Jagals & Ebi, 2021.(1)

For each of the following climate and health competencies, please select which corresponds to the degree to which students in the given program are trained.

Although your institution's specific competencies may differ, please match your competencies to the competencies below which most closely align. Note: A novice learner will likely obtain more knowledgeable about the facts (factual knowledge), but less experienced about how to apply and act on these facts. As shown in the figure, as learning progresses, students and trainees will build practical know-how and thus be competent to APPLY knowledge and skills to novel situations. Through continual learning eventually becoming an expert by gaining 'knowing and understanding real life problems' as well as 'what to do about it' (apply and act—which is the skill).

The following eight questions (2.7.1.1 - 2.7.2.4) pertain to this graphic/information.

Core competencies addressed (adopted from Jagals and Ebi 2021, also consider the GCCHE recommendations, ASPHER Climate and Health Competencies for Public Health Professionals in Europe, Climate Adaptation Competency Framework, Patrick et al, 2011, ASPPH Public Health Education Toolkit)

2.7.1.1

Degree of Competence



For each of the following climate and health competencies, please select the degree to which **Bachelor degree/Undergraduate** degree students are trained.

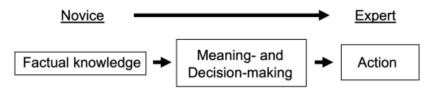
| | | | ctual vledg | Э | Deci | | eaning & n Making | | Action | | | Not Applicable | |
|---|---|---|----------------|---|------|---|----------------------|---|--------|---|----|-------------------|--|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 1010000000 | |
| Fundamental science behind the natural and anthropogenic changes in the environment and associated health outcomes for given exposures. | | | | | | | | | | | | | |
| Demographics, economic development, technology and other drivers/ activities that create pressures on the climate and environment. | | | | | | | | | | | | | |
| Use of research, tracking, monitoring, and surveillance to assess future health risks from climate and environmental change and the adaptive capacity of a system to cope. | | | | | | | | | | | | | |
| How biological, social, economic and structural determinants of health synergize with climate exposures to amplify health risk and vulnerability for individuals, communities and health systems. | | | | | | | | | | | | | |
| Strategies for health systems to mitigate, adapt and build resilience to climate and environmental change | | | | | | | | | | | | | |
| Assessment of adaptation solutions at population level with accompanying evaluation of health | | | | | | | | | | | | | |

co-benefits

| | | | ctual wledg | е | Meaning & Decision Making Action | | | | | Not Applicable | | | | |
|---|---|---|----------------|---|----------------------------------|---|---|---|---|-------------------|----|--|--|--|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | | | |
| Solicit and receive stakeholder and community input to inform communication strategies, taking into consideration theories of behavioural change and existing cultural and political challenges | | | | | | | | | | | | | | |
| Work collaboratively in transdisciplinary and interprofessional climate and health initiatives | | | | | | | | | | | | | | |

2.7.1.2

Degree of Competence



For each of the following climate and health competencies, please select the degree to which <u>Masters degree or Post-Graduate Certification</u> students are trained.

| | | Factual Knowledge | | | Meaning & Decision Making Action | | | | | | | | |
|--|---|----------------------|---|---|----------------------------------|---|---|---|---|---|----|--|--|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | | |
| Fundamental science behind the natural and anthropogenic changes in the environment and associated health outcomes for given exposures. | | | | | | | | | | | | | |
| Demographics, economic development, technology and other drivers/ activities that create pressures on the climate and environment. | | | | | | | | | | | | | |

| | | | ctual wledg | е | Deci | Meaning & Decision Making A | | | Acti | on | | Not Applicable | е | | |
|---|---|---|----------------|---|------|-----------------------------|---|---|------|----|----|-------------------|---|--|--|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | | | | |
| Use of research, tracking, monitoring, and surveillance to assess future health risks from climate and environmental change and the adaptive capacity of a system to cope. | | | | | | | | | | | | | | | |
| How biological, social, economic and structural determinants of health synergize with climate exposures to amplify health risk and vulnerability for individuals, communities and health systems. | | | | | | | | | | | | | | | |
| Strategies for health systems to mitigate, adapt and build resilience to climate and environmental change | | | | | | | | | | | | | | | |
| Assessment of adaptation solutions at population level with accompanying evaluation of health co-benefits | | | | | | | | | | | | | | | |
| Solicit and receive stakeholder and community input to inform communication strategies, taking into consideration theories of behavioural change and existing cultural and political challenges | | | | | | | | | | | | | | | |
| Work collaboratively in transdisciplinary and interprofessional climate and health initiatives | | | | | | | | | | | | | | | |

Degree of Competence

| Novice | | → | Expert |
|-------------------|---------------------------------|----------|--------|
| Factual knowledge | Meaning- and Decision-making | → | Action |

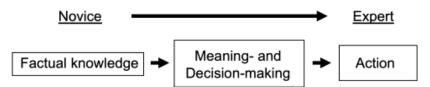
For each of the following climate and health competencies, please select the degree to which **Vocational training/Technical degree** students are trained.

| | ŀ | | tual rledge | ; | Meaning & Decision Making | | | | Actio | n | | Not Applicable | Э | | | | |
|---|---|---|----------------|----------|------------------------------|---|---|---|-------|---|----|-------------------|---|--|--|--|--|
| C |) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | | | | | | |
| Fundamental science behind the natural and anthropogenic changes in the environment and associated health outcomes for given exposures. | | | | | | | | | | | | | | | | | |
| Demographics, economic development, technology and other drivers/ activities that create pressures on the climate and environment. | | | | | | | | | | | | | | | | | |
| Use of research, tracking, monitoring, and surveillance to assess future health risks from climate and environmental change and the adaptive capacity of a system to cope. | | | | | | | | | | | | | | | | | |
| How biological, social, economic and structural determinants of nealth synergize with climate exposures to amplify health risk and vulnerability for individuals, communities and health systems. | | | | | | | | | | | | | | | | | |

| | K | Factual Knowledge | | | | Meaning & Decision Making Action | | | | | | Not Applicable | | |
|---|---|----------------------|---|---|---|----------------------------------|---|---|---|---|----|-------------------|--|--|
| 0 | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | | | |
| Strategies for health systems to mitigate, adapt and build resilience to climate and environmental change | | | | | | | | | | | | | | |
| Assessment of adaptation solutions at population level with accompanying evaluation of health co-benefits | | | | | | | | | | | | | | |
| Solicit and receive stakeholder and community input to inform communication strategies, taking into consideration theories of behavioural change and existing cultural and political challenges | | | | | | | | | | | | | | |
| Work collaboratively in transdisciplinary and interprofessional climate and health initiatives | | | | | | | | | | | | | | |

2.7.1.4

Degree of Competence



For each of the following climate and health competencies, please select the degree to which **Doctoral-level training DrPH or PhD** students are trained.

| | | | ctual vledg | е | Deci | | ning & ⁄laking | | Actio | on | | Not Applicable | |
|---|---|---|----------------|---|------|---|-------------------|---|-------|----|----|-------------------|--|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | T TO TO TO TO | |
| Fundamental science behind the natural and anthropogenic changes in the environment and associated health outcomes for given exposures. | | | | | | | | | | | | | |
| Demographics, economic development, technology and other drivers/ activities that create pressures on the climate and environment. | | | | | | | | | | | | | |
| Use of research, tracking, monitoring, and surveillance to assess future health risks from climate and environmental change and the adaptive capacity of a system to cope. | | | | | | | | | | | | | |
| How biological, social, economic and structural determinants of health synergize with climate exposures to amplify health risk and vulnerability for individuals, communities and health systems. | | | | | | | | | | | | | |
| Strategies for health systems to mitigate, adapt and build resilience to climate and environmental change | | | | | | | | | | | | | |
| Assessment of adaptation solutions at population level with accompanying evaluation of health | | | | | | | | | | | | | |

co-benefits

| | | | ctual vledge | Э | Deci | | ning & ⁄laking | | Actio | on | | Not Applicable | |
|--|----------------------------------|---|-----------------|---|------|---|-------------------|---|-------|----|----|-------------------|----|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 101000000 | |
| Solicit and receive stakeholder and community input to inform communication strategies, taking into consideration theories of behavioural change and existing cultura and political challenges | | | | | | | | | | | | | |
| Work collaboratively in transdisciplinary and interprofessiona climate and health | / / | | | | | | | | | | | - | |
| 2.7.2.1 Are the follow exams, small ground students? | | _ | | | | | - | | | _ | | | 5, |
| | | | | | Yes | | | | | | | No | |
| Fundamental science behind the natural and anthropogenic changes in the environment and associated health outcomes for given exposures. | and | | | | 0 | | | | | | | 0 | |
| Demographics, economic development, technology and oth drivers/ activities the create pressures or the climate and environment. | at | | | | 0 | | | | | | | 0 | |
| Use of research, tracking, monitoring and surveillance to assess future health risks from climate a environmental chan and the adaptive capacity of a system to cope. | n ind ige | | | | 0 | | | | | | | 0 | |

| | Yes | No |
|---|-----|--|
| How biological, social, economic and structural determinants of health synergize with climate exposures to amplify health risk and vulnerability for individuals, communities and health systems. | 0 | 0 |
| Strategies for health systems to mitigate, adapt and build resilience to climate and environmental change | 0 | 0 |
| Assessment of adaptation solutions at population level with accompanying evaluation of health co-benefits | 0 | 0 |
| Solicit and receive stakeholder and community input to inform communication strategies, taking into consideration theories of behavioural change and existing cultural and political challenges | 0 | 0 |
| Work collaboratively in transdisciplinary and interprofessional climate and health initiatives | 0 | 0 |
| 2.7.2.2 Are the following clim exams, small group work, pa | • | es formally assessed (quizzes, ers degree students? |
| | Yes | No |
| Fundamental science behind the natural and anthropogenic changes in the environment and associated health outcomes for given | 0 | 0 |

exposures.

| | Yes | No |
|---|-----|----|
| Demographics, economic development, technology and other drivers/ activities that create pressures on the climate and environment. | 0 | 0 |
| Use of research, tracking, monitoring, and surveillance to assess future health risks from climate and environmental change and the adaptive capacity of a system to cope. | 0 | 0 |
| How biological, social, economic and structural determinants of health synergize with climate exposures to amplify health risk and vulnerability for individuals, communities and health systems. | 0 | 0 |
| Strategies for health systems to mitigate, adapt and build resilience to climate and environmental change | 0 | 0 |
| Assessment of adaptation solutions at population level with accompanying evaluation of health co-benefits | 0 | 0 |
| Solicit and receive stakeholder and community input to inform communication strategies, taking into consideration theories of behavioural change and existing cultural and political challenges | 0 | 0 |
| Work collaboratively in transdisciplinary and interprofessional climate and health initiatives | 0 | 0 |

2.7.2.3 Are the following climate and health competencies formally assessed (quizzes, exams, small group work, papers, thesis, etc) for **Vocational training/Technical degree** students?

| | Yes | No |
|---|-----|----|
| Fundamental science behind the natural and anthropogenic changes in the environment and associated health outcomes for given exposures. | 0 | 0 |
| Demographics, economic development, technology and other drivers/ activities that create pressures on the climate and environment. | 0 | 0 |
| Use of research, tracking, monitoring, and surveillance to assess future health risks from climate and environmental change and the adaptive capacity of a system to cope. | 0 | 0 |
| How biological, social, economic and structural determinants of health synergize with climate exposures to amplify health risk and vulnerability for individuals, communities and health systems. | 0 | 0 |
| Strategies for health systems to mitigate, adapt and build resilience to climate and environmental change | 0 | 0 |
| Assessment of adaptation solutions at population level with accompanying evaluation of health co-benefits | 0 | 0 |

| | Yes | No |
|---|-----|---|
| Solicit and receive stakeholder and community input to inform communication strategies, taking into consideration theories of behavioural change and existing cultural and political challenges | O | 0 |
| Work collaboratively in transdisciplinary and interprofessional climate and health initiatives | 0 | 0 |
| | • | ies formally assessed (quizzes, pral-level training DrPH or PhD |
| | Yes | No |
| Fundamental science behind the natural and anthropogenic changes in the environment and associated health outcomes for given exposures. | 0 | 0 |

0

0

0

Demographics, economic development,

technology and other drivers/ activities that

create pressures on the climate and environment.

Use of research, tracking, monitoring, and surveillance to assess future health

risks from climate and environmental change

and the adaptive capacity of a system to cope.

| | Yes | No | | |
|---|---------------------------------|------------------------------------|--|--|
| How biological, social, economic and structural determinants of health synergize with climate exposures to amplify health risk and vulnerability for individuals, communities and health systems. | 0 | 0 | | |
| Strategies for health systems to mitigate, adapt and build resilience to climate and environmental change | 0 | 0 | | |
| Assessment of adaptation solutions at population level with accompanying evaluation of health co-benefits | 0 | 0 | | |
| Solicit and receive stakeholder and community input to inform communication strategies, taking into consideration theories of behavioural change and existing cultural and political challenges | 0 | 0 | | |
| Work collaboratively in transdisciplinary and interprofessional climate and health initiatives | 0 | 0 | | |
| 2.8 If available, please provid | e the URL to your climate | e-health curriculum website: | | |
| | | | | |
| 2.9 Are any climate and healt committee? (Please select all standalone core course standalone elective course part of the required core curr | that apply) | er consideration by your education | | |
| part of non-required curriculu | part of non-required curriculum | | | |

| Climate and Health Concentration/Certificate |
|--|
| No climate and health offerings are currently being planned |
| 2.10 If there is somebody at your institution who would be better suited to provide details about your climate and health program please provide their Name, Title and Email address below |
| |
| 3. Consent for further contact |
| 3. Consent for further contact |
| May we contact you if we have additional questions? |
| Yes, you may contact me [If selected please provide name and email] |
| O No, I am not interested in further participation |
| |

Powered by Qualtrics