Linking biodiversity and children's health: Global relationships

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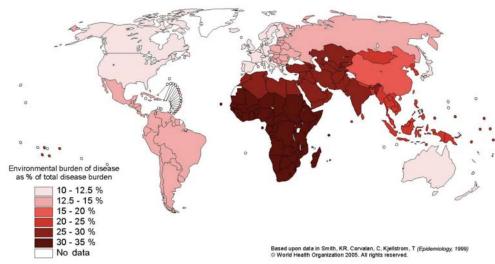
@TaylorHRicketts



Nature and health

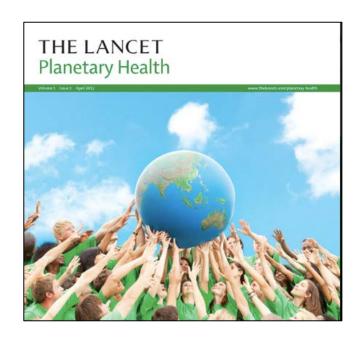


Environmental burden of disease globally





Increasing evidence





- Local and regional studies
- Specific populations and ecosystems
- How general are these relationships?
- Can we inform global efforts?





Global relationships



- Health outcomes
- Social factors
- Sanitation factors
- Natural features
- Watershed condition

(stunting, diarrhea, diet, ...)

(wealth, education, ...)

(water source, toilet type, ...)

(climate, land use, ...)

(upstream human activity, forest cover ...)



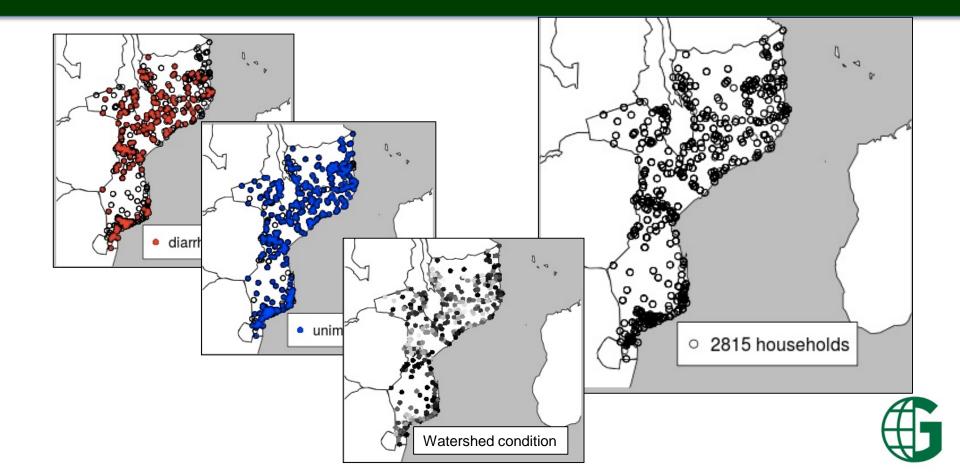
1. Watersheds & waterborne disease

How does watershed condition affect downstream diarrheal disease among children?

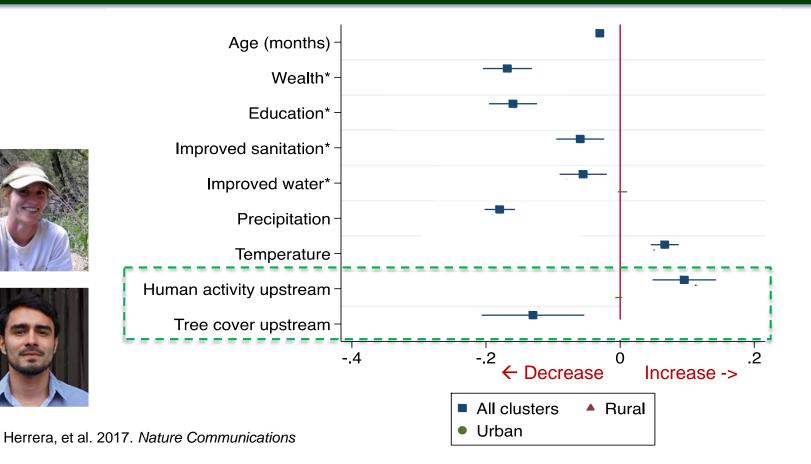




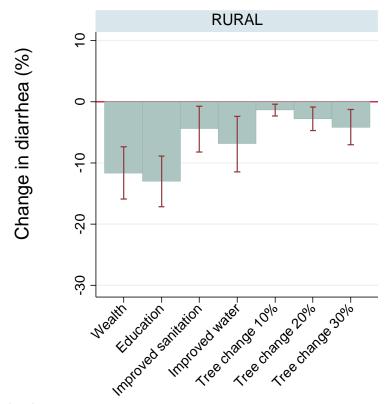
e.g., Mozambique



What impacts childhood diarrhea?



Comparing potential interventions





Can deforestation undermine WASH?

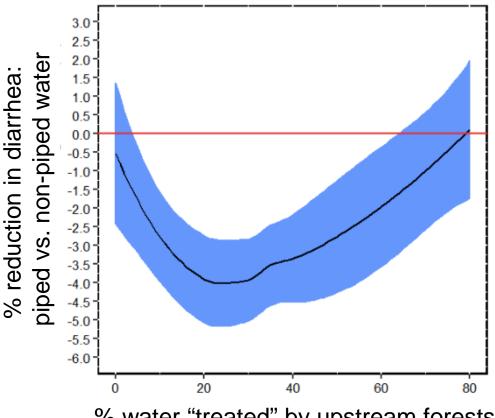


- WASH: water, sanitation, hygiene
- Most common intervention for diarrhea
- Billions spent annually: USAID, UNDP, WHO, Gates



Upstream forests & WASH impacts







Rasolofoson, et al. in review.

% water "treated" by upstream forests

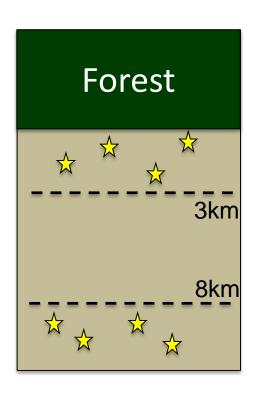
2. Forests and diet diversity

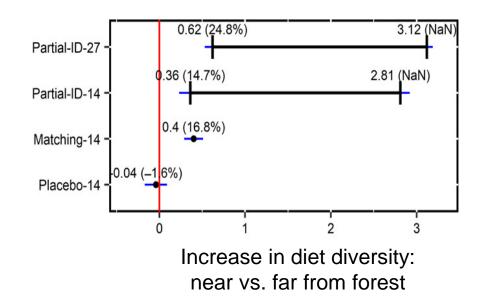
How does nearby forest affect diet diversity in children?





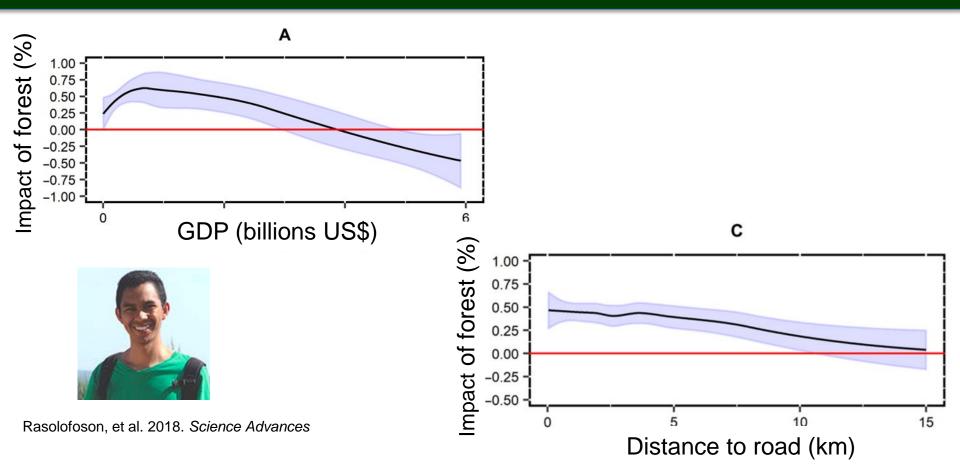
Match households and compare







Impacts are heterogeneous



Take homes

- Forests & conservation affect children's health
 - Even after controlling for many other factors
 - Interacting effects with traditional interventions

- Signal strongest for most vulnerable kids
 - Rural & poor households depend more directly on nature

- Nature investments can be public health investments
 - Important <u>complement</u> to traditional interventions
 - Synergies among conservation, health, development sectors



Sustainable Development Goals





<u>Collaborators</u>

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