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# HEALTH IN ALL POLICIES 20 YEARS LATER

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INTERNATIONAL SCIENTIFIC CONFERENCE

# HEALTH IN ALL POLICIES – 20 YEARS LATER

BOOK OF ABSTRACTS



Belgrade, 16–17 april 2026

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## CLIMATE CHANGE AND PUBLIC HEALTH: OPERATIONALIZING THE HEALTH IN ALL POLICIES, THE CASE OF SERBIA

The relationship between climate change and public health is complex, requiring governance approaches that extend beyond the traditional boundaries of health policy. Climate change increasingly affects population health through altered climatic conditions. These impacts manifest unevenly across generations and social groups, with younger populations experiencing heightened mental health challenges, such as climate-related anxiety, while older adults facing disproportionately increased risks of heat-related illness and mortality. At the same time, public health and healthcare systems are not merely passive recipients of climate impacts but also active contributors to climate change. Greenhouse gas emissions associated with energy consumption in healthcare facilities, transportation, pharmaceuticals, and medical technologies position the health sector as a significant, though often overlooked, source of emissions. This dual role of public health, as both a sector affected by and contributing to climate change, underscores the need for integrated policy responses that address health protection and climate action simultaneously.

In this regard, the Health in All Policies (HiAP) approach provides a strategic and normative framework for systematically integrating health considerations into policymaking across sectors that are crucial for climate change mitigation and adaptation. From a legal perspective, HiAP emphasizes the importance of institutionalized intersectoral cooperation, shared responsibility and evidence-based decision-making based on health equity. Our research examines how legal and regulatory frameworks can operationalize the HiAP approach within climate change governance by incorporating health objectives into climate policies and, conversely,

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climate considerations into public health policies in Serbia. One of the key questions is whether there is sufficient sectoral coherence to enable the implementation of the HiAP approach when it comes to health and climate change in Serbia.

In our research, we argue that embedding the HiAP approach within climate-related and public health legal frameworks can enhance policy coherence, strengthen the resilience of public health systems, and promote more equitable and sustainable outcomes. By leveraging law as an enabling tool, HiAP can function as a critical bridge between climate action and public health protection, ensuring that climate policies deliver tangible health co-benefits, while minimizing the climate footprint of the health sector itself.

**Keywords:** Climate change, Public health, Health in All Policies, Climate legislation, Health equity