

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17

**Developing a model for effects of climate change on human health and health-environment interactions: heat stress in Austin, Texas**

**Roelof J. M. Boumans<sup>1</sup>, Donald L. Phillips<sup>2</sup>, Winona Victory<sup>3</sup>, Thomas D. Fontaine<sup>2</sup>**

<sup>1</sup>AFORDable Futures LLC, Charlotte, VT, USA

<sup>2</sup>U.S. Environmental Protection Agency, National Health and Environmental Effects Research Laboratory, Corvallis, OR, USA

<sup>3</sup>U.S. Environmental Protection Agency, Region 9, San Francisco, CA, USA

18 **Abstract**

19

20 Human health and well-being are and will be affected by climate change, both directly through  
21 changes in extreme weather events and indirectly through weather-induced changes in human  
22 and natural systems. Populations are vulnerable to these changes in varying degrees, depending  
23 on characteristics such as age, health status, genetic background, economic status, as well as  
24 access and proximity to social and health support. Both climate change impacts and the  
25 effectiveness of mitigation and adaptation decisions will depend on the patterns of climate  
26 stressor exposure and population vulnerability at local scales. The complexity of these  
27 interactions calls for the development of scenario modeling tools, based on systems thinking  
28 approaches which are applied in spatially-temporally explicit frameworks. The goal of this study  
29 was to develop and apply a broadly applicable modeling and support platform for decisions at  
30 the local scale that consider potential climate change health effects and the effectiveness of  
31 mitigation options.

32

33 An initial prototype model of climate change effects on human and natural systems was  
34 developed to specifically predict heat stress morbidity and mortality in Travis County, Texas  
35 (Austin and vicinity). The model was developed in a manner which will allow it to be readily  
36 adapted to other locations and health endpoints as well. The model followed the logical steps:  
37 (1) determine spatial and temporal variation in hazard exposure; (2) analyze spatial variation in  
38 population vulnerability to hazards; (3) estimate health outcome risk for population groups  
39 through hazard exposure and hazard response functions; (4) examine how mitigation options  
40 may affect health outcomes and their links to other ecosystem services. In demonstration runs  
41 greater heat stress effects were predicted in the urban core and in populations with higher risk  
42 factors such as low income, older ages, and pre-existing medical conditions. Scenarios of  
43 increased urban tree cover to promote greater shading and evaporative cooling were examined as  
44 examples of mitigation options for model analysis.

45

46 Key words: climate change, human health, heat stress, model, urban heat island, Austin