

Climate change and One Health: tackling vector-borne disease risks in an era of global change

Manisha Kulkarni, PhD

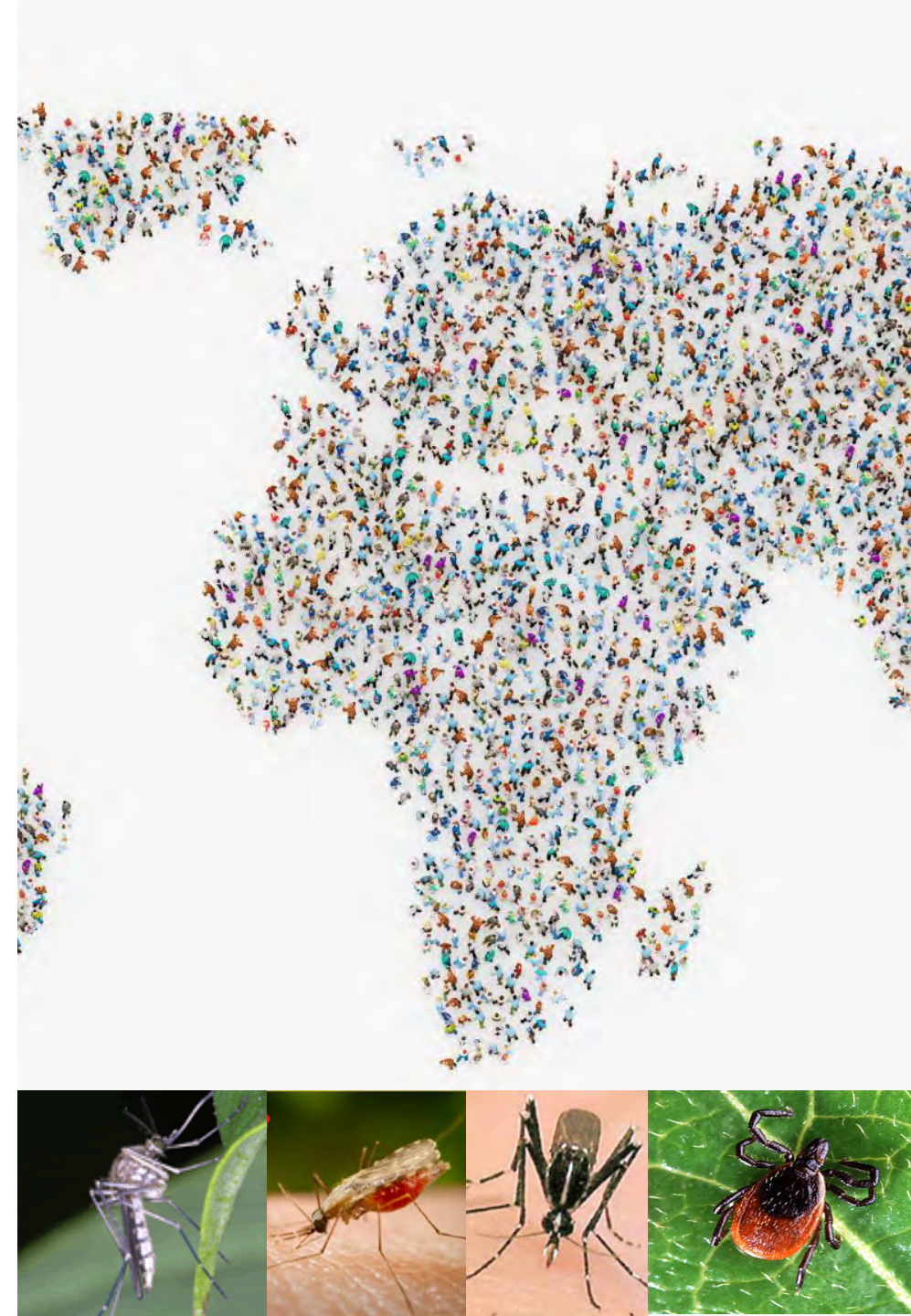
Professor & University Research Chair in Climate Change and Emerging Diseases

School of Epidemiology & Public Health | University of Ottawa

CAHS Forum, Montreal | May 8, 2026

Key messages

1. Global change is altering patterns of vector-borne disease transmission and risk
2. One Health approaches are needed to understand and address increasing risks posed by climate-sensitive diseases
3. A novel One Health research framework can help to generate meaningful evidence and solutions



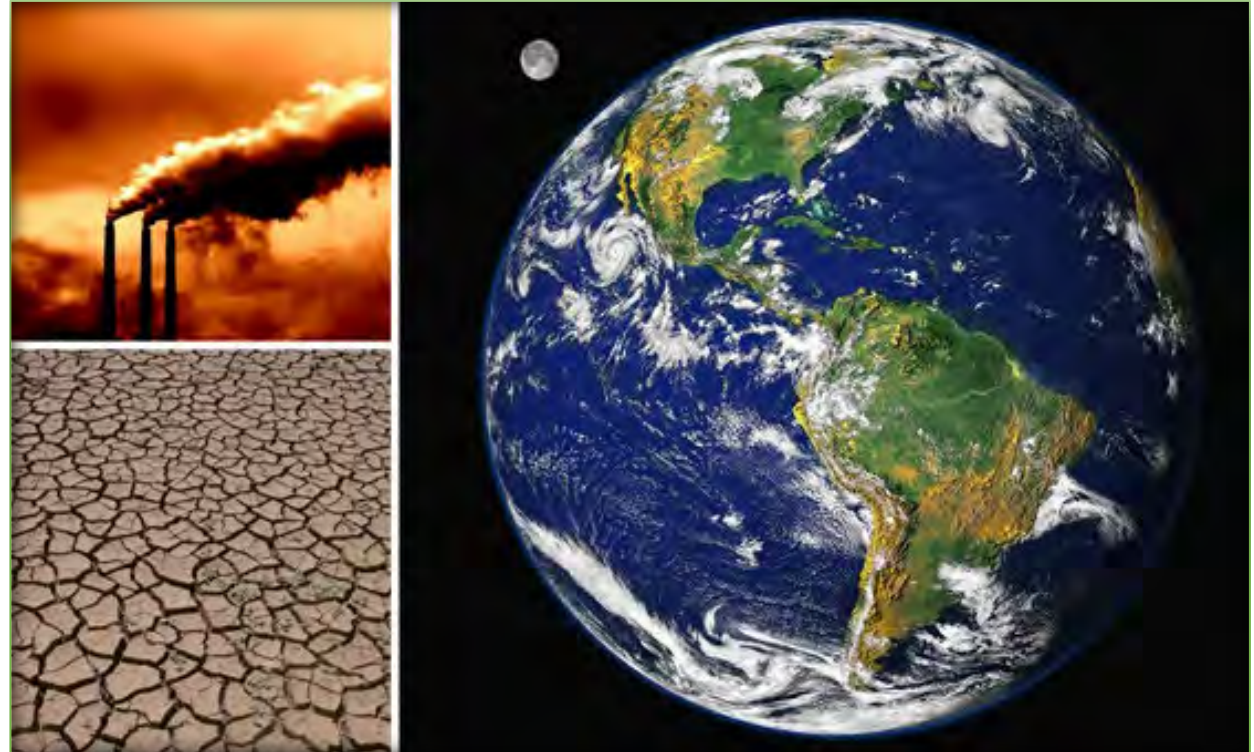
Global change is altering patterns of vector-borne disease transmission and risk



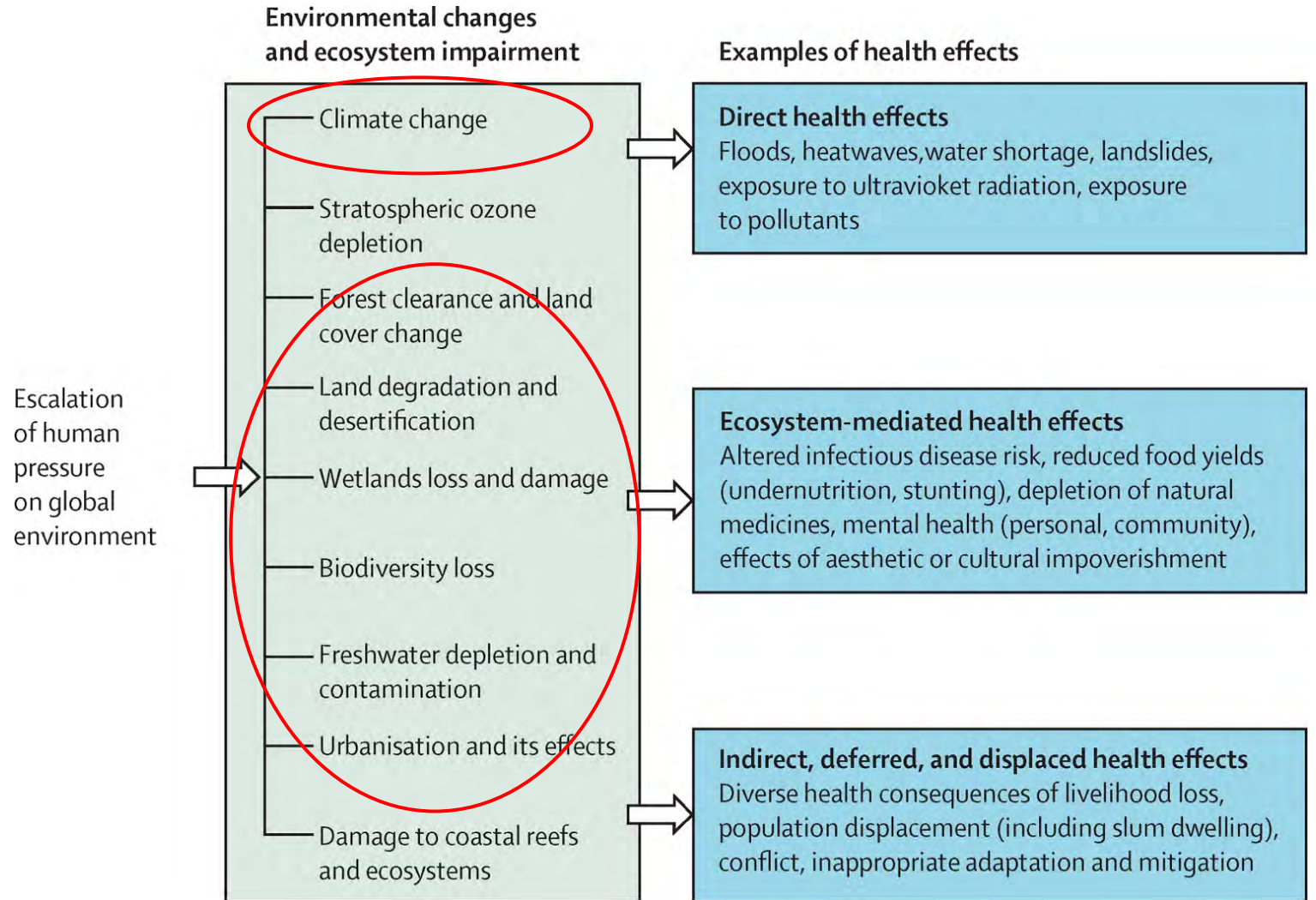
Global change encompasses change in a wide range of global scale phenomena, including climate change:

- Population, the economy, resource use,
- Land use, land cover, and urbanization
- Coastal ecosystems, the physical climate, and marine food chains
- Biological diversity

We're in an era of global change



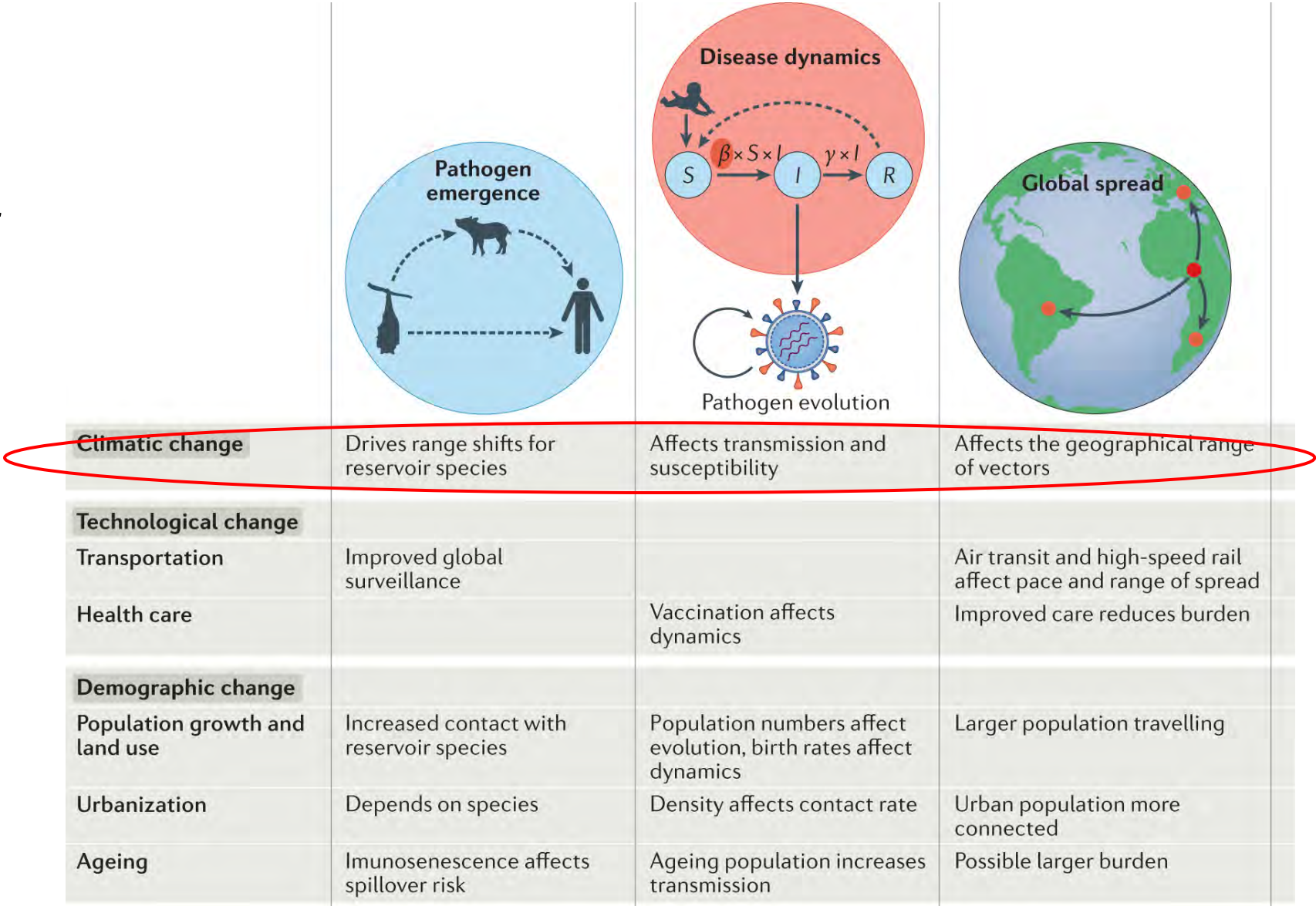
Climate change and other anthropogenic ecosystem disruptions affect human health



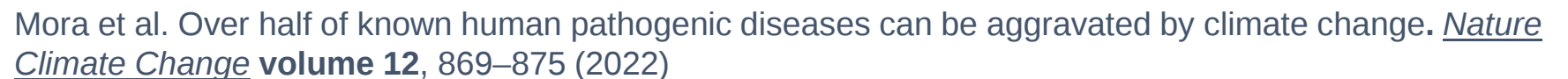


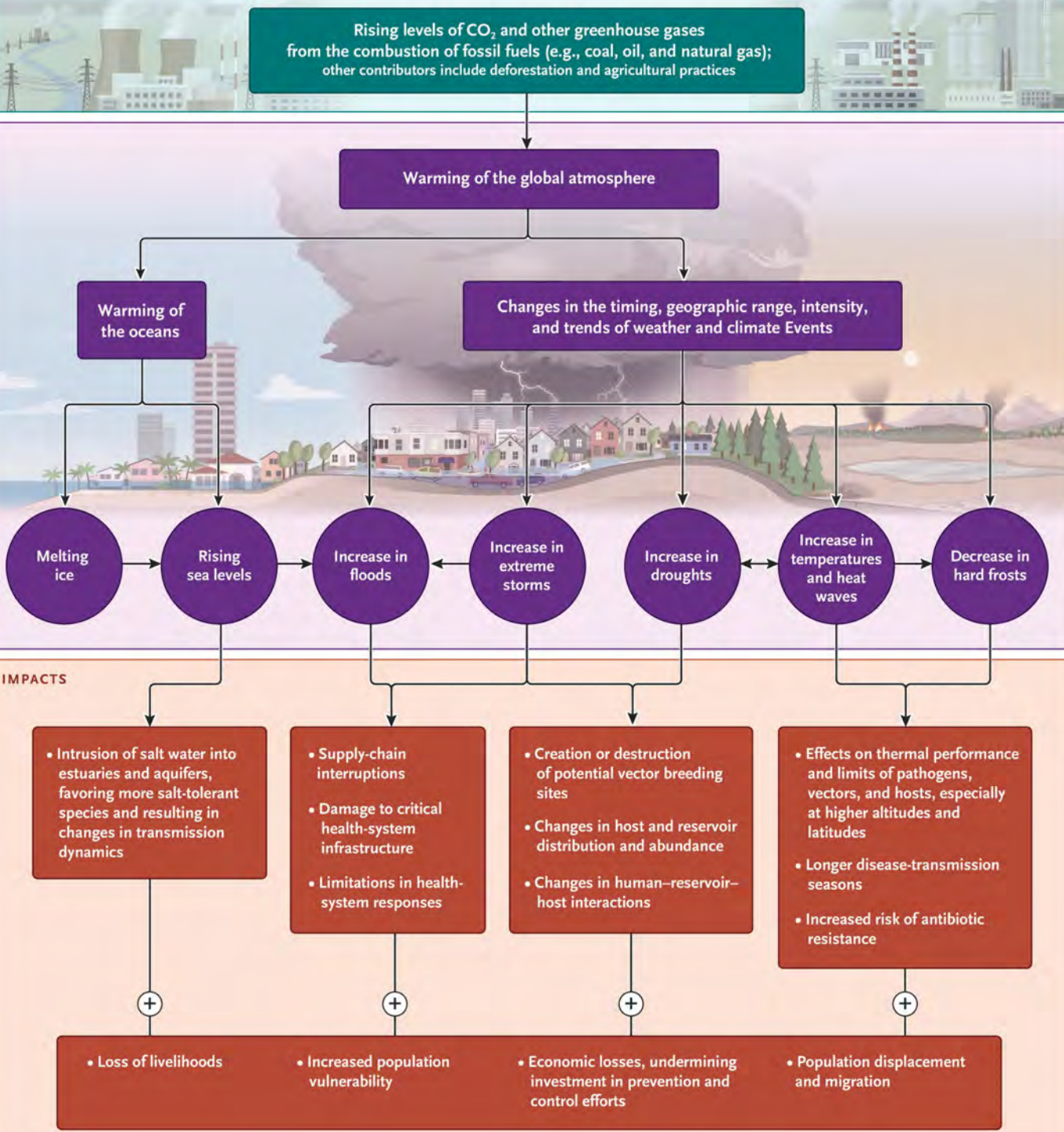
Climate change interacts with other global changes to affect infectious disease emergence, dynamics and spread

Baker et al Infectious disease in an era of global change. Nature Reviews Microbiology volume 20, pages193–205 (2022).<https://www.nature.com/articles/s41579-021-00639-z>



Large number of climate-sensitive diseases are *vector-borne* – impacted by a wide range of climate hazards



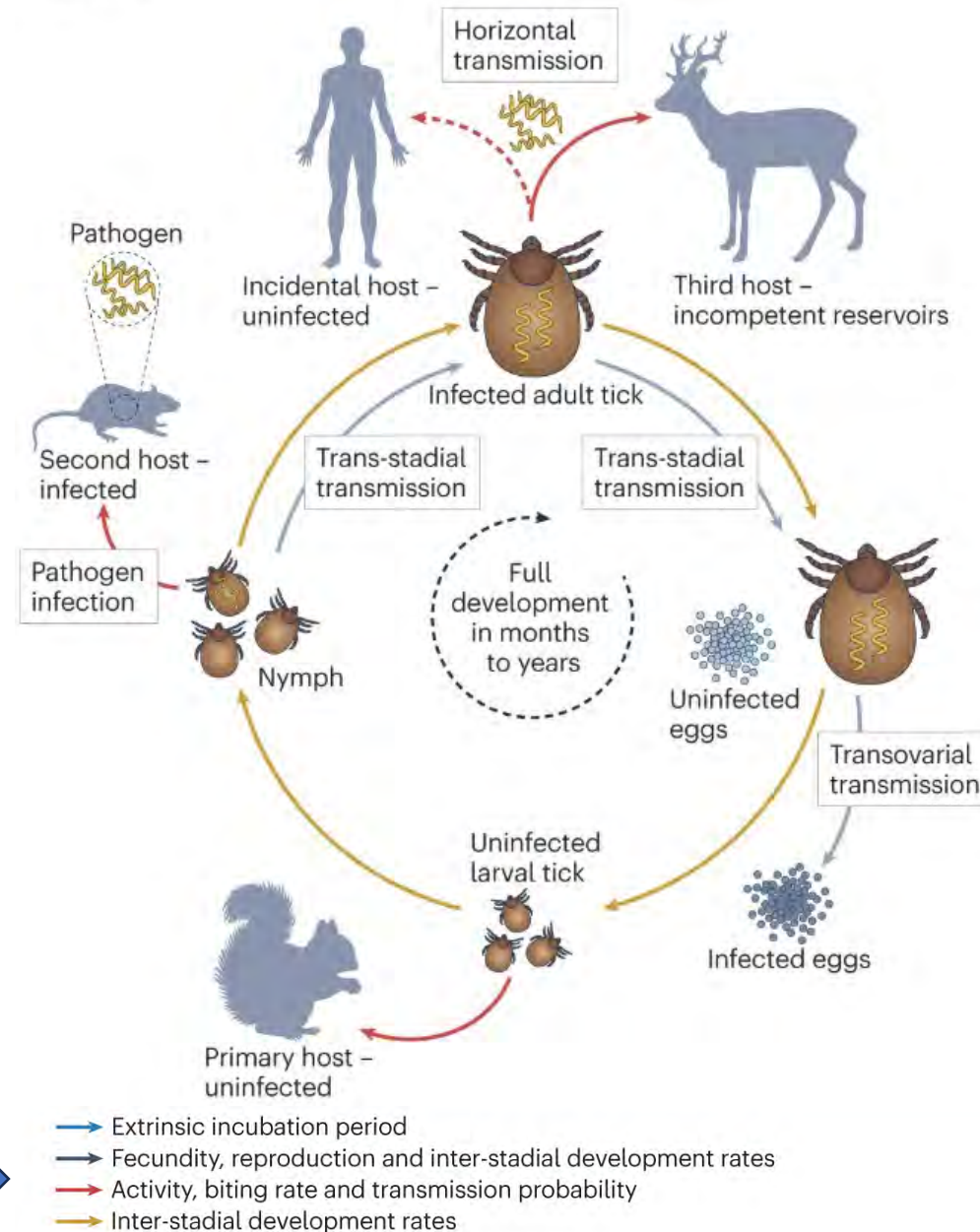


- Rising temperatures, changing precipitation patterns and extreme weather events alter:
 - vector and wildlife reservoir habitat and distributions
 - vector and pathogen survival and development rates
 - length of transmission seasons
 - human-vector contact rates
 - population vulnerability and response efforts
- Environmental dependencies of key vector and pathogen processes make vector-borne diseases highly sensitive to climate and ecological changes

Pathways between Fossil Fuels and Rising Greenhouse Gases and Vector-borne Diseases. Thomson & Stanberry 2022 N Engl J Med 2022;387:1969-1978

Some vector-borne pathogens have cycles involving multiple wild and domestic animals (enzootic and epizootic cycles), and others such as *Plasmodium falciparum* and dengue virus (DENV) are maintained in a single vertebrate host (human-amplified cycles).

b
Terrestrial



Temperature effects on vector life cycle and pathogen transmission routes for arboviral illness and tick-borne diseases

de Souza, W.M., Weaver, S.C. Effects of climate change and human activities on vector-borne diseases. *Nat Rev Microbiol* **22**, 476–491 (2024).

Temperature-dependent processes

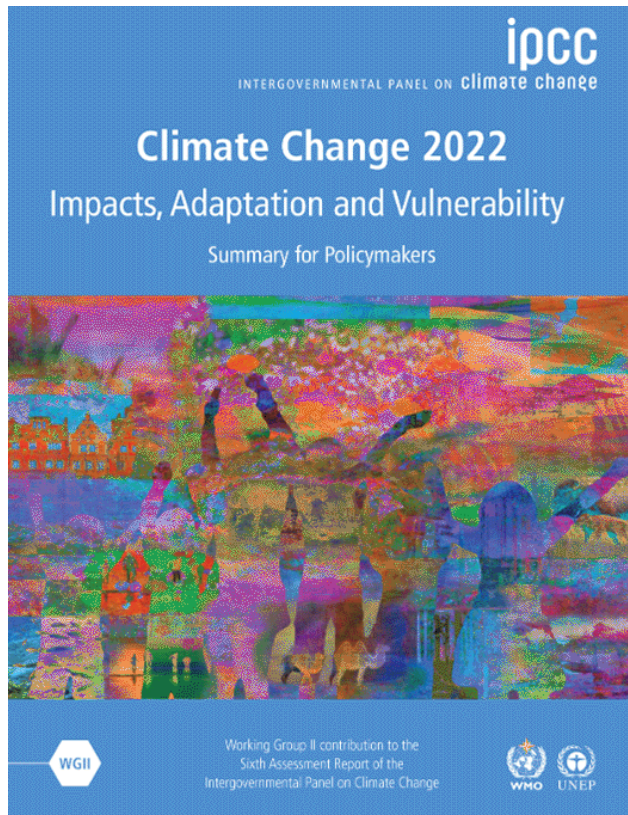
c				d			
	<i>A. aegypti</i>	<i>A. albopictus</i>	<i>C. pipiens</i>		<i>I. scapularis</i>	<i>A. americanum</i>	<i>D. variabilis</i>
Pathogens:	Dengue, Zika and chikungunya viruses	Dengue, Zika and chikungunya viruses	West Nile and Usutu viruses	Pathogens:	<i>Borrelia burgdorferi</i> and Powassan virus	<i>Francisella tularensis</i> and Heartland virus	<i>Francisella tularensis</i> and <i>Rickettsia rickettsii</i>
Biting rate:	33.8 °C (13.8–40.0 °C)	31.8 °C (10.4–38.1 °C)	32.7 °C (9.4–39.6 °C)	Lower lethal temperature:	-15 °C	-15 °C	-20 °C
Fecundity:	29.6 °C (14.7–34.4 °C)	29.4 °C (7.9–35.6 °C)	22.1 °C (5.3–38.9 °C)	Upper lethal temperature:	41 °C	45 °C	43 °C
Mosquito dev. rate:	32.7 °C (11.6–33.0 °C)	32.6 °C (8.7–39.6 °C)	30.9 °C (0.1–38.5 °C)	Greatest activity:	30–40 °C	30–40 °C	30–40 °C
Immature survival:	25.9 °C (13.6–38.3 °C)	24.2 °C (9.1–39.3 °C)	23.1 °C (7.8–38.4 °C)	Thermal preference:	10–14 °C	15–20 °C	20–24 °C

- Temperature effects on key biological traits of vectors and pathogens are non-linear and differ by species
- New regions are becoming climatically suitable for vectors and pathogens, altering patterns of disease risks, globally and locally
- Vector habitat preferences also differ across species, complicating future predictions of global change effects

de Souza, W.M., Weaver, S.C. Effects of climate change and human activities on vector-borne diseases. *Nat Rev Microbiol* **22**, 476–491 (2024).



Photos: <https://www.ifri.org/> (top), <https://policyoptions.irpp.org/> (middle), <https://africa-health.com/> (bottom)



Intergovernmental Panel on Climate Change AR6. Climate change 2022: Impacts, adaptation and vulnerability. (<https://www.ipcc.ch/report/ar6/wg2/>).

Climate change and vector-borne diseases

Vectorial capacity has increased for dengue fever, malaria and other mosquito-borne diseases and higher global average temperatures are making wider geographic areas more suitable for transmission (high confidence).

Climate change has contributed to the spread of the Lyme disease vector *Ixodes scapularis*, and a corresponding increase in cases of Lyme disease in North America (high confidence).

Transmission of many vector-borne diseases is expected to further increase during the next 80 years if measures are not taken to adapt and strengthen control strategies

One Health approaches are needed to understand and address increasing risks posed by climate-sensitive diseases



Public health and climate change adaptation strategies to address vector-borne diseases exist...



Risk modelling & early warning systems

predictive models incorporating weather/climate data and vector and/or disease surveillance data



Prioritization

prioritize diseases based on public health importance & risk of (re-)emergence due to climate change



Surveillance

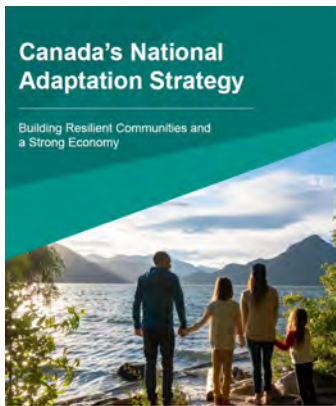
surveillance of vectors and/or sentinel animals
genomic surveillance



Interventions

vector control measures
vaccines and therapeutics
personal protection
risk communications

Public health and climate change adaptation strategies to address vector-borne diseases exist...



- BUT....adaptation and response efforts are constrained by existing research gaps:

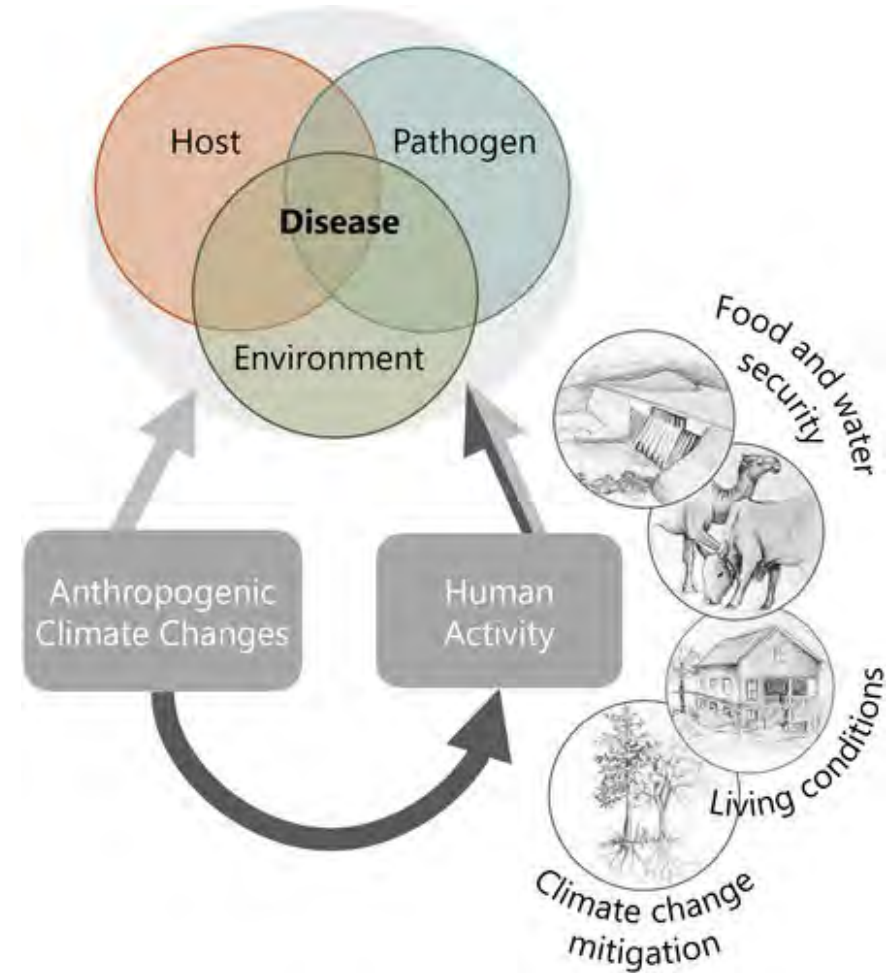
- limited knowledge of ecology in emerging regions
- little surveillance data for calibration and validation of predictive models
- lack of long-term monitoring that is required to attribute changes in disease risk to climate change



- Need for One Health research and One Health approaches to guide risk prediction and public health response

Vector-borne disease risk prediction and public health response must consider....

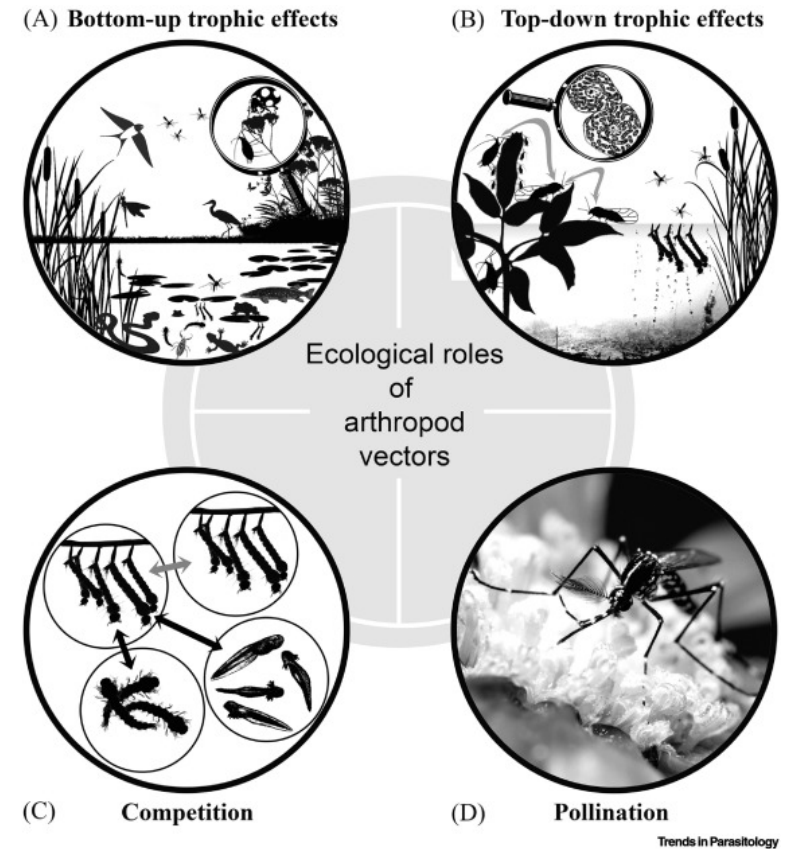
- Direct climate change impacts on host, pathogen and vector
- Indirect climate change impacts via pathways mediated by human actions:
 - climate change mitigation (actions to reduce GHG emissions, e.g. urban greening)
 - climate change adaptation (actions to enhance resilience, e.g. irrigation and water storage)



Titcomb et al. Infectious disease responses to human climate change adaptations. *Global Change Biology*, Volume: 30, Issue: 8, 2024

Vector-borne disease risk prediction and public health response must consider....

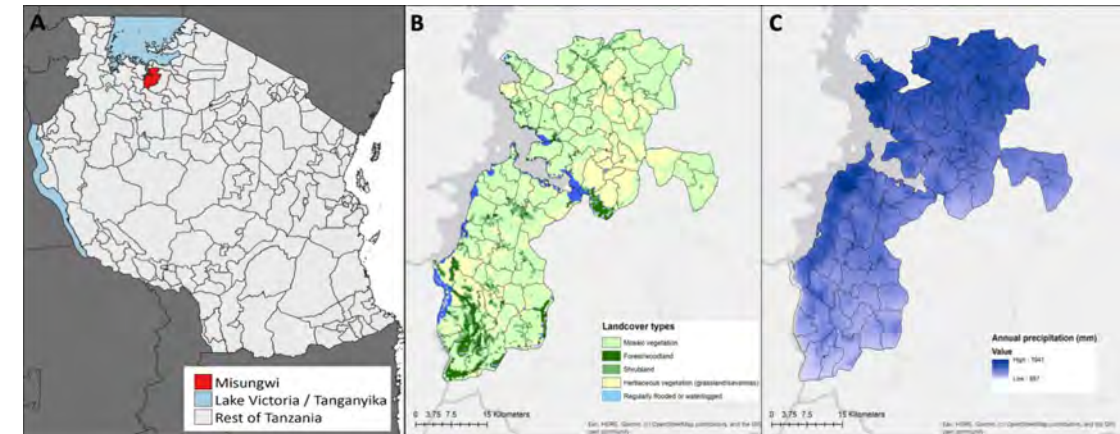
- Ecological importance of arthropods in ecosystems:
 - Foundation of the food web
 - Pollinators
 - Nutrient cycling and water quality
 - Ecological indicators
- One Health approaches needed to balance sometimes conflicting goals in vector management & ecosystem health



Lefèvre T, et al. The ecological significance of arthropod vectors of plant, animal, and human pathogens. *Trends Parasitol.* 2022 May;38(5):404-418.

Example 1 – Lake Victoria, Tanzania

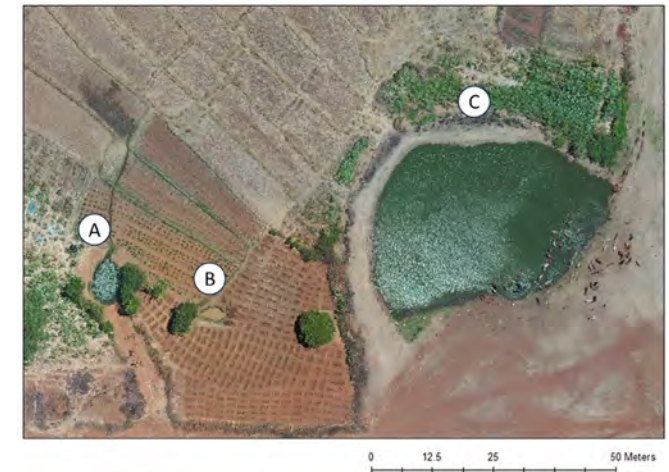
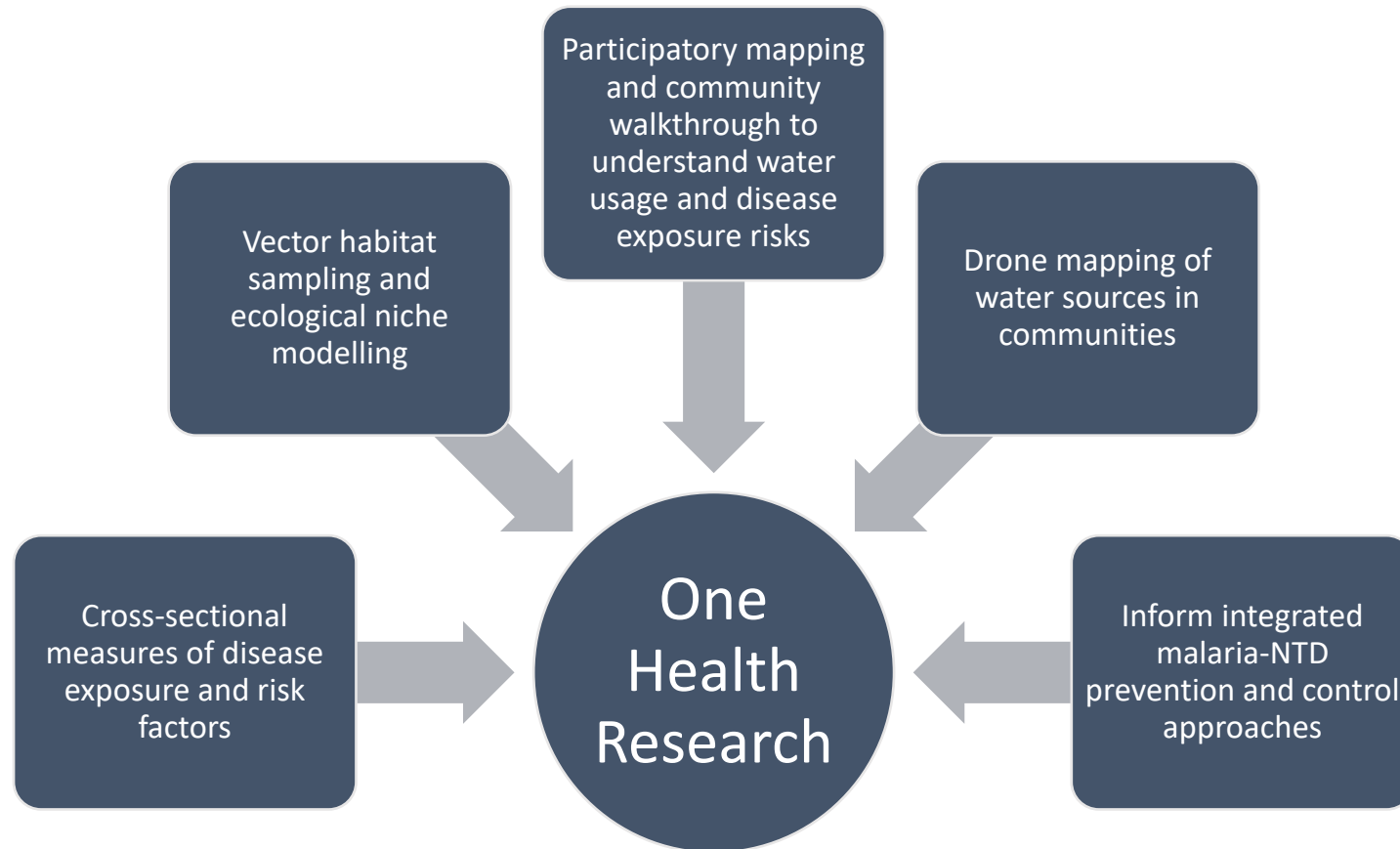
- Climate change impacts on seasonal flooding & droughts
 - Food and water insecurity (human & livestock)
 - Wildlife habitat loss and human-wildlife conflict
 - Increased zoonotic disease risks (Rift Valley Fever virus, trypanosomiasis)
- Co-endemicity of malaria and schistosomiasis: 14–38% co-infection in children 5–15 yrs (Duguay et al., 2024)
- Role of temporary ponds as mosquito/snail breeding sites and water supply for livestock and humans



Matowo, N.S., Martin, J., Kulkarni, M.A. et al. (2021) An increasing role of pyrethroid-resistant *Anopheles funestus* in malaria transmission in Lake Zone, Tanzania. Sci Rep 11, 13457



Example 1 – Lake Victoria, Tanzania



Duguay et al. (2025) Fine scale mapping of water sources in low-income settings: A comparative study in Misungwi, Tanzania. PLoS ONE 20(3): e0319603; Photos courtesy of Claudia Duguay (uOttawa)



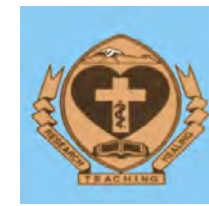
Example 2 – Maruwa Hills, South Sudan

- Murle nomadic pastoralists migrate seasonally to cattle camps
- Central importance of livestock for livelihoods, culture, identity and social relations
- Climate change + conflict
 - Altered migration routes/timing
 - Increased livestock diseases, ~30% prevalence of malaria (MSF, 2025)
 - Challenges to implement human/animal health services

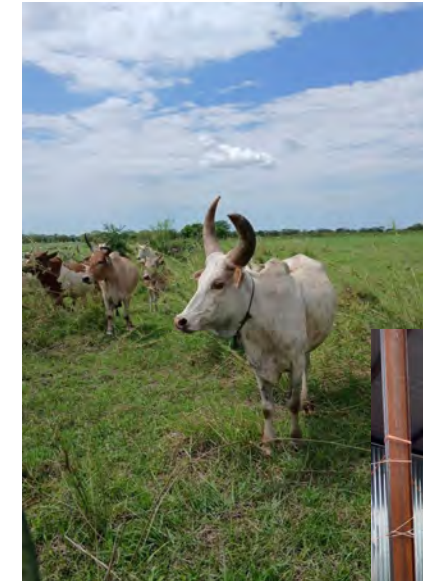
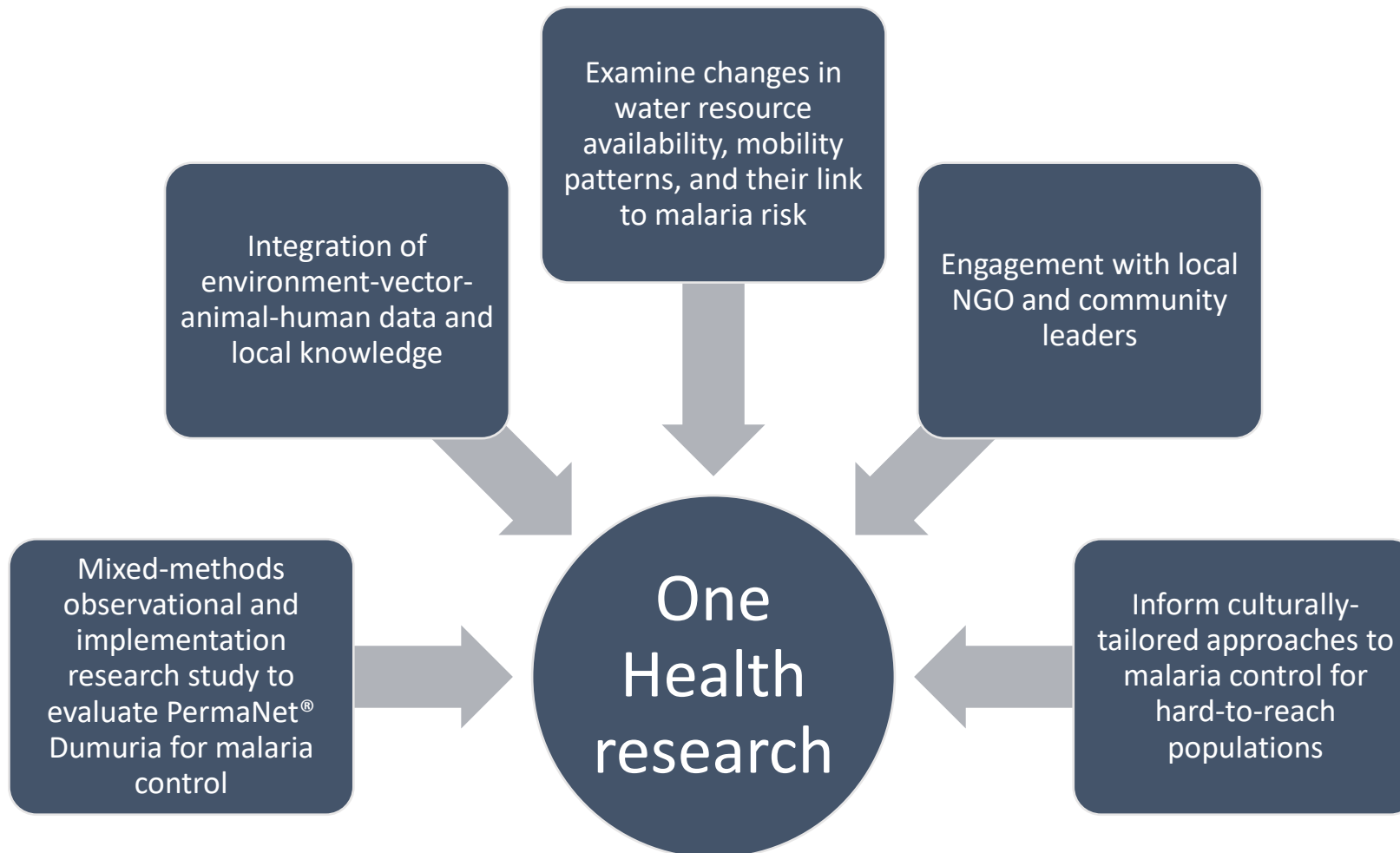




Swiss TPH



Example 2 – Maruwa Hills, South Sudan



Photos courtesy of Corey Leclair (MSF) and Eliud Lukole (LSHTM)



CCN
NCC



Université
de Montréal



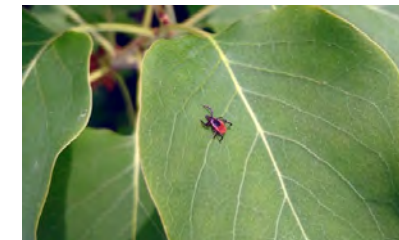
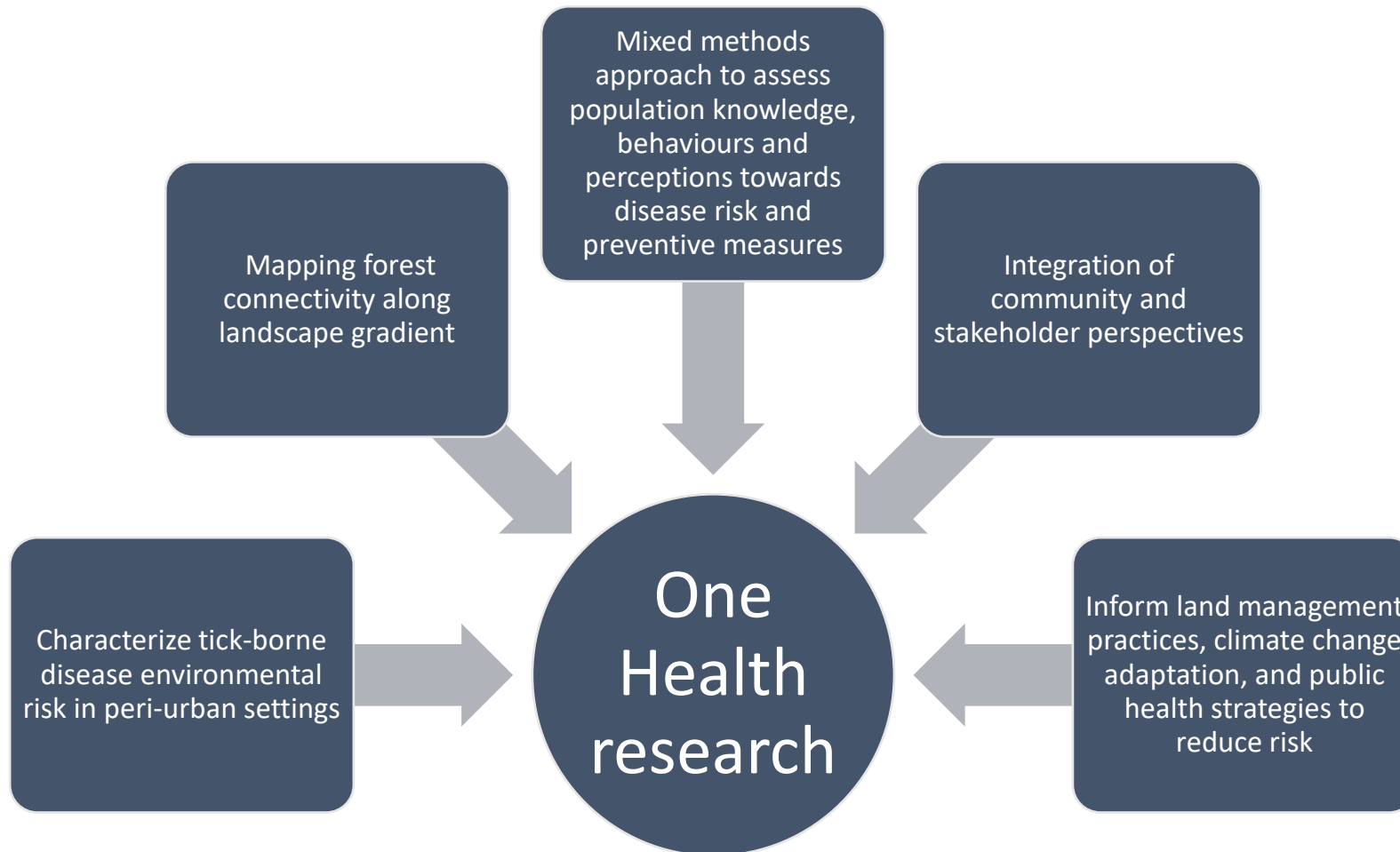
Example 3 – Ottawa, Canada

- Climate and landscape changes driving northward expansion of blacklegged tick populations and tick-borne diseases
- Urbanization → biodiversity loss & human encroachment into woodland habitats → increased spillover risk
- 5-fold increase in Lyme disease incidence in Ottawa since 2015



Photos courtesy of Roman McKay and Benoit Talbot (uOttawa)

Example 3 – Ottawa, Canada



Photos courtesy of Roman McKay and Benoit Talbot (uOttawa)

One Health approaches to address climate-sensitive diseases

Recent scoping review:



More One Health strategies needed:

- Compared recommended strategies to address emerging vector-borne disease risks with actions in ~90 Canadian climate change adaptation plans
- Only 9% of plans explicitly mentioned One Health, with majority at the national level

- Integrated surveillance & early warning systems for human & animal diseases
- Integrated vector management approaches that protect ecosystem services
- Integrated distribution of human medicines/interventions during livestock vaccination campaigns
- Insecticide-treated livestock to address residual malaria transmission by exophilic vectors
- Repurposing of veterinary drugs for malaria and dengue control (e.g. isoxazolines)

**A novel One Health research framework
can help to generate meaningful
evidence and solutions**



A novel framework for One Health research

- Draws on elements from existing One Health and Ecohealth frameworks, OHHLEP **foundational principles**, and practical aspects of transdisciplinary research
- Traces the research process through **four phases** and reflects **five guiding principles**
 - systems thinking,
 - Indigenous and local knowledge,
 - gender and inclusion,
 - stakeholder participation, and
 - optimal ecosystem-animal-plant-human health outcomes.

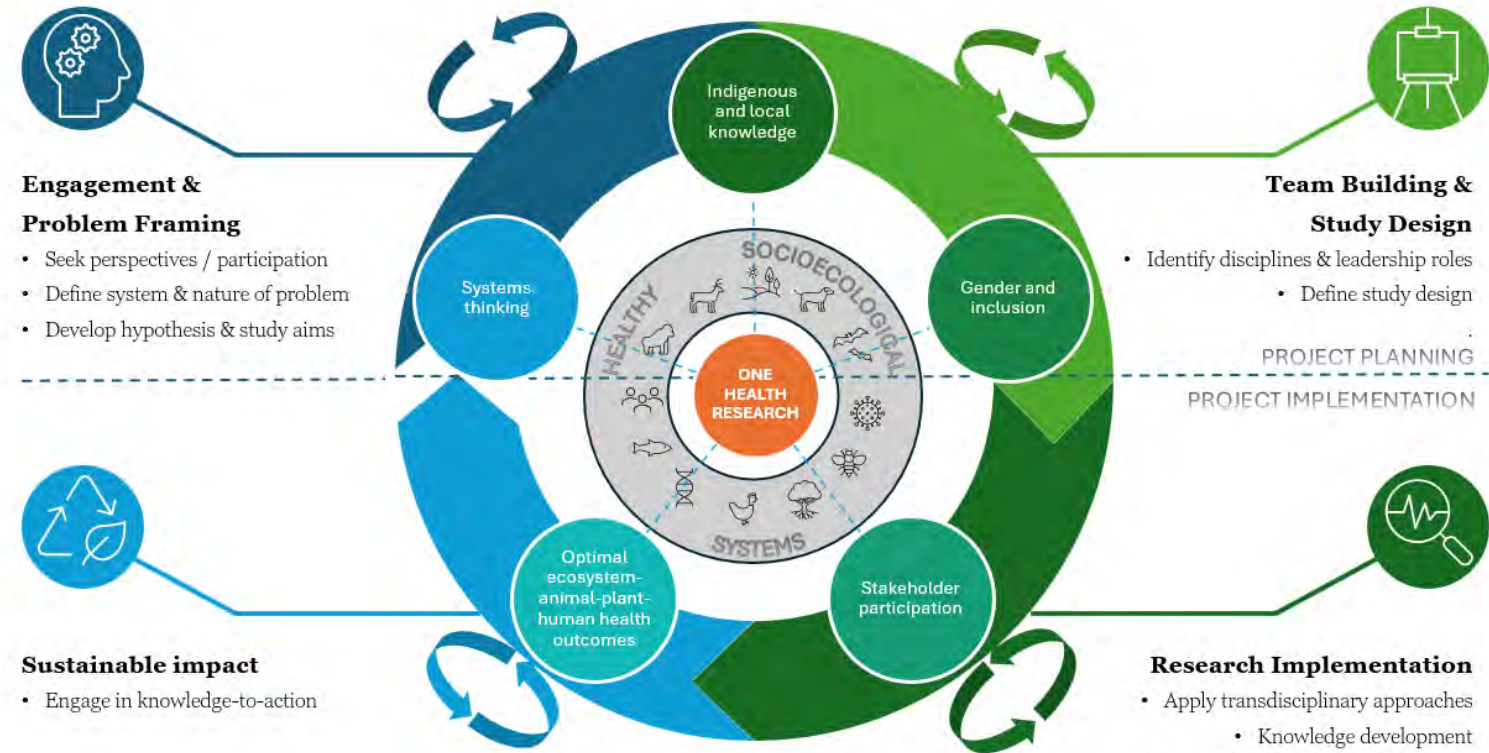


Figure 1. Framework to guide One Health research.

(M. Kulkarni, C. Jardine, H. Carabin, S. Mubareka, M. King, J. Parmley, N. Ogden, D. Charron , under review)

A novel framework for One Health research

- Recognizes the critical roles of **healthy socioecological systems** – comprised of healthy environments, healthy humans, and healthy animals, and their interdependencies – in achieving optimal health for all
- Recognizes that One Health research encompasses approaches from the **natural, social and health sciences** that are applied at **multiple scales**, from molecules and cells to populations and ecosystems

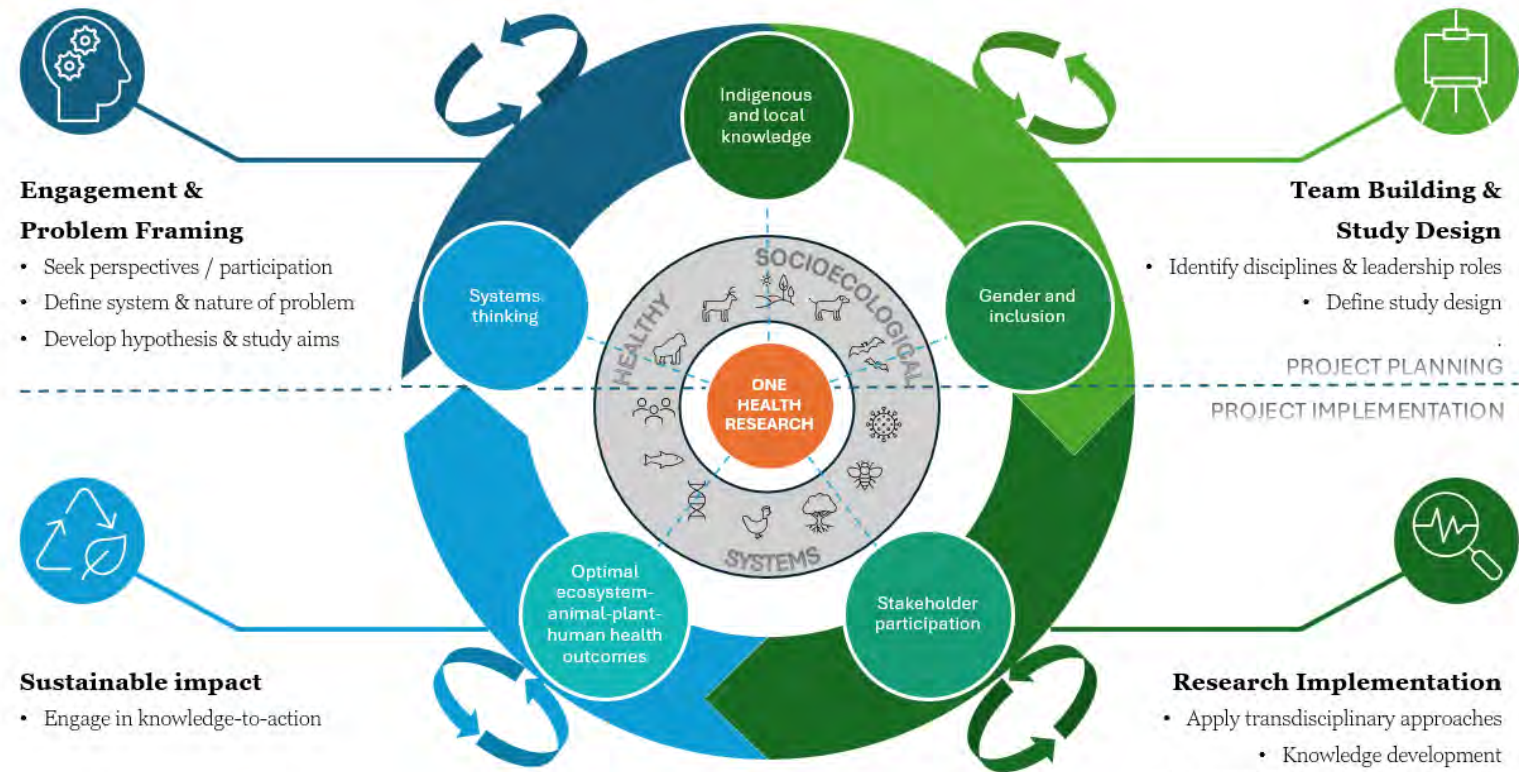
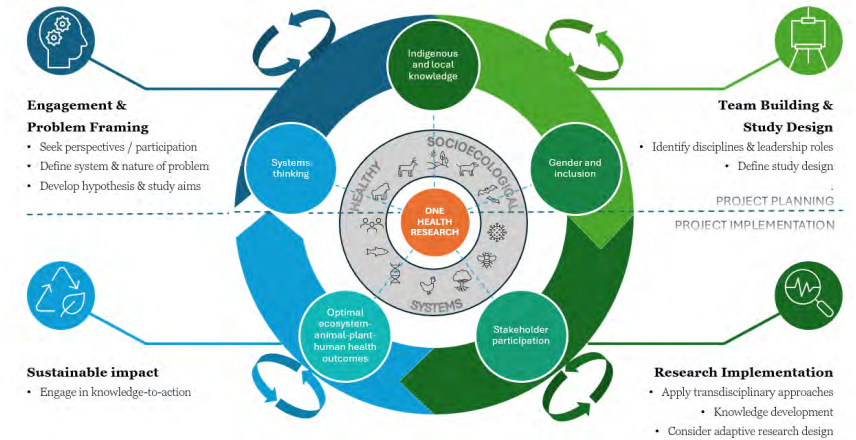


Figure 1. Framework to guide One Health research.

(M. Kulkarni, C. Jardine, H. Carabin, S. Mubareka, M. King, J. Parmley, N. Ogden, D. Charron , under review)

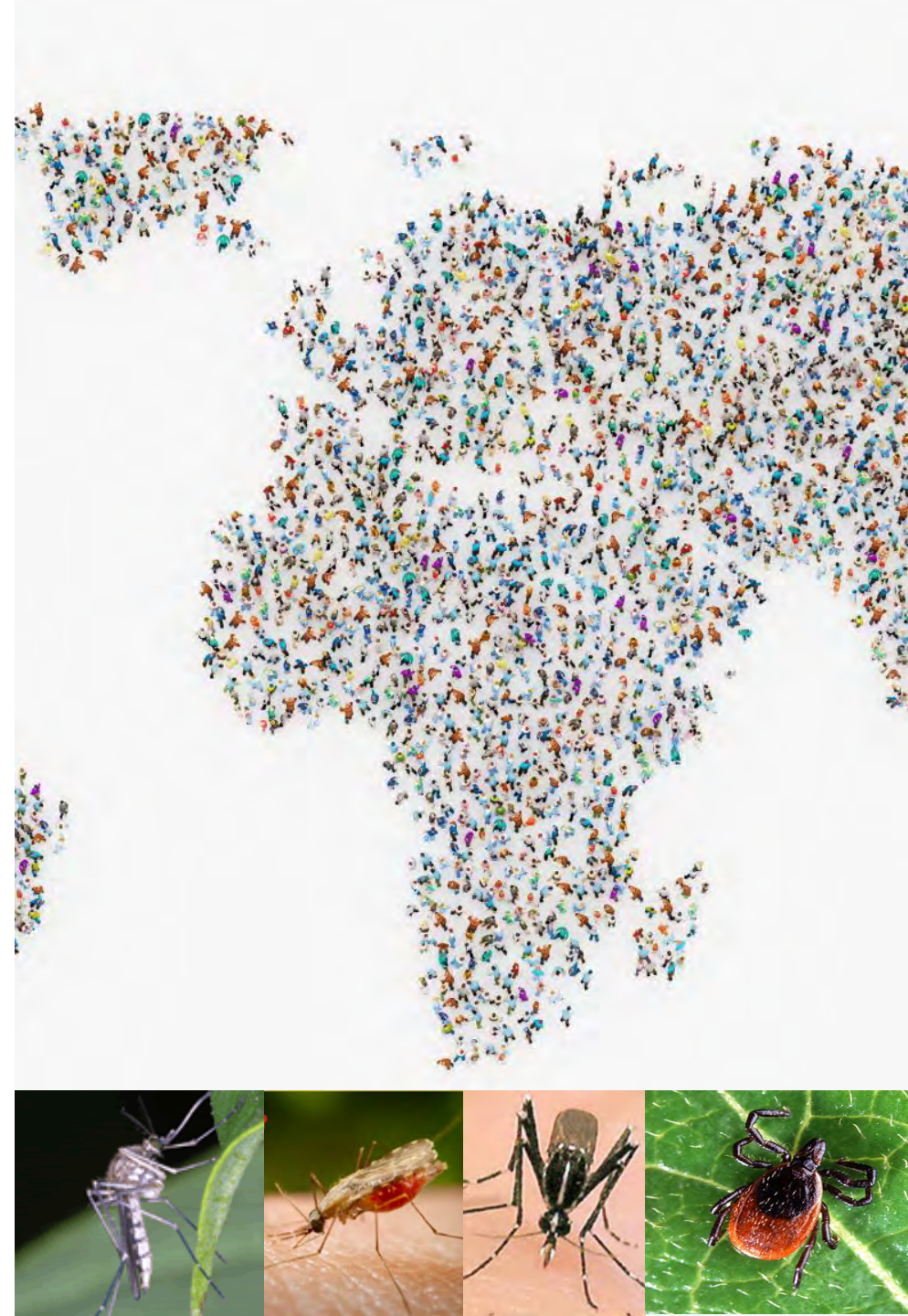
A novel framework for One Health research

- This framework may be applied to **address One Health problems** that include (but are not limited to):
 - the intersecting human, animal, plant and ecosystem health implications of **climate change**, air pollution, biodiversity loss, and environmental contaminants;
 - the complex challenges of **vector-borne and zoonotic disease control**, emerging pathogens, and antimicrobial resistance;
 - more local but not less complex problems such as beach or fishery closures due to local water quality problems.



Key messages

1. Global change is altering patterns of vector-borne disease transmission and risk
2. One Health approaches are needed to understand and address increasing risks posed by climate-sensitive diseases
3. A novel One Health research framework can help to generate meaningful evidence and solutions



Acknowledgements



Pan-African Malaria Vector Research Consortium, Tanzania

- Prof Frank Mosha
- Dr Debora Kajeguka
- Dr Robert Kaaya
- Dr Jacklin Mosha
- Dr Alphaxard Manjurano
- Dr Jackline Martin

London School of Hygiene & Tropical Medicine, UK

- Prof Mark Rowland
- Dr Nancy Matowo
- Dr Eliud Lukole
- Dr Louisa Messenger
- Prof Jackie Cook

Swiss TPH, Switzerland

- Dr Natacha Protopopoff

Medecins Sans Frontieres, Belgium

- Dr Corey Leclair

University of Montreal

- Prof Patrick Leighton

City of Ottawa & Ottawa Public Health

- Dr. Monir Taha
- Ann Stanton-Loucks
- Dr. Nick Stow

National Capital Commission

- Alex Stone
- Isabelle Hughes

University of Ottawa

- Dr Claudia Duguay
- Charles Thickstun
- Katarina Ost
- Dr Roman McKay
- Dr Benoit Talbot
- Dr Andreea Slatculescu
- Dr Jay Logan
- Dr Amber Gigi Hoi
- Michala Norman
- Renee Schryer
- Prof Anders Knudby

