

Frequently Asked Questions

Health Care Without Harm and Race to Zero

1. What is Race to Zero?

[Race to Zero](#) is a global campaign initiated by the United Nations Framework Convention on Climate Change (UNFCCC) to rally leadership and support from non-state actors for a healthy, resilient, zero-carbon recovery that prevents future threats, creates decent jobs, and unlocks inclusive, sustainable growth. It mobilizes a coalition of leading net zero initiatives by cities, regions, businesses, investors, and universities. Race to Zero is inviting health sector participation through the Health Care Climate Challenge.

These coalitions join 120 countries in the [largest ever alliance](#) committed to achieving net zero emissions by 2050 at the latest. Although the key focus is zero emissions by 2050, Race to Zero is also heralded as a race to zero poverty, loss of biodiversity and pandemics.

2. What is the Health Care Climate Challenge?

Health Care Without Harm's [Health Care Climate Challenge](#) mobilizes health care institutions around the world to protect public health from climate change. The Climate Challenge currently has over 350 participants, representing the interests of more than 26,000 hospitals and health centers in 48 countries committed to climate mitigation, resilience, and leadership.

The Health Care Climate Challenge is the official Race to Zero health care partner.

3. Why would a health care institution want to join the Race to Zero?

A health care organization should consider joining this initiative to:

- Join a United Nations cross-sectoral global campaign necessary to reach our global carbon reduction goals.
- Meet their obligation to "first, do no harm" and set a science-based greenhouse gas emissions reduction target.
- Support the organization's ambition to reach net zero carbon emissions.
- Develop a strategy to reduce carbon emissions systematically.
- Establish themselves as a leader in health care climate action.

4. How does Health Care Without Harm define net zero and residual emissions?

Health Care Without Harm defines a **net zero goal** as a trajectory goal that requires an entity to set distinct emissions reduction targets in line with limiting warming to 1.5°C before considering the use of offsets. The goal must include emission reductions across all scopes and a separate approach to manage the remaining percentage of residual emissions to promote equity and community resilience. Given this is a trajectory goal, there will need to be:

- Interim targets, in line with global efforts to limit warming to 1.5C, including 50% greenhouse gas reduction by 2030 for high emitting countries, as highlighted in the Annex.
- Inclusion of additional emissions across all scopes as measuring tools and data become available.
- Recognition that the management of residual emissions may need to include solutions from future innovation and research.

Residual emissions are emissions that are generally recognized by the sector as particularly difficult or expensive to remove despite targeted interventions, investment and focus. Residual emissions are expected to decrease over time as other sectors innovate and decarbonize and the health care sector uses its purchasing power to move markets and promote innovation.

5. Who can join Race to Zero?

The Race to Zero is open to all health care institutions, including hospitals, health care systems, and health care facilities that are not national health ministries party to the UNFCCC. Individual hospitals and health systems operating under a health ministry or quasi-governmental institutions such as national health services can join Race to Zero.

6. Who cannot join?

Health ministries cannot join the Race to Zero directly, but they can join the Health Care Climate Challenge. Health care suppliers and manufacturers cannot join, as the Health Care Climate Challenge focuses on hospitals, health care systems and health care organizations only.

7. How do I join?

As the Race to Zero health care partner, Health Care Without Harm invites health care institutions to join the Race to Zero through our Health Care Climate Challenge. To join the Race institutions need to submit a letter stating a commitment to reaching net zero emissions by 2050, setting interim targets by 2030, and reporting annually on progress towards these goals. We invite you to use and customize the letter of intent template available in the Race to Zero [sign-up form](#).

By joining Race to Zero, health care institutions receive a membership in the [Health Care Climate Challenge](#) and [Global Green and Healthy Hospitals](#) (if your institution is not already a member). These networks provide access to a suite of tools and resources to assist health care institutions in reducing their carbon footprint, implementing successful sustainability projects and programs, and achieving the ambition of Race to Zero.

8. What are the required commitments for Race to Zero?

All Race to Zero must commit to doing the following:

Pledge

- Pledge at the head-of-organization level to reach net zero greenhouse gases (GHGs) as soon as possible, and by 2050 at the latest, in line with the scientific consensus on the global effort needed to limit warming to 1.5°C with no or limited overshoot.
- Set an interim target to achieve in the next decade, which reflects maximum effort toward or beyond a fair share of the 50% global reduction in CO₂ by 2030. Organizations from countries with high levels of emissions are expected to commit to reducing quantifiable emissions by at least 50% by 2030. A list of countries considered to have high levels of emissions is included in the Annex of this document.

Plan

- Within 12 months of joining, publicly disclose a plan which outlines how all other Race to Zero criteria will be met, including what actions will be taken within the next 12 months, within two to three years, and by 2030.
- In the transition to net zero, prioritize reducing emissions, limiting any residual emissions to those that are not feasible to eliminate. Any neutralization of residual emissions must transition to permanent removals by the time net zero status is achieved.

Proceed

Take immediate action through all available pathways toward achieving net zero, consistent with delivering your interim targets. Where relevant, contribute to sectoral breakthroughs.

Publish

Report publicly progress against both interim and longer-term targets, as well as the actions being taken, at least annually through the Health Care Without Harm Climate Challenge.

Persuade

Within 12 months of joining, align external policy and engagement, including membership in associations, to the goal of halving emissions by 2030 and reaching global (net) zero by 2050.

You may find a more detailed overview of the requirements for Race to Zero on our [website](#).

9. Can we include offsets?

Offsets can be included for emissions that are particularly hard to reduce but should be systematically minimized. Offsets can only be explored after developing a pathway to zero and only considered for residual emissions that cannot be technically or economically mitigated.

Institutions joining the Race to Zero Challenge are asked to describe any offsets they are using to demonstrate how their reduction pathways can meet the 50% measurable reductions by 2030, and how they plan to continuously minimize residual emissions over time. Health Care Without Harm is developing further guidance about the management of residual emissions and the use of offsets.

10. What are the reporting requirements?

All Race to Zero and Climate Challenge members need to annually report their progress through the Climate Challenge platform and through additional reporting forms (“addenda”) to actively participate in the initiative.

11. How will our data be used and/or shared?

All information included in the Climate Challenge data collection is confidential to Health Care Without Harm.

12. How will your participation in Race to Zero be recognized?

Your institution will be recognized as a Race to Zero member on the [GGHH website](#), Race to Zero’s “[Who’s in?](#)” section, and the United Nations Framework Convention on Climate Change (UNFCCC) [official site](#).

Health Care Without Harm also publishes [case studies](#) on the accomplishments of Race to Zero participants through its communication channels.

13. Are there measurement and tracking tools we can use?

Health Care Without Harm developed a global climate footprint measurement tool for health care institutions, the [Climate Impact Checkup](#) tool. The tool is available via the Hippocrates Data Center @ Global Green and Health Hospitals and to U.S. members through Practice Greenhealth. For members located in the US, Health care Without Harm also developed the [Health Care Emissions Impact Calculator](#).

Annex

Country categories utilized by Health Care Without Harm

(based on the [Global road map for health care decarbonization](#))

Steep decrease	Steady decrease curve	Early peak curve TBC	Late peak curve
Australia	Cyprus	Brazil	India
Austria	Czech Republic	Bulgaria	Indonesia
Belgium	Estonia	China	Georgia
Canada	Greece	Croatia	Kenya
Denmark	Korea	Hungary	Kyrgyzstan
Finland	Latvia	Mexico	Philippines
France	Lithuania	Poland	Ukraine
Germany	Malta	Romania	Uzbekistan
Ireland	Portugal	Russia	Vietnam
Italy	Slovak Republic	Turkey	Rest-of-World
Japan	Slovenia	Argentina	
Luxembourg	Spain	Chile	
Netherlands	Taiwan	Colombia	
Norway	Israel	Ecuador	
Sweden		Iran	
Switzerland		Kazakhstan	
United Kingdom		Malaysia	
USA		Mauritius	
Kuwait		North Macedonia	
New Zealand		Paraguay	
Singapore		Peru	
		South Africa	
		Thailand	
		Uruguay	