INOSR Scientific Research 12(1)76-81, 2025. ©INOSR PUBLICATIONS International Network Organization for Scientific Research https://doi.org/10.59298/INOSRSR/2025/12.1.768100 ISSN: 2705-1706 INOSRSR121.7681

Impact of Climate Change on Diabetes Risk and Management in Rural Africa

Omukisa Kireba K.

Faculty of Science and Technology Kampala International University Uganda

ABSTRACT

Climate change presents a significant challenge to public health, particularly in rural Africa, where the risk and management of chronic conditions like diabetes are increasingly vulnerable to climatic shifts. Rising temperatures, water scarcity, food insecurity, and extreme weather events exacerbate the prevalence and complications of diabetes in rural populations. These climate-related factors alter insulin sensitivity, limit physical activity, disrupt food and water access, and hinder healthcare delivery, further complicating diabetes management. This review explores the impacts of climate change on diabetes risk and care in rural Africa, identifying key challenges such as medication shortages, healthcare infrastructure limitations, and socio-economic barriers. We also propose climate-adaptive strategies for diabetes care, including strengthening healthcare systems, integrating telemedicine, enhancing food security, and improving water access. The review highlights the urgent need for integrated health policies and adaptive interventions to mitigate the effects of climate change on diabetes, emphasizing the importance of multi-sector collaboration and the role of international partnerships. Future research and investment are critical for developing resilient healthcare infrastructure and ensuring sustainable, equitable diabetes care in the face of a changing climate.

Keywords: climate change, diabetes, rural Africa, health adaptation, diabetes management,

INTRODUCTION

Climate change has emerged as a significant global challenge with profound implications for public health $\lceil 1 \rceil$. While much attention has been given to the direct consequences of climate change, such as extreme weather events and infectious disease outbreaks, its impact on non-communicable diseases (NCDs) like diabetes remains underexplored, particularly in low-resource settings [2]. Diabetes mellitus, a chronic metabolic disorder characterized by impaired glucose regulation, is increasingly prevalent in Africa, affecting both urban and rural populations. In rural Africa, where healthcare infrastructure is often limited, climate-induced changes in food security, water availability, and healthcare access may exacerbate the burden of diabetes $\lceil 3 \rceil$. Understanding the interplay between climate change and diabetes risk and management is crucial for developing adaptive strategies that enhance resilience and improve health outcomes in these vulnerable communities.

Diabetes is a growing public health concern in Africa, with an estimated 24 million people living with the condition as of 2021, a number projected to increase significantly by 2045 [4]. The prevalence of diabetes in rural Africa is rising due to a combination of genetic susceptibility, dietary shifts, reduced physical activity, and limited access to medical care. Climate change is further compounding these risk factors by affecting food production, leading to nutritional deficiencies and altered dietary patterns [5]. Increased temperatures and extreme weather events can also influence physical activity levels, exacerbate dehydration, and impact the efficacy of diabetes medications. Additionally, climate change contributes to the displacement of populations, leading to disruptions in healthcare access and continuity of care for individuals with chronic conditions [6]. Rural

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

communities, already facing significant healthcare disparities, are disproportionately affected. As climate patterns continue to shift, understanding their impact on diabetes risk factors and management strategies becomes imperative for effective public health interventions.

Despite the increasing prevalence of diabetes in Africa, research on the relationship between climate change and diabetes remains scarce, particularly in rural areas where vulnerabilities are highest [7]. Climate-induced changes in agriculture, water supply, and healthcare infrastructure pose significant challenges for managing diabetes. Rising temperatures may exacerbate dehydration risks, particularly among people with diabetes, who are more susceptible to heat stress. Moreover, food insecurity due to climate variability can lead to poor dietary choices, increasing the risk of diabetes-related complications $\lceil 8 \rceil$. In addition, the impact of extreme weather events, such as droughts and floods, on healthcare accessibility further complicates diabetes management. Rural communities often lack adequate healthcare facilities, making it difficult for individuals with diabetes to access necessary medications and routine monitoring. The lack of empirical data on how climate change affects diabetes risk and management in rural Africa limits the development of targeted policies and interventions [9]. Addressing this gap is critical to ensuring that diabetes care remains accessible and effective in the face of climate challenges. This study aims to explore the impact of climate change on diabetes risk and management in rural Africa. It aims to assess the effects of climate change on diabetes risk factors, evaluate the impact of climate change-induced food insecurity on diabetes prevalence and complications, investigate the challenges posed by climate-related healthcare disruptions on diabetes management in rural Africa, and explore potential adaptive strategies and policy interventions to mitigate the impact of climate change on diabetes care in rural settings $\lceil 10 \rceil$. The study contributes to the growing body of knowledge on the intersection of climate change and noncommunicable diseases (NCDs), highlighting the urgent need for climate-resilient healthcare systems to effectively address the rising burden of diabetes. The findings will inform policy decisions and public health strategies, enabling governments and healthcare organizations to develop targeted interventions that enhance diabetes care in rural settings. The study also has implications for diabetes patients and healthcare providers, as understanding the specific challenges posed by climate change can

help develop tailored treatment plans that consider environmental factors. Community education programs can promote climate-adaptive behaviors, such as proper hydration and dietary adjustments, to improve diabetes management outcomes. Understanding the intersection of climate change and diabetes is crucial for developing effective interventions and ensuring that diabetes care remains accessible and resilient in the face of climate challenges.

Climate Change and Diabetes Risk in Rural Africa Climate change poses a significant threat to public health, particularly in rural areas of Africa. The increasing prevalence of diabetes and its related complications is a growing concern, with rising temperatures, food insecurity, disruptions to physical activity, and water scarcity all influencing the risk and management of diabetes, especially in rural populations [11]. Rising temperatures can interfere with glucose metabolism, leading to altered insulin sensitivity, which exacerbates the body's insulin resistance, leading to higher blood sugar levels. Dehydration increases, complicating blood sugar regulation and increasing the risk of heat-induced complications in diabetic patients. Additionally, malnutrition, particularly micronutrient deficiencies, plays a bidirectional role in diabetes, contributing to the development of Type 2 diabetes by promoting obesity and worsening insulin resistance in diabetic patients $\lceil 12 \rceil$. Physical activity is a key component of diabetes management, but rising temperatures limit opportunities for outdoor exercise in rural areas. Climate change can also trigger migration and displacement, leading people to adopt new lifestyle patterns that are less conducive to physical activity and diabetes management. Increased sedentary behavior due to changing work and agricultural practices, such as informal trade or subsistence work, can further exacerbate the risk of developing or worsening diabetes. Water scarcity is another pressing challenge in rural Africa, as climate change exacerbates droughts and reduces access to safe water sources. Dehydration caused by insufficient water intake makes it difficult for individuals with diabetes to properly manage their blood glucose levels. Limited access to clean drinking water increases the risk of infections that can further complicate diabetes management [13]. Addressing the climate-diabetes nexus requires integrated, multidimensional strategies that focus on climate adaptation and strengthen diabetes care and prevention systems in rural communities. Providing access to nutritious foods, clean water, physical activity spaces, and

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

healthcare infrastructure will be key to mitigating the impacts of climate change on diabetes risk and improving the quality of life for vulnerable populations.

Climate Change and Diabetes Management Challenges

Climate change poses significant health-related challenges, particularly in rural Africa, where the management of chronic conditions like diabetes and healthcare infrastructure are at risk. Climate-induced disruptions such as extreme weather events, rising temperatures, and shifting disease patterns directly and indirectly affect the availability, accessibility, and quality of diabetes care [14]. Healthcare facilities in vulnerable regions often depend on fragile infrastructure, which is poorly equipped to cope with the impacts of climate change. Inadequate storage for temperature-sensitive medications like insulin can render treatment ineffective, worsening diabetes outcomes. Transportation challenges in reaching diabetes care centers during extreme weather events can delay access to necessary care, leading to delayed diagnosis, poor blood sugar control, and worsening complications such as diabetic neuropathy, retinal disease, and cardiovascular disease. Climate change also impacts insulin production and distribution, affecting local distribution and global supply. Disasters such as flooding and drought can delay the production and transportation of critical diabetes medications, leading to stock shortages in local pharmacies and healthcare centers [15]. Even in nondisaster conditions, rising temperatures and unpredictable weather patterns can impact both the storage and transport of insulin, which requires specific temperature-controlled environments to maintain its efficacy. Economic instability and inflation can lead to increased prices of insulin and other diabetes medications, making them unaffordable for many diabetic patients, especially in rural areas where incomes are lower and the cost of living has increased. As a result, individuals with diabetes may be forced to make difficult decisions, such as rationing insulin or delaying medication doses to reduce expenses. The psychosocial impact of climate change is another critical factor that influences diabetes management. Climate-induced stressors such as food insecurity, displacement, and loss of livelihood can lead to mental health challenges, including anxiety, depression, and post-traumatic stress disorder (PTSD) [16]. These mental health conditions can significantly affect diabetes management adherence, as individuals may experience difficulties in maintaining a healthy

lifestyle, following their medication regimen, or managing their blood sugar levels.

Adaptation and Mitigation Strategies for Climate-Resilient Diabetes Care

Climate-resilient diabetes care is crucial in rural Africa, where climate change is affecting agricultural production. To build a climate-resilient healthcare environment, several strategies can be implemented $\lceil 17 \rceil$. These include strengthening healthcare systems with sustainable energy sources, expanding telemedicine services, enhancing food security and nutrition with climate-resilient crops, and implementing community-based nutrition programs. National governments must integrate climate change mitigation strategies into their diabetes action plans, prioritizing climate-resilient health systems and fostering cross-sector collaboration. Investments in climate-adaptive healthcare infrastructure and emergency preparedness are essential, including emergency insulin supplies, resilient medication storage, and diabetes care protocols during extreme events. Healthcare systems should have rapid response capabilities, such as mobile clinics and temporary health shelters. Community-led initiatives for improving water access and sanitation are also essential. Local initiatives like rainwater harvesting systems, community wells, and water filtration projects can ensure clean water availability even during climate extremes [18]. These strategies will not only improve diabetes care but also mitigate the adverse effects of climate change, ensuring healthier and more sustainable futures for people living with diabetes in Africa.

Future Directions and Research Gaps

Climate change is causing a growing concern in Africa, particularly in rural areas. Longitudinal studies are needed to understand the long-term effects of climate change on diabetes prevalence, the specific needs of rural diabetic populations, and the collaborative role of international partnerships in tackling these challenges [19]. These studies should focus on the linkages between climate variables and the health of rural populations, including how weather events extreme influence diabetes management, treatment adherence, and hospital admissions. Establishing baseline data on current diabetes prevalence and risk factors in different regions of Africa is crucial for future comparative research. Targeted interventions for rural diabetic populations should be developed, considering the unique vulnerabilities of these populations, considering geography, socioeconomic factors, and access to healthcare. These interventions should

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

include accessible care, climate-adapted healthcare services, and affordable medications, incorporating strategies that empower local communities to manage diabetes in their changing environment. International partnerships, such as the World Health Organization (WHO), the United Nations (UN), and the Global Fund, can provide funding for research and interventions aimed at improving healthcare infrastructure, access to medications, and sustainable agriculture practices in the face of climate change [20]. Knowledge sharing and capacity building

Climate change is posing significant risks to diabetes risk and management in rural Africa. Rising temperatures, unpredictable access to food and water, and intensifying weather extremes put vulnerable populations, particularly those with chronic conditions like diabetes, at risk. Factors such as heat stress, water scarcity, food insecurity, and shifting physical activity patterns contribute to diabetes prevalence. These factors not only influence the onset of diabetes but also complicate its management, creating barriers to medication access, healthy diets, and physical exercise. Rural populations often face limited access to healthcare due to infrastructure vulnerabilities and transportation barriers. Essential medications, such as insulin, can be disrupted by climate-related disasters or economic instability.

- Campbell-Lendrum, D., Corvalán, C., Neira, M.: Global climate change: implications for international public health policy. Bull World Health Organ. 85, 235–237 (2007). https://doi.org/10.2471/BLT.06.03950
- Hategeka, C., Adu, P., Desloge, A., Marten, R., Shao, R., Tian, M., Wei, T., Kruk, M.E.: Implementation research on noncommunicable disease prevention and control interventions in low- and middle-income countries: A systematic review. PLoS Med. 19, e1004055 (2022). https://doi.org/10.1371/journal.pmed.1 004055
- Ezema G. O, Omeh N. Y, Egba S. I, Ejiofor C Agbo E, Adachukwu A. I., Obeagu E. I (2023) Evaluation of Biochemical Parameters of Patients with Type 2 Diabetes Mellitus Based on Age and Gender in Umuahia. Asian Journal of

should also be prioritized to ensure that local healthcare providers, policymakers, and community leaders are equipped to address the health impacts of climate change on diabetes. Comprehensive, integrated strategies are needed to address the growing challenge of climate change and diabetes in Africa. Longitudinal studies, targeted interventions, and international partnerships will be key to ensuring sustainable, equitable, and climate-resilient diabetes care.

CONCLUSION

These challenges highlight the urgent need for climate-smart approaches to diabetes care and a collaborative global response. To address these challenges, climate-adaptive health policies and interventions must be developed, incorporating strategies to ensure that diabetes care systems are prepared for climate impacts and resilient in the face of future climate shocks. This includes investing in infrastructure that can withstand climate extremes, such as climate-resilient healthcare facilities, telemedicine platforms, and mobile health services. Integrated efforts from multiple sectors and stakeholders, including governments, researchers, and healthcare providers, are needed to address the challenges posed by climate change on diabetes care.

REFERENCES

Dental and Health Sciences 3(2):32-36 (2023).

- 4. Hossain, Md.J., Al-Mamun, Md., Islam, Md.R.: Diabetes mellitus, the fastest growing global public health concern: Early detection should be focused. Health Sci Rep. 7, e2004 (2024). https://doi.org/10.1002/hsr2.2004
- Mbanya, J.-C., Ramiaya, K.: Diabetes Mellitus. In: Jamison, D.T., Feachem, R.G., Makgoba, M.W., Bos, E.R., Baingana, F.K., Hofman, K.J., and Rogo, K.O. (eds.) Disease and Mortality in Sub-Saharan Africa. The International Bank for Reconstruction and Development / The World Bank, Washington (DC) (2006)
- Mohamed G. S, Abdisamad S. Y., Ismail G. I., Yusuf G. S. Prevalence of Diabetes Mellitus Among Tuberculosis Patients at Selected TB Centers in Mogadishu-Somalia. *American Journal of Internal*

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Medicine, 11, (5), 71-76 (2023). doi: 10.11648/j.ajim.20231105.11.

- Ejemot-Nwadiaro R. I, Ofili D. F. C, Ogbodo S. C, Okoroiwu H. U, Ugochinyere Vivian Ukah. Risk of Cardiovascular Disease Comorbidity in People Living with Diabetes in Africa. Kampala International University Western Campus, Ishaka, (2023). Available at SSRN 49011428.
- Ratter-Rieck, J.M., Roden, M., Herder, C.: Diabetes and climate change: current evidence and implications for people with diabetes, clinicians and policy stakeholders. Diabetologia. 66, 1003– 1015 (2023). https://doi.org/10.1007/s00125-023-05901-y
- Rother, H.-A.: Controlling and preventing climate-sensitive noncommunicable diseases in urban sub-Saharan Africa. Science of The Total Environment. 722, 137772 (2020). https://doi.org/10.1016/j.scitotenv.202 0.137772
- Alum, E. U., Ugwu, O. P. C., Obeagu, E. 10. I., Aja, P. M., Ugwu, C. N., Okon, M.B.Nutritional Care in Diabetes А Comprehensive Mellitus: Guide.International Journal of Innovative and Applied Research. 2023; 11(12):16-25 Article DOI: (2023).10.58538/IJIAR/2057 DOI URL: http://dx.doi.org/10.58538/IJIAR/205 <u>7</u>.
- Levi, R., Bleich, S.N., Seligman, H.K.: Food Insecurity and Diabetes: Overview of Intersections and Potential Dual Solutions. Diabetes Care. 46, 1599–1608 (2023). https://doi.org/10.2337/dci23-0002
- Alum EU, Ugwu OPC, Obeagu EI, Uti DE, Egba SI, Alum BN. Managing the Dual Burden: Addressing Mental Health in Diabetes Care. Elite Journal of Medical Sciences, 2(6):1-9 (2024).
- Aja P. M, Igwenyi I. O, Ugwu O. P. C, Orji O. U, Alum E. U. Evaluation of antidiabetic effect and liver function indices of ethanol extracts of *Moringa oleifera* and *Cajanuscajan* leaves in alloxan induced diabetic albino rats. *Global Veterinaria* 14(3) 439-447 (2015).

- Ugwu, O.P.C., Kungu, E., Inyangat, R., 14. Obeagu, E. I., Alum, E. U., Okon, M. B., Subbarayan, S. and Sankarapandiyan, V. Exploring Indigenous Medicinal Plants for Managing Diabetes Mellitus in Ethnobotanical Uganda: Insights, Pharmacotherapeutic Strategies, and National Development Alignment. Experimental Sciences. INOSR 12(2):214-224(2023). https://doi.org/10.59298/INOSRES/2
 - <u>023/2.17.1000</u>.
- Ugwu, O. P.C., Alum, E. U., Obeagu, E. I, Okon, M. B., Aja, P. M., Samson, A. O., Amusa, M. O. and Adepoju, A. O. Effect of Ethanol Leaf extract of *Chromolaena* odorata on hepatic markers in streptozotocin-induced diabetic wistar albino rats. *IAA Journal of Applied Sciences*,9(1):46-56 (2023). <u>https://doi.org/10.5281/zenodo.</u> 7811625
- White, B.P., Breakey, S., Brown, M.J., Smith, J.R., Tarbet, A., Nicholas, P.K., Ros, A.M.V.: Mental Health Impacts of Climate Change Among Vulnerable Populations Globally: An Integrative Review. Ann Glob Health. 89, 66 (2023). https://doi.org/10.5334/aogh.4105
- Mosadeghrad, A.M., Isfahani, P., Eslambolchi, L., Zahmatkesh, M., Afshari, M.: Strategies to strengthen a climate-resilient health system: a scoping review. Globalization and Health. 19, 62 (2023).

https://doi.org/10.1186/s12992-023-00965-2

- Ebele J. I., Emeka E. N., Ignatius C. M., Emeka G. A., Nochie S. O. Periodontal disease and type 2 diabetes: effects on salivary enzyme activities. International Journal of Diabetes in Developing Countries, 31, 9-13 (2011).
- Hill-Briggs, F., Adler, N.E., Berkowitz, S.A., Chin, M.H., Gary-Webb, T.L., Navas-Acien, A., Thornton, P.L., Haire-Joshu, D.: Social Determinants of Health and Diabetes: A Scientific Review. Diabetes Care. 44, 258–279 (2021). https://doi.org/10.2337/dci20-0053
- 20. Goniewicz, K., Burkle, F.M., Khorram-Manesh, A.: Transforming global public health: Climate collaboration, political

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

challenges, and systemic change. Journal of Infection and Public Health. 18, 102615(2025).

Omukisa https://doi.org/10.1016/j.jiph.2024.102 615

CITE AS: Omukisa Kireba K. (2025). Impact of Climate Change on Diabetes Risk and Management in Rural Africa. INOSR Scientific Research 12(1)76-81. https://doi.org/10.59298/INOSRSR/2025/12.1.768100

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.