

Five years after the 2021 heat dome: Building evidence to motivate action

Sarah B. Henderson, PhD

Scientific Director, Environmental Health, BC Centre for Disease Control

National Collaborating Centre for Environmental Health Webinar

June 11, 2026



BC Centre for Disease Control

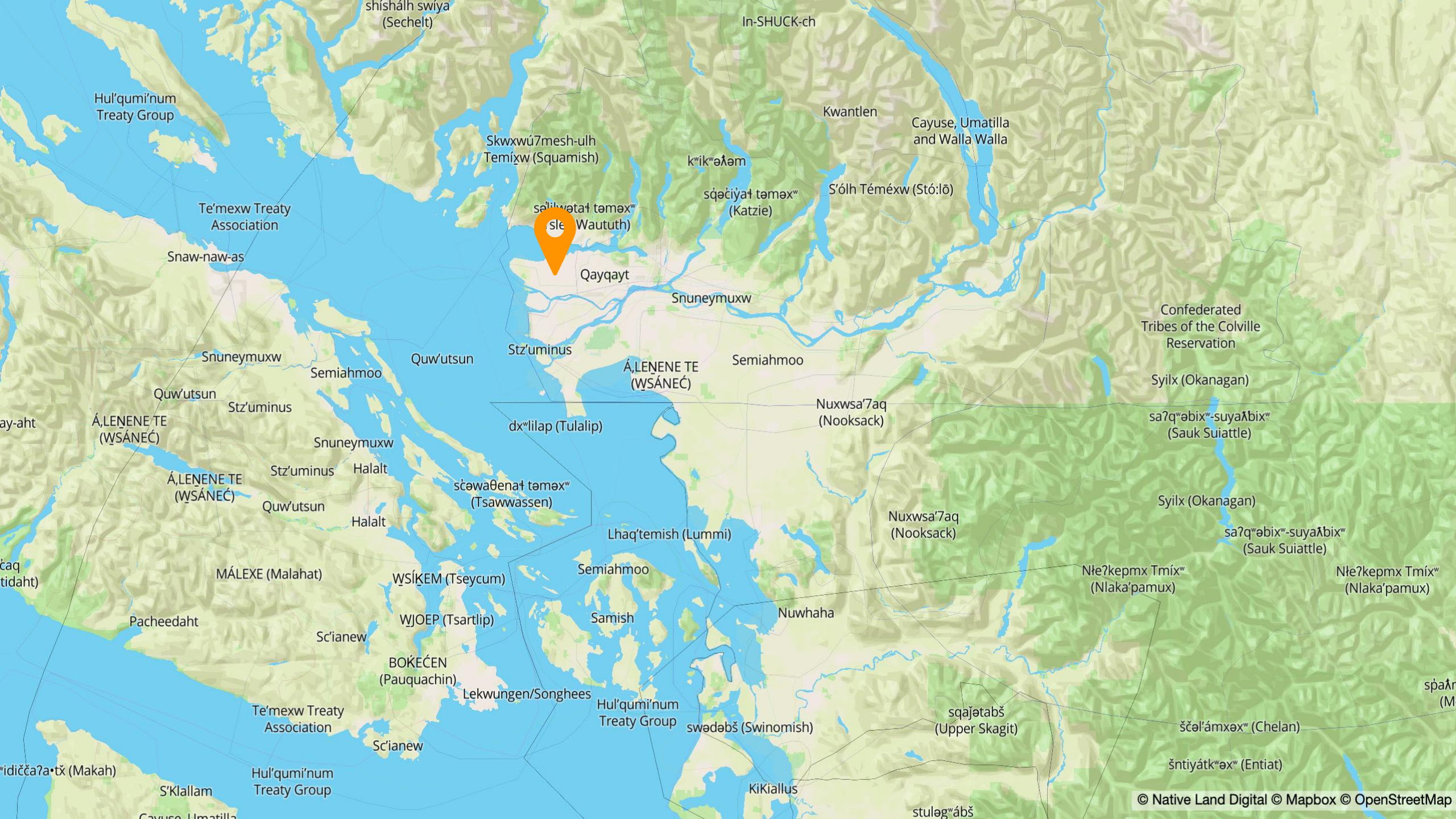


National Collaborating Centre
for Environmental Health

Centre de collaboration nationale
en santé environnementale



THE UNIVERSITY
OF BRITISH COLUMBIA



shisháh swiya (Sechelt)

In-SHUCK-ch

Hul'qumi'num Treaty Group

Skwxwú7mesh-ulh Temíxw (Squamish)

Kwantlen

Cayuse, Umatilla and Walla Walla

Te'mexw Treaty Association

səlilwətał təməx' (sle Waututh)

k'ík'əłəm

sqəciyət təməx' (Katzie)

S'ólh Téméxw (Stó:lō)

Snaw-naw-as

Qayqayt

Snuneymuxw

Snuneymuxw

Quw'utsun

Stz'uminus

Á,LENENE TE (WSÁNEĆ)

Semiamhoo

Confederated Tribes of the Colville Reservation

Syilx (Okanagan)

Quw'utsun

Stz'uminus

Nuxwsa'7aq (Nooksack)

sa7q'əbix'-suyałbix' (Sauk Suiattle)

ay-aht

Á,LENENE TE (WSÁNEĆ)

Snuneymuxw

dx'wílilap (Tulalip)

Nuxwsa'7aq (Nooksack)

Syilx (Okanagan)

Á,LENENE TE (WSÁNEĆ)

Stz'uminus

Halalt

sčəwaθenət təməx' (Tsawwassen)

Lhaq'temish (Lummi)

Nuxwsa'7aq (Nooksack)

sa7q'əbix'-suyałbix' (Sauk Suiattle)

čaq tidaht)

MÁLEXE (Malahat)

WSÍKEM (Tseycum)

Semiamhoo

Nuwaha

Nle7kepmx Tmíx' (Nlaka'pamux)

Nle7kepmx Tmíx' (Nlaka'pamux)

Pacheedaht

Sc'ianew

WJOEP (Tsartlip)

Samish

BOKEĆEN (Pauquachin)

Lekwungen/Songhees

Hul'qumi'num Treaty Group

swədəbš (Swinomish)

sqəjətabš (Upper Skagit)

ščəl'ámxəx' (Chelan)

idičča7a'tx (Makah)

S'Klallam

Hul'qumi'num Treaty Group

Sc'ianew

KiKiallus

stuləg'ábš

šntiyátk'əx' (Entiat)

spáAn (M)

Nuts a maht.

Kathleen McLean

Michael Lee

Angela Yao

Naman Paul

Eric Coker

Shirley Chen

Rachel Zhao

James Dickson

Emily Chinowsky

Michael Kuo

Max Xi

Cheryl Peters

David McVea

Tom Kosatsky

Liv Yoon

Ghazal Ebrahimi

Kori Jones

Corinne Hohl

Mariana Brussoni

Jeremie Boudreault

Glen Kenny

Nathalie Kirby

Martin Rotenberg

Sean Kidd

Gregory Richardson

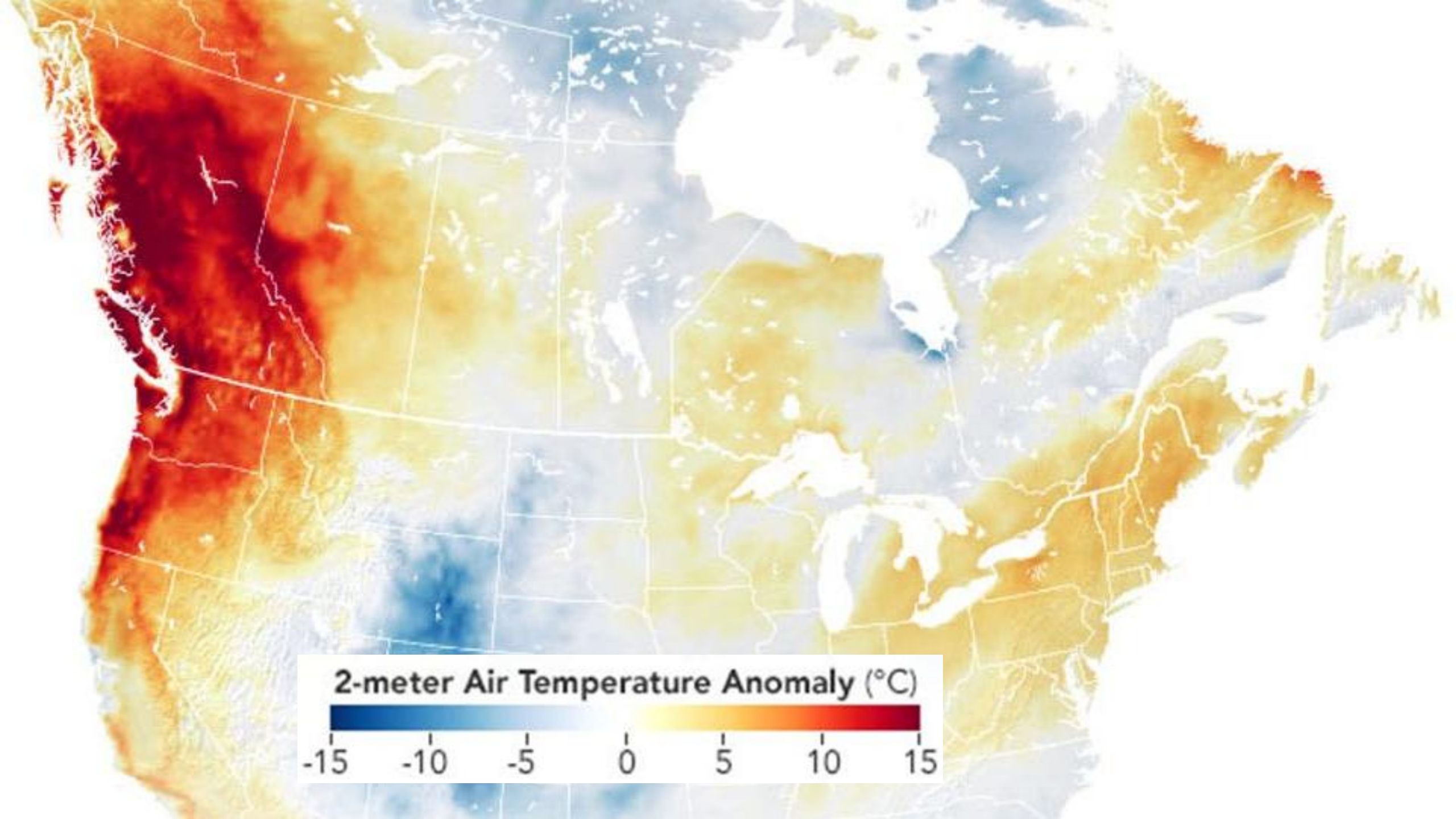
Rebecca Stranberg

BC HEAT Coordinating Committee



Health
Canada

Santé
Canada

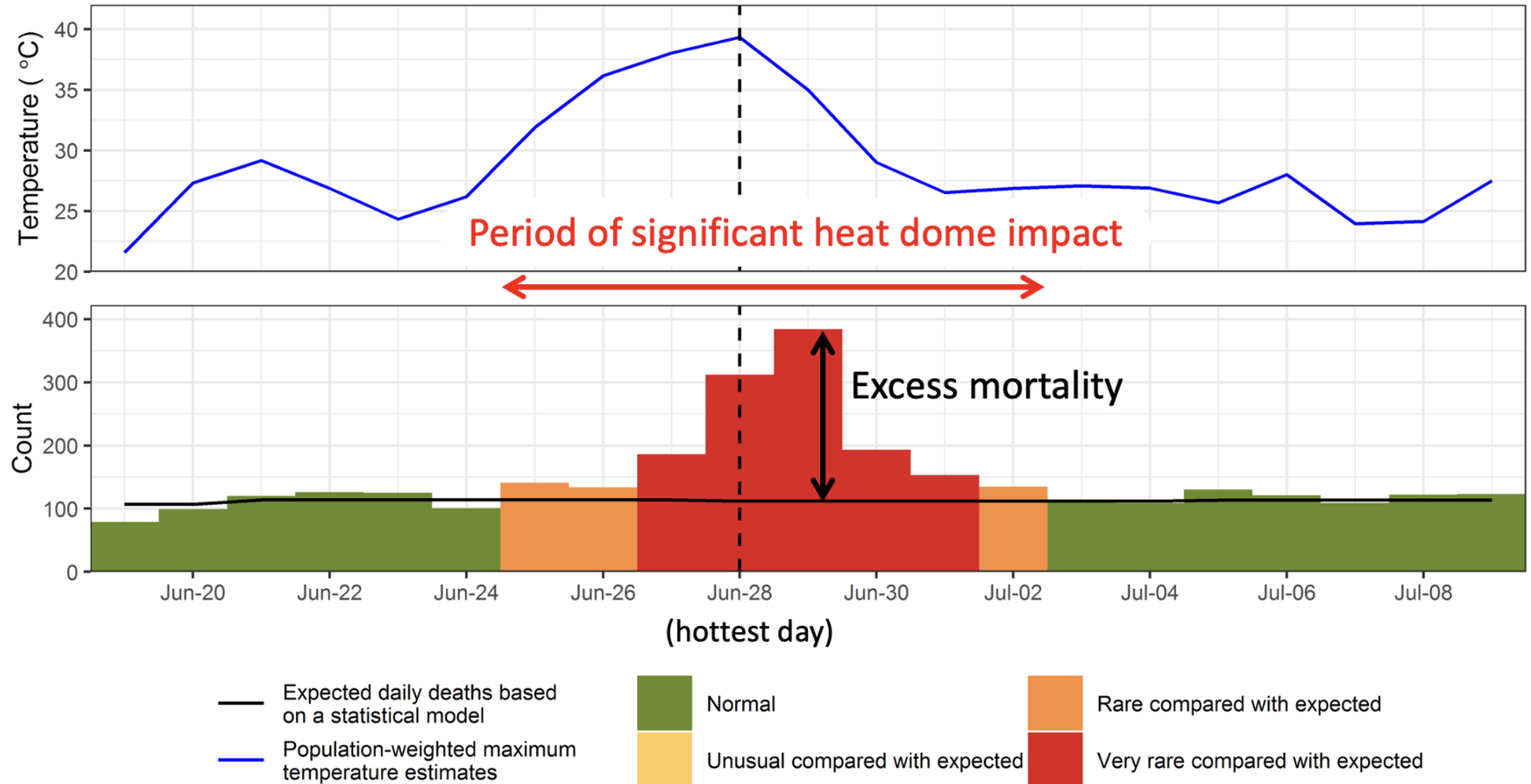


2-meter Air Temperature Anomaly (°C)

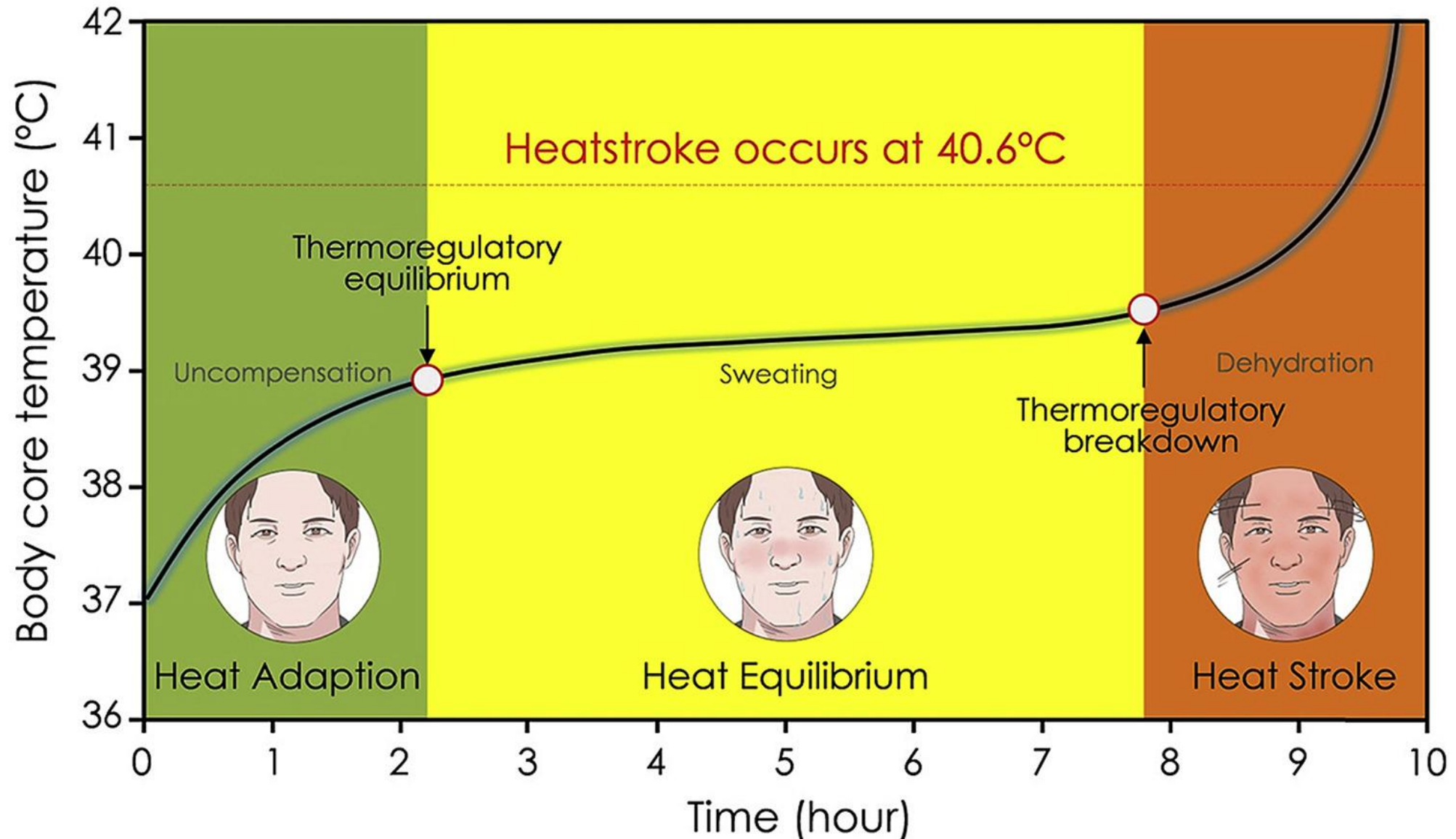




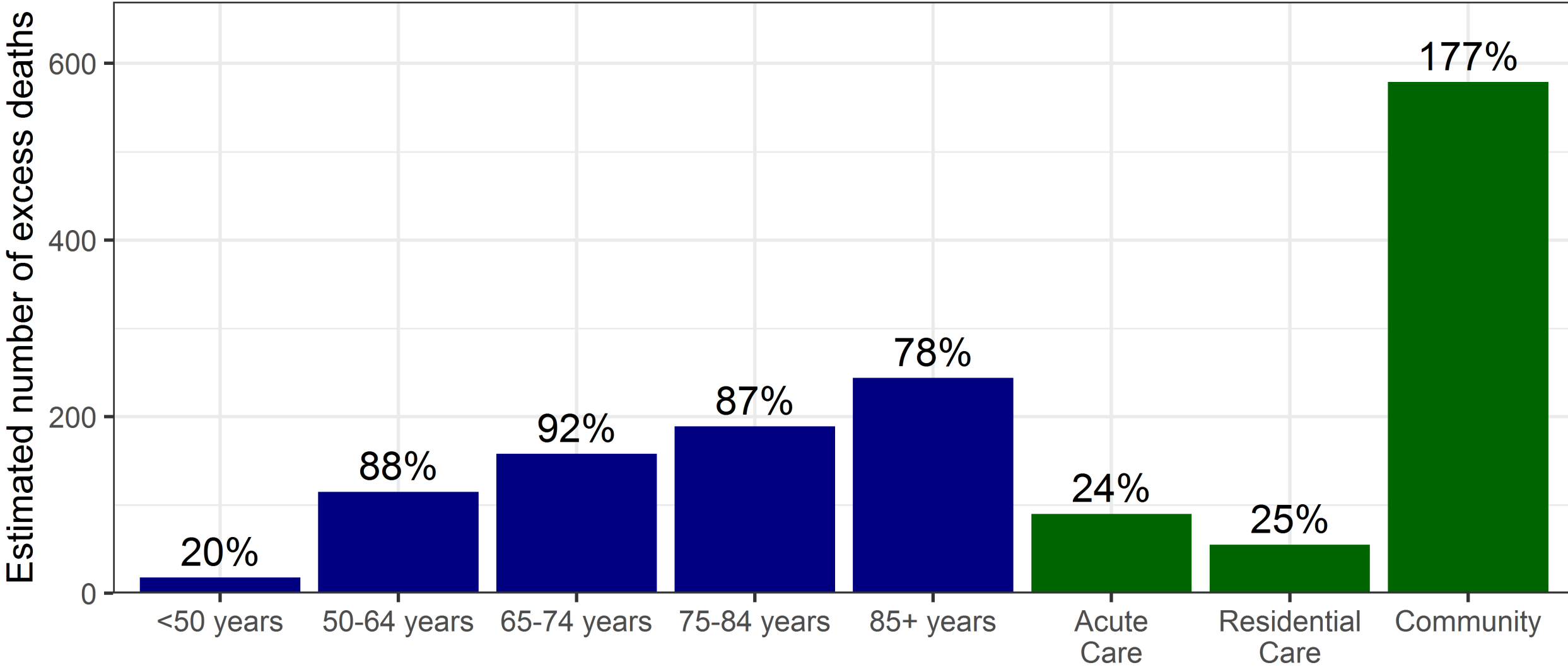
The 2021 heat dome was one of the **deadliest weather events** in Canadian history. 740 excess deaths, 619 heat-related deaths.



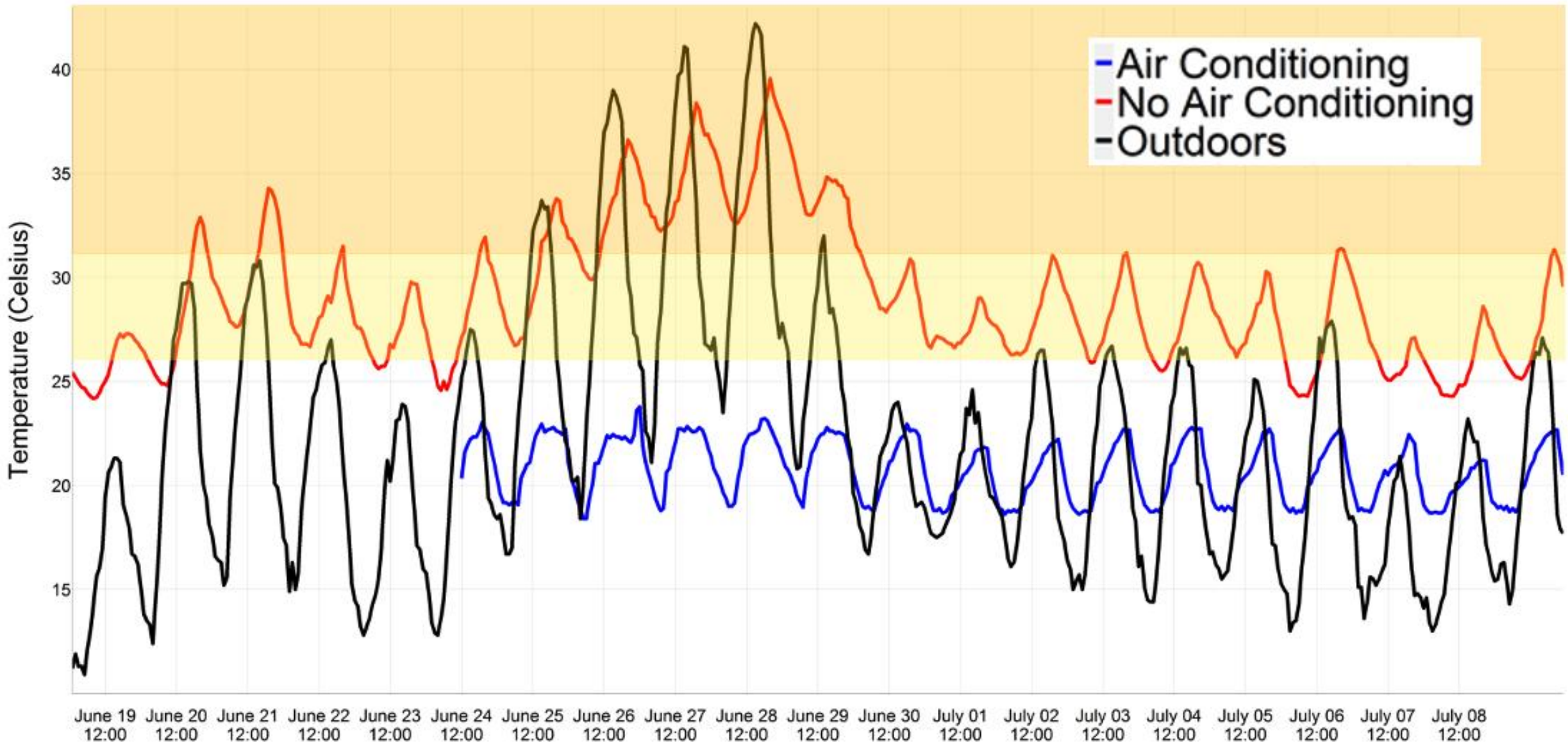
Heat-related deaths are **preventable** if we protect people from getting too hot. They occur when thermoregulation breaks down.



Most excess deaths occurred in the community, and 98% of the fatal heat-related injuries happened indoors, most in **private homes**.



Indoor overheating occurs when the indoor environment gains heat during the day and does not lose heat overnight.



10 studies published or submitted so far that were led by the BCCDC:

- 1) Community deaths in greater Vancouver (Henderson, 2022)
- 2) Case-only analysis of chronic diseases (Lee, 2023)
- 3) Indoor overheating in acute care (**Dickson**, 2023)
- 4) Case-only analysis of chronic diseases and poverty (McLean, 2024)
- 5) Medications and heat-related mortality risk (**Boudreault**, 2025)
- 6) Risk factors among people with schizophrenia (**Chen**, 2025)
- 7) Changes in ER patient characteristics (Paul, 2026)
- 8) Statistical methods for examining extreme event risk (Lee, 2026)
- 9) Schizophrenia health services pilot study (**Zhao**, under review)
- 10) Buildings and fatal heat-related injuries (**Chinowsky**, under review)

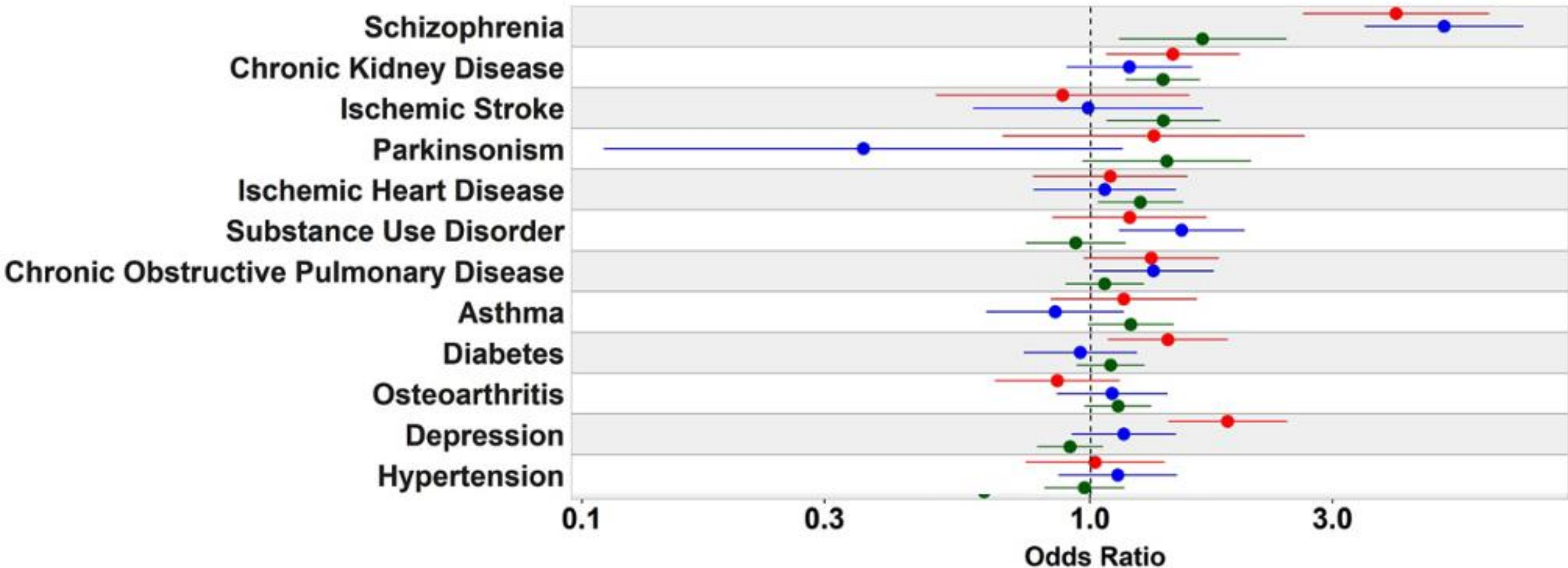
The BCCDC team has also contributed to many other studies.

Study #1: Higher risk of community deaths in areas with higher social and material deprivation, and lower surrounding greenness.

Variable (adjusted model)	Odds Ratio [95% CI]
Materially and socially privileged	0.92 [0.53, 1.59]
Average material and social deprivation	Reference
Materially privileged, socially deprived	1.53 [0.98, 2.40]
Materially deprived, socially privileged	1.89 [1.21, 2.95]
Materially and socially deprived	2.88 [1.85, 4.49]
Higher greenness within 100 m	0.78 [0.64, 0.91]
5% more tree canopy in 100 m	0.91 [0.84, 0.98]

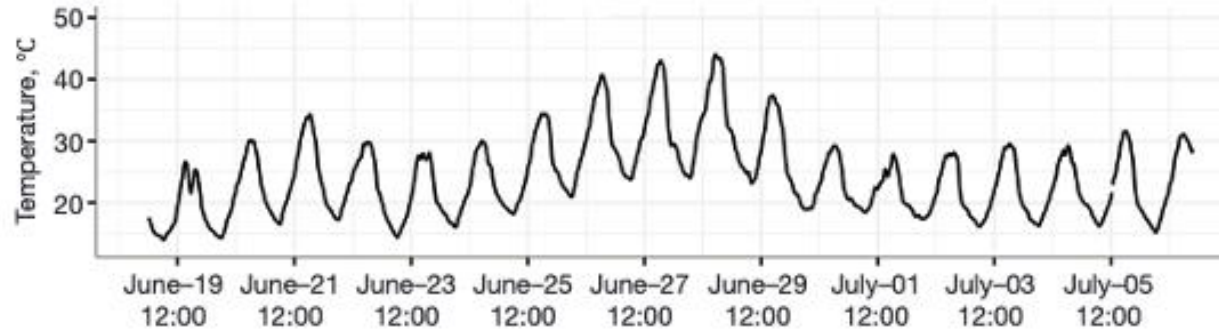
Study #2: When heat dome deaths compared with other summer deaths, schizophrenia was the biggest difference between groups.

● X30 ● R99 ● Non-Heat-Related

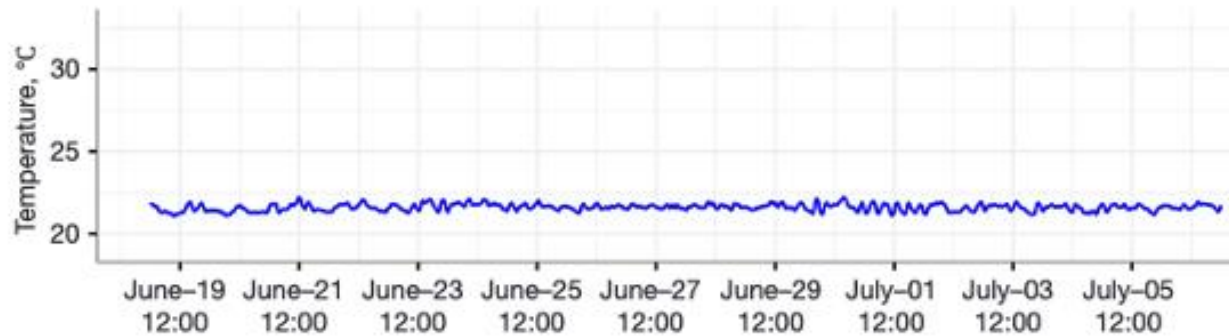


Study #3: Even acute care facilities with climate control can overheat on upper floors, putting susceptible patients at risk.

4th floor roof, outside



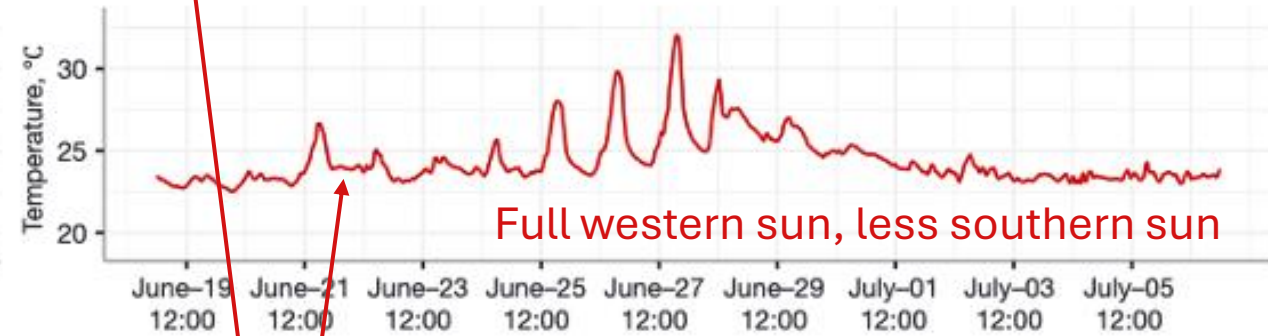
Away from elevator, basement



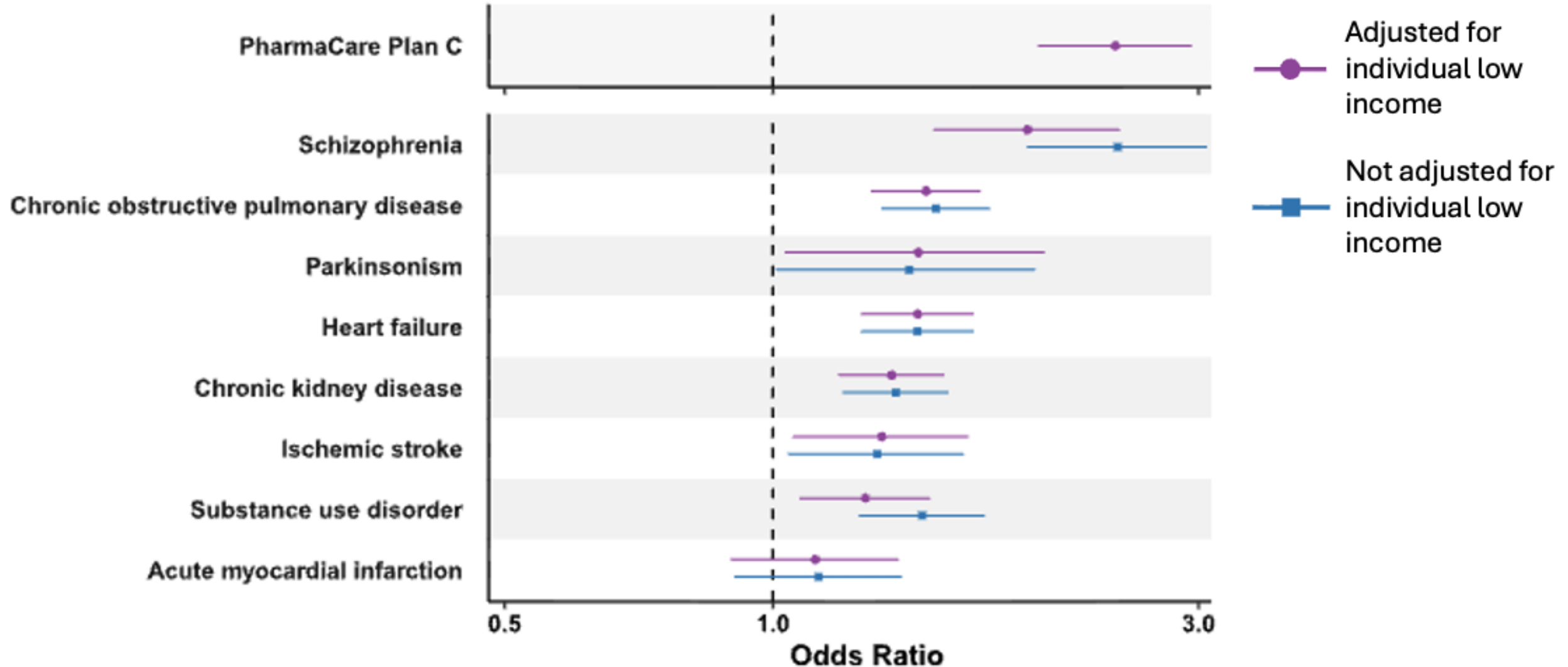
Patient room, fourth floor



Office, fourth floor



Study #4: Comparing those who died during the heat dome with similar survivors, poverty and schizophrenia were the biggest risks.

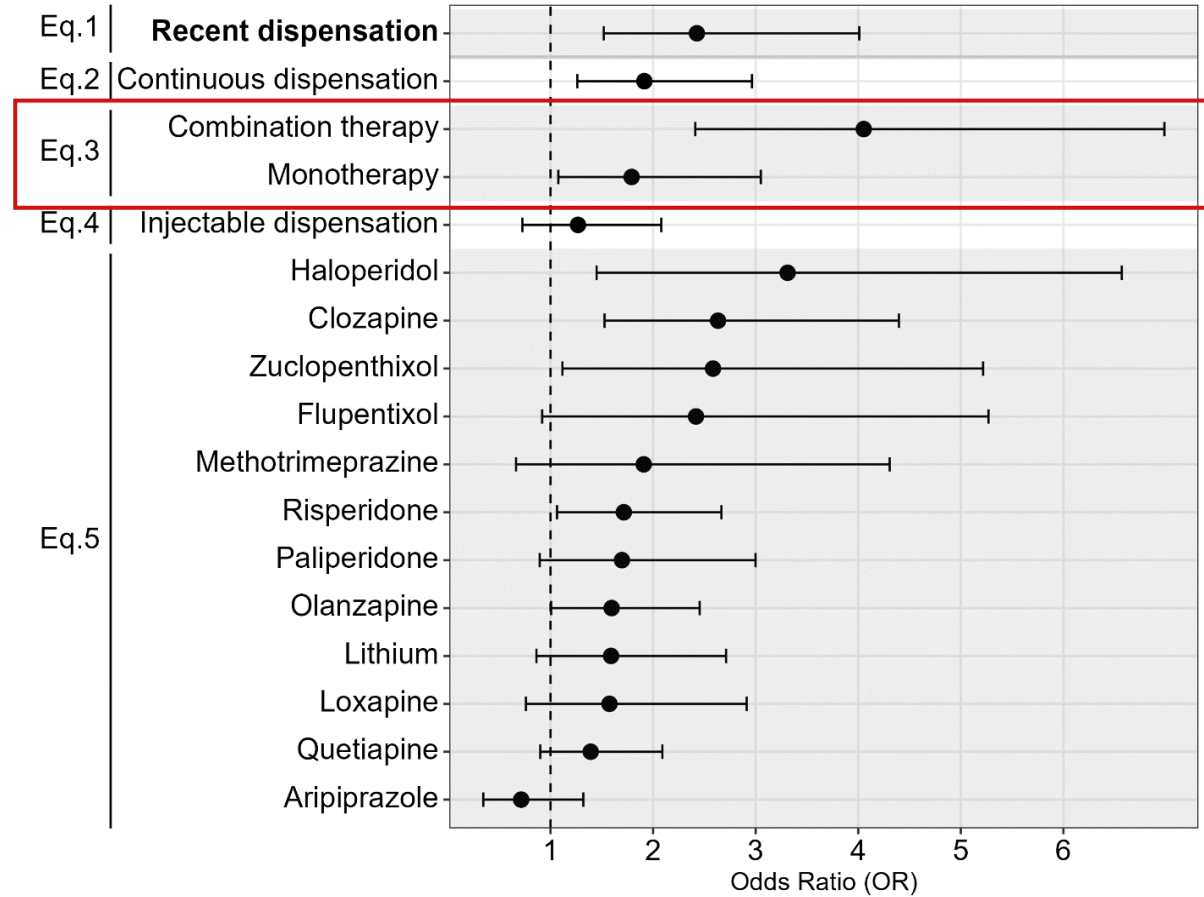
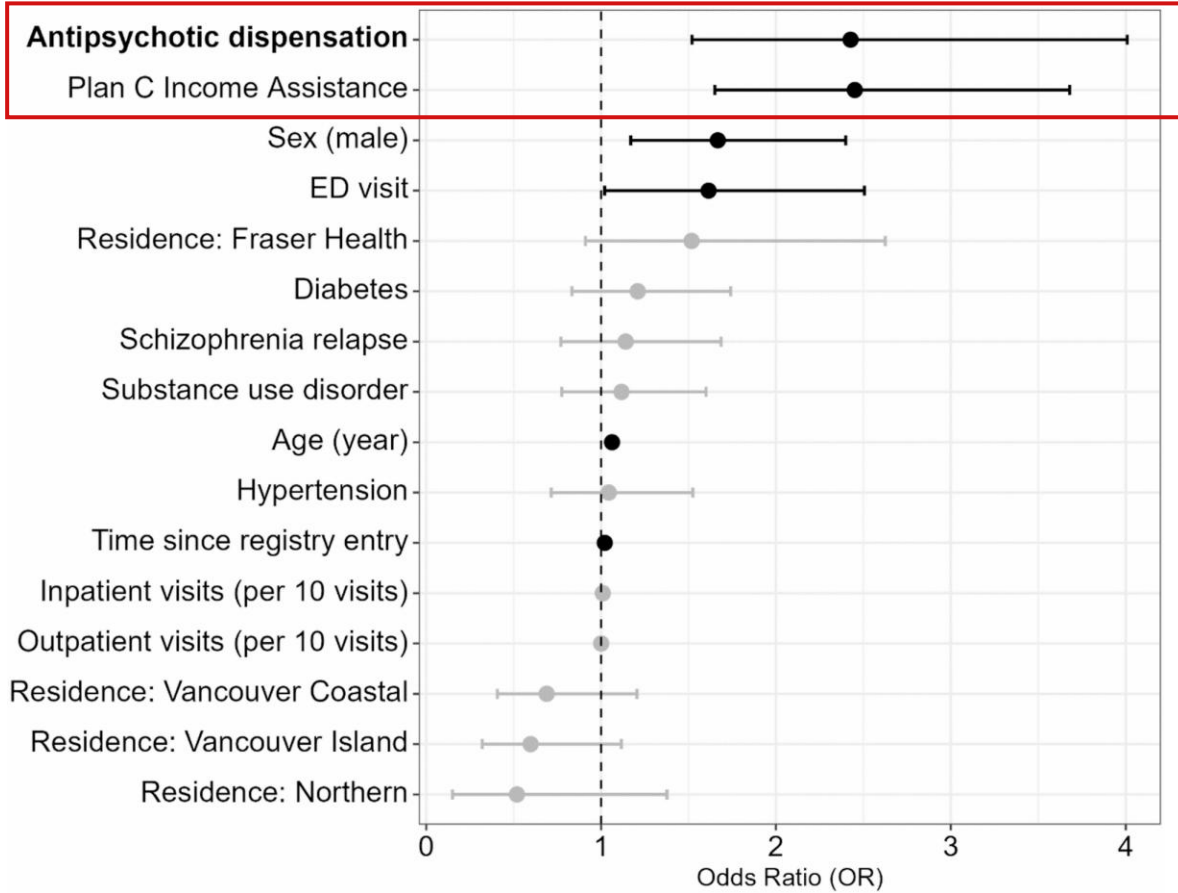


Study #5: Among community heat-related deaths, antiepileptic and anti-Parkinson drugs were associated with the highest risks.

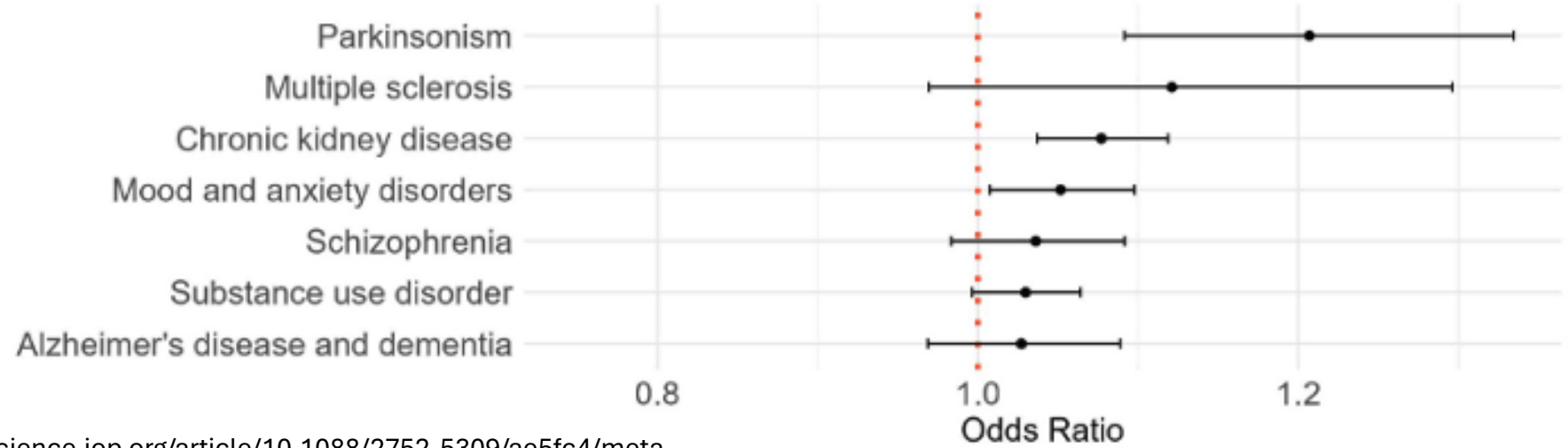
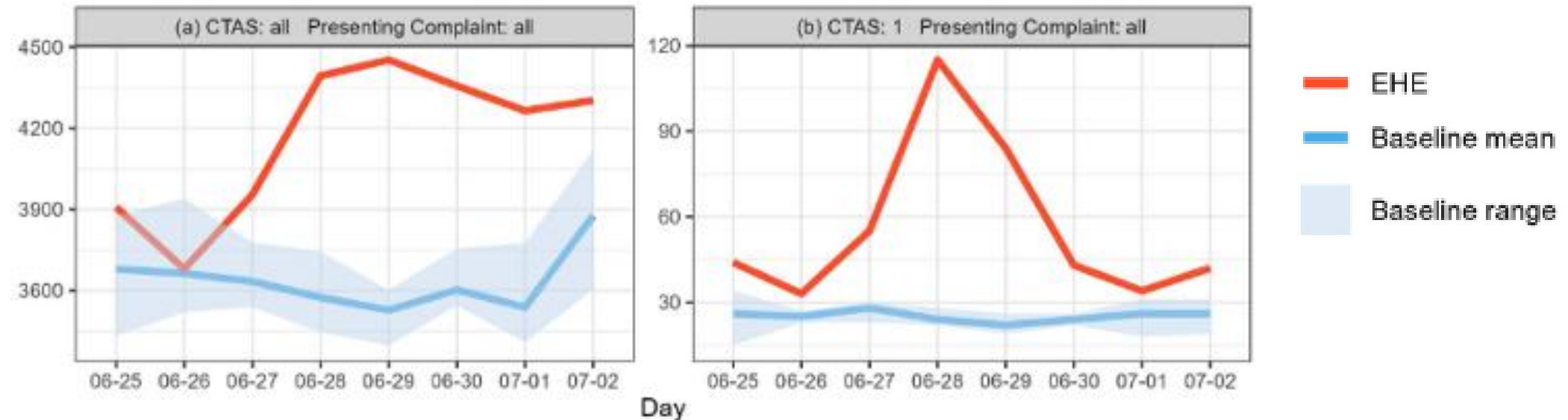
	Unad-justed (a)	Main analysis (b)	Adj. PCare (c)	Med. 60 days (d)	Med. 90 days (e)	Sex Male (f)	Sex Female (g)	Age ≤75 (h)	Age ≥76 (i)
Antiepileptics (N03)	2.45	2.16	1.87	2.55	2.43	2.36	2.27	2.59	0.96
Anti-parkinson drugs (N04)	2.42	2.36	2.37	2.14	2.03	1.75	3.46	3.27	0.87
Psycholeptics (N05)	2.05	1.43	1.34	1.27	1.19	1.52	1.53	2.01	0.93
Drugs for constipation (A06)	1.84	1.59	1.65	1.32	1.07	1.65	2.35	1.54	1.52
Antianemic preparations (B03)	1.72	1.56	1.46	1.30	1.44	1.37	1.71	1.85	1.35
Drugs for obstructive airway diseases (R03)	1.55	1.22	1.22	1.42	1.27	1.82	1.01	1.75	0.85
Drugs used in diabetes (A10)	1.40	1.42	1.42	1.40	1.46	1.97	1.13	1.74	1.07
Beta blocking agents (C07)	1.35	1.25	1.26	1.22	1.23	0.93	1.66	1.62	0.95
Analgesics (N02)	1.33	1.29	1.22	1.23	1.23	0.90	1.59	1.59	1.10
Diuretics (C03)	1.28	1.16	1.14	1.18	1.38	0.94	1.26	0.62	1.71
Drugs for treatment of bone diseases (M05)	1.20	1.40	1.48	2.05	1.94	6.19	1.24	1.60	1.54
Urologicals (G04)	0.89	0.88	0.90	0.96	1.00	0.53	2.98	0.69	1.11
Renin-angiotensin system agents (C09)	0.76	0.79	0.82	0.84	0.90	0.98	0.67	0.80	0.76
Calcium channel blockers (C08)	0.74	0.69	0.71	0.66	0.70	0.79	0.66	0.90	0.70
Ophthalmologicals (S01)	0.34	0.34	0.35	0.41	0.57	0.23	0.39	0.19	0.39

■ Risk (pval<0.05)
 ■ Risk (pval<0.10)
 ■ Protective (pval <0.05)
 ■ Protective (pval <0.10)
 ■ Non-sign. (pval>0.10)

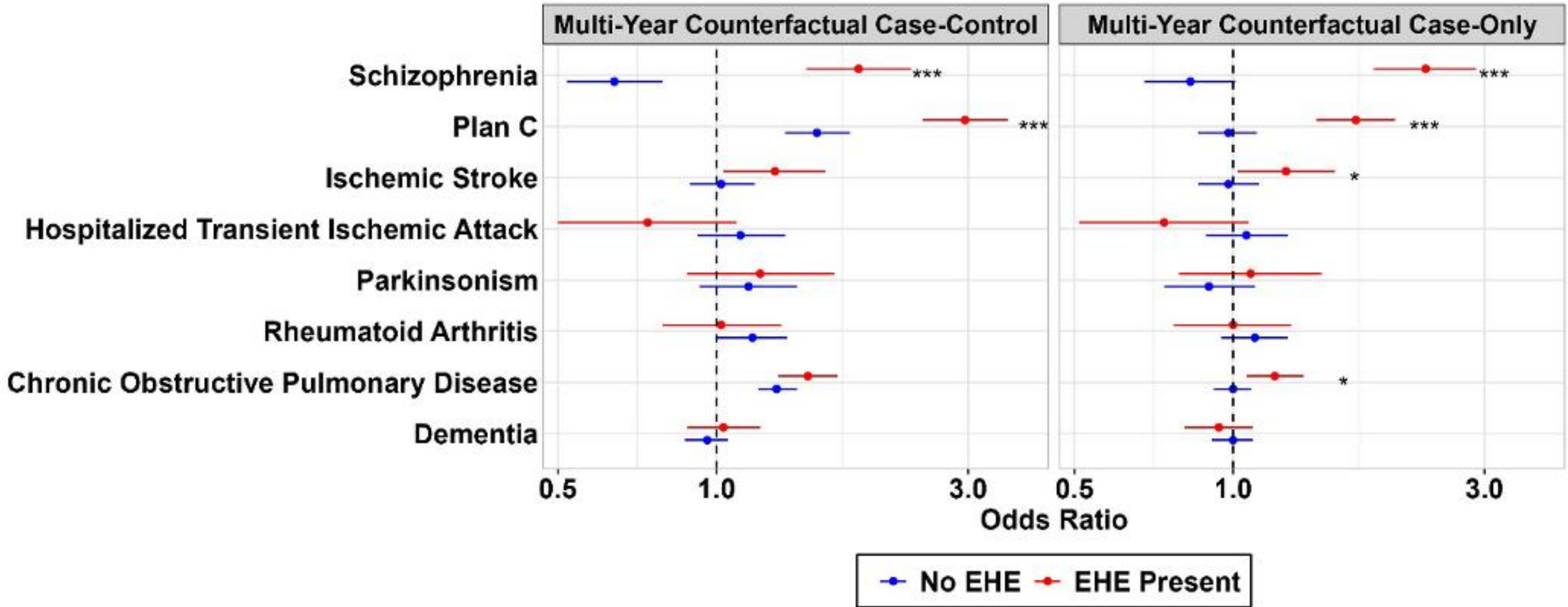
Study #6: Among people with schizophrenia, the biggest risk factors were poverty and antipsychotics, especially combination therapy.



Study #7: The volume and acuity of ED visits was increased, with a somewhat different chronic disease profile than heat-related deaths.

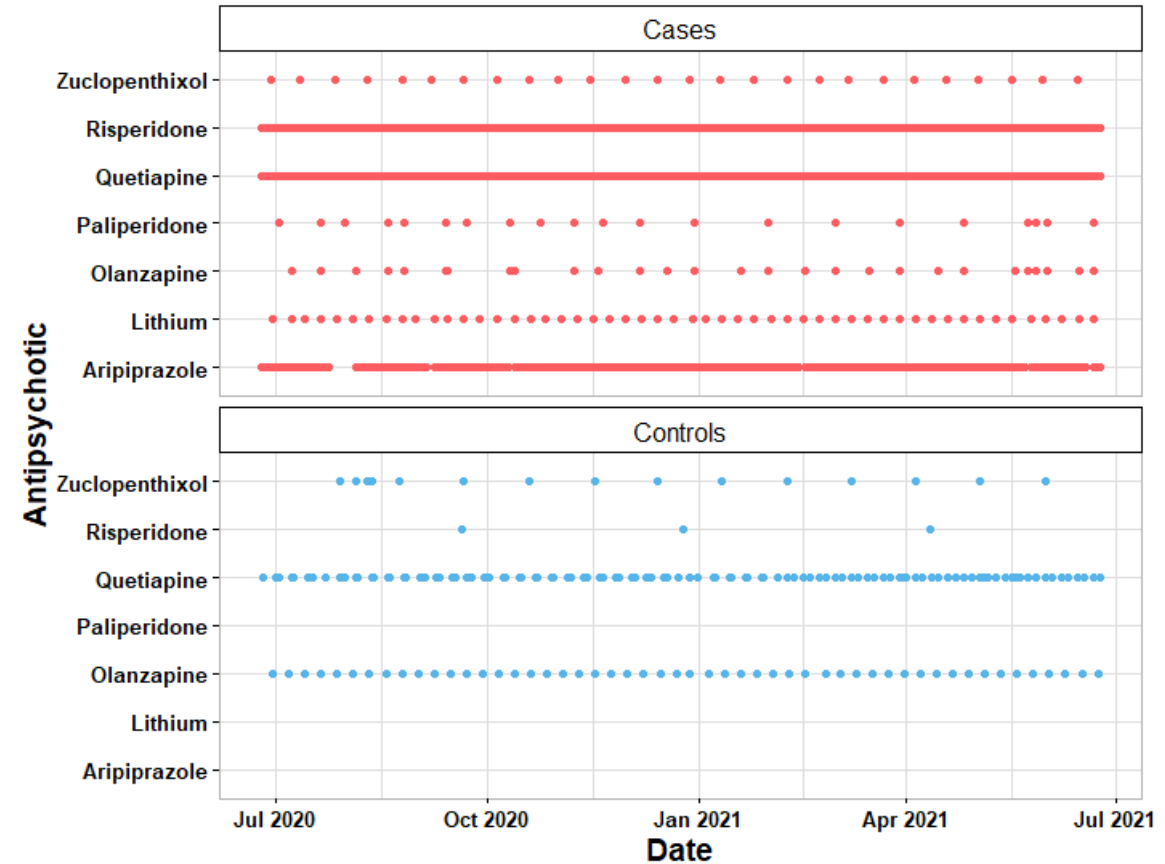
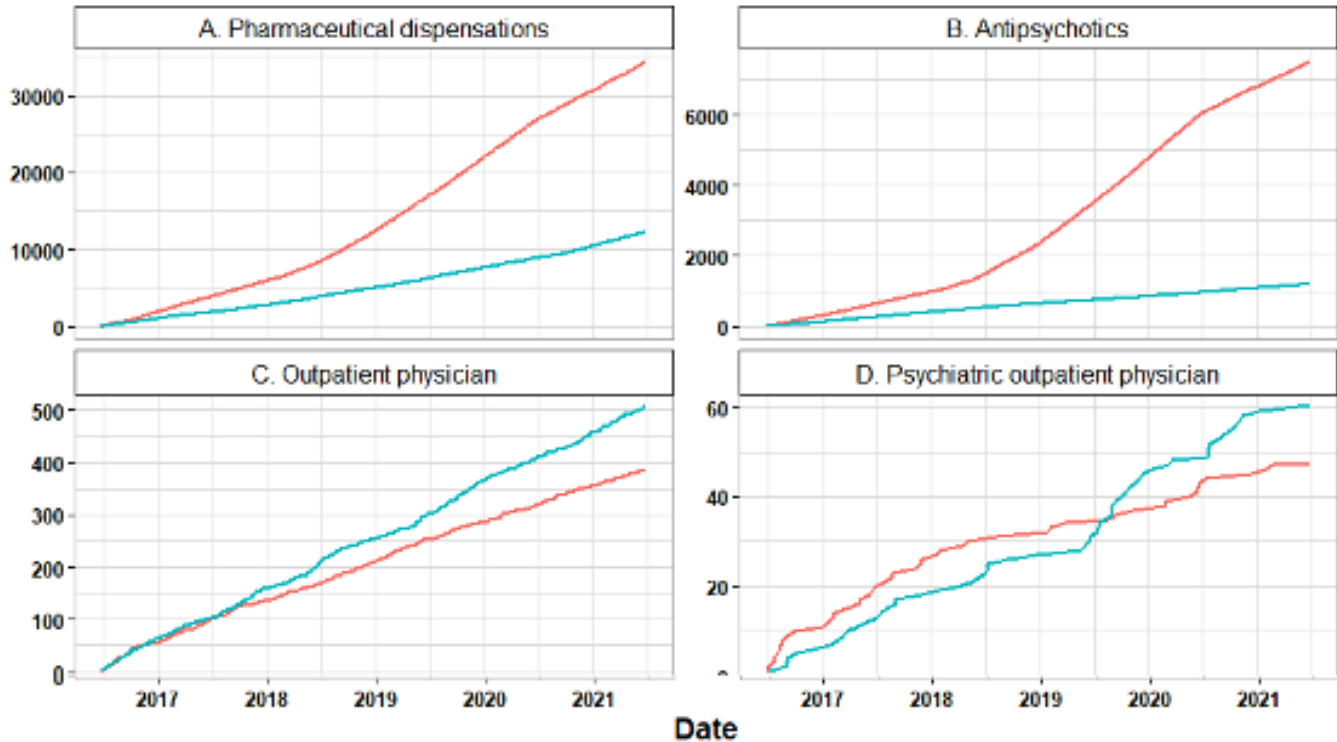


Study #8: When using a causal inference approach, schizophrenia and poverty were the risk factors most specific to extreme heat.

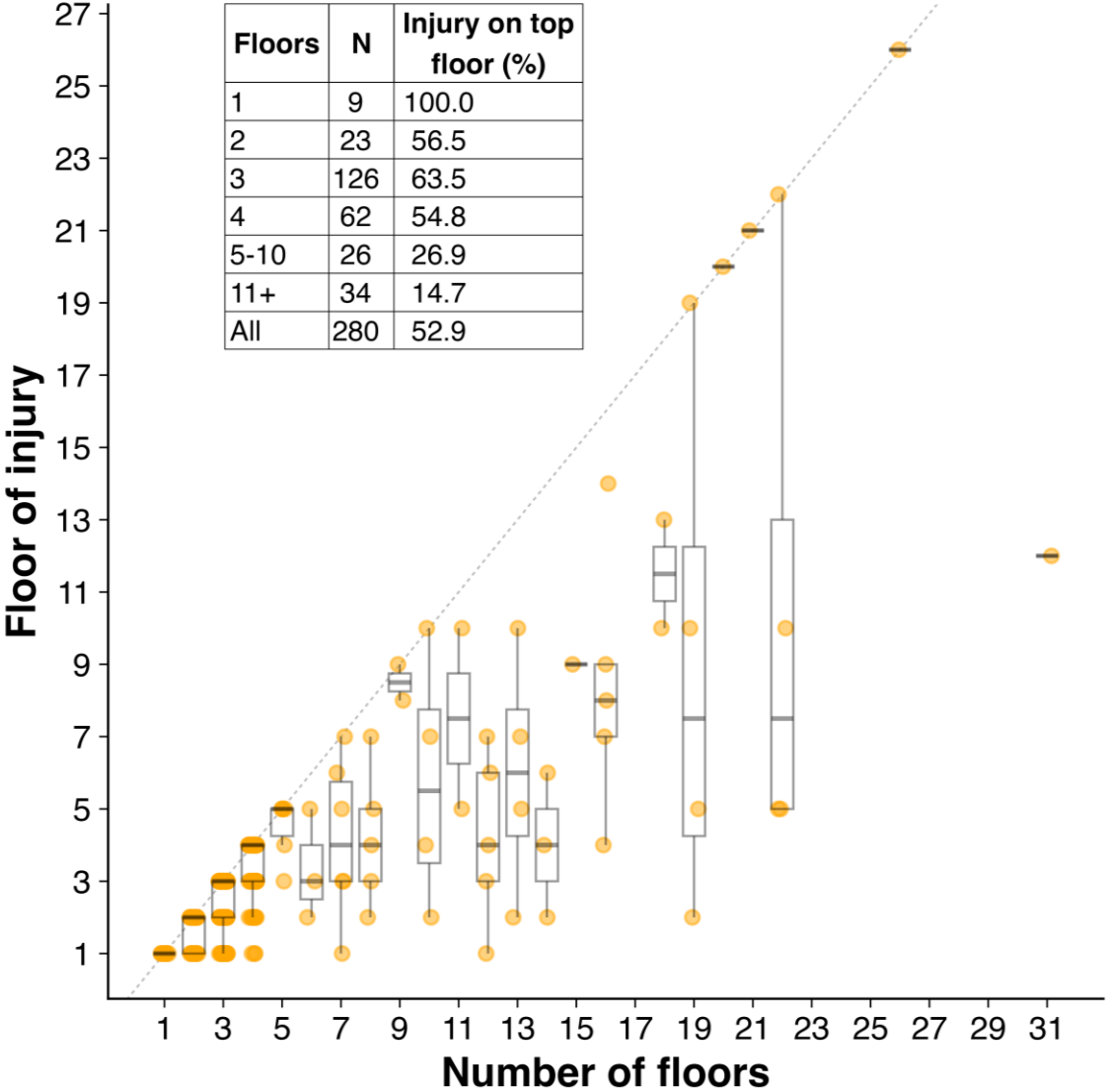


Study #9: Those who died with schizophrenia had different patterns of health services use and antipsychotic dispensations.

— Cases — Controls



Study #10: Fatal heat-related injuries disproportionately occurred in mobile homes, low-rise apartments, and areas without green space.



We currently have two more studies planned:

- 1) Longer-lasting effects of the heat dome on those who survived
- 2) Applying causal inference methods to prescribed medications

All years: 1,455



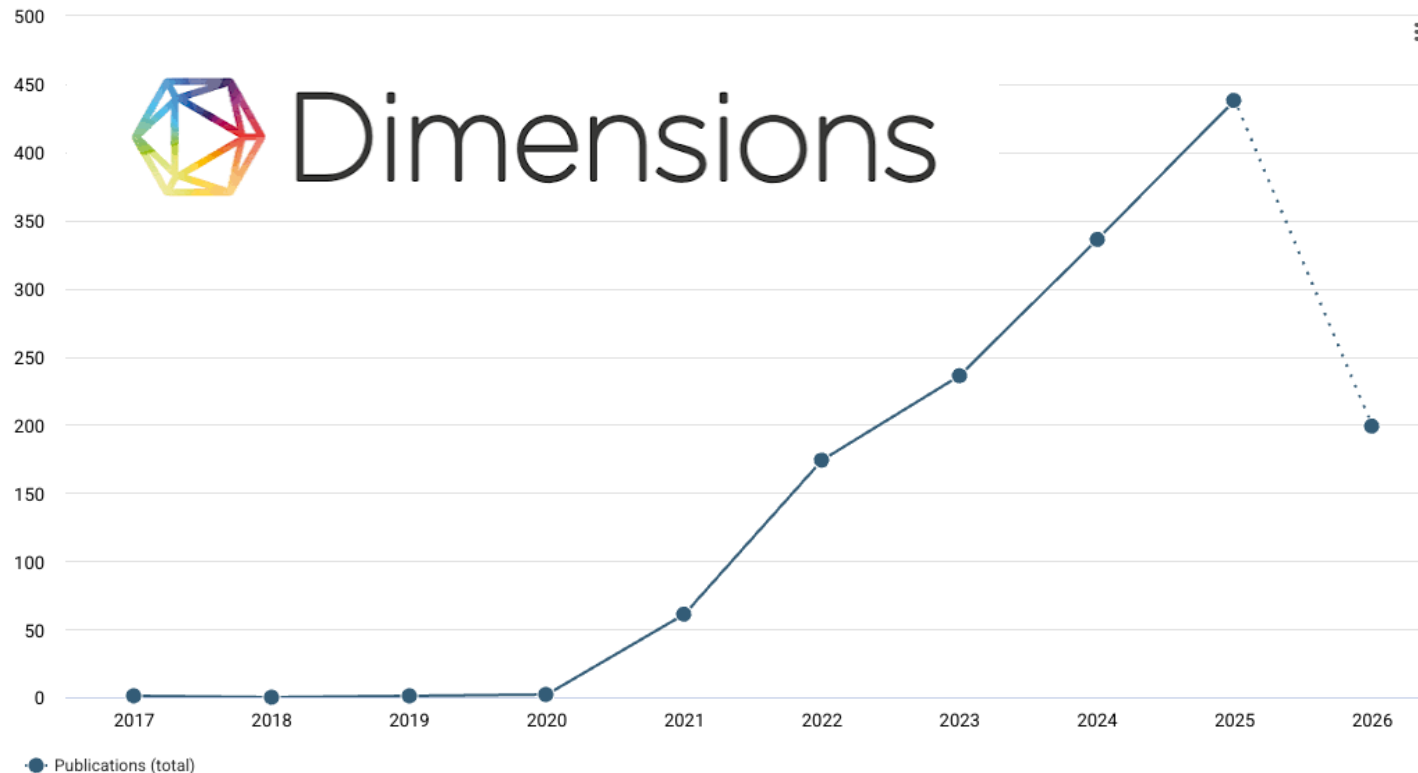
2021 "heat dome" health



Free text in full data

Show years 2017 to 2026

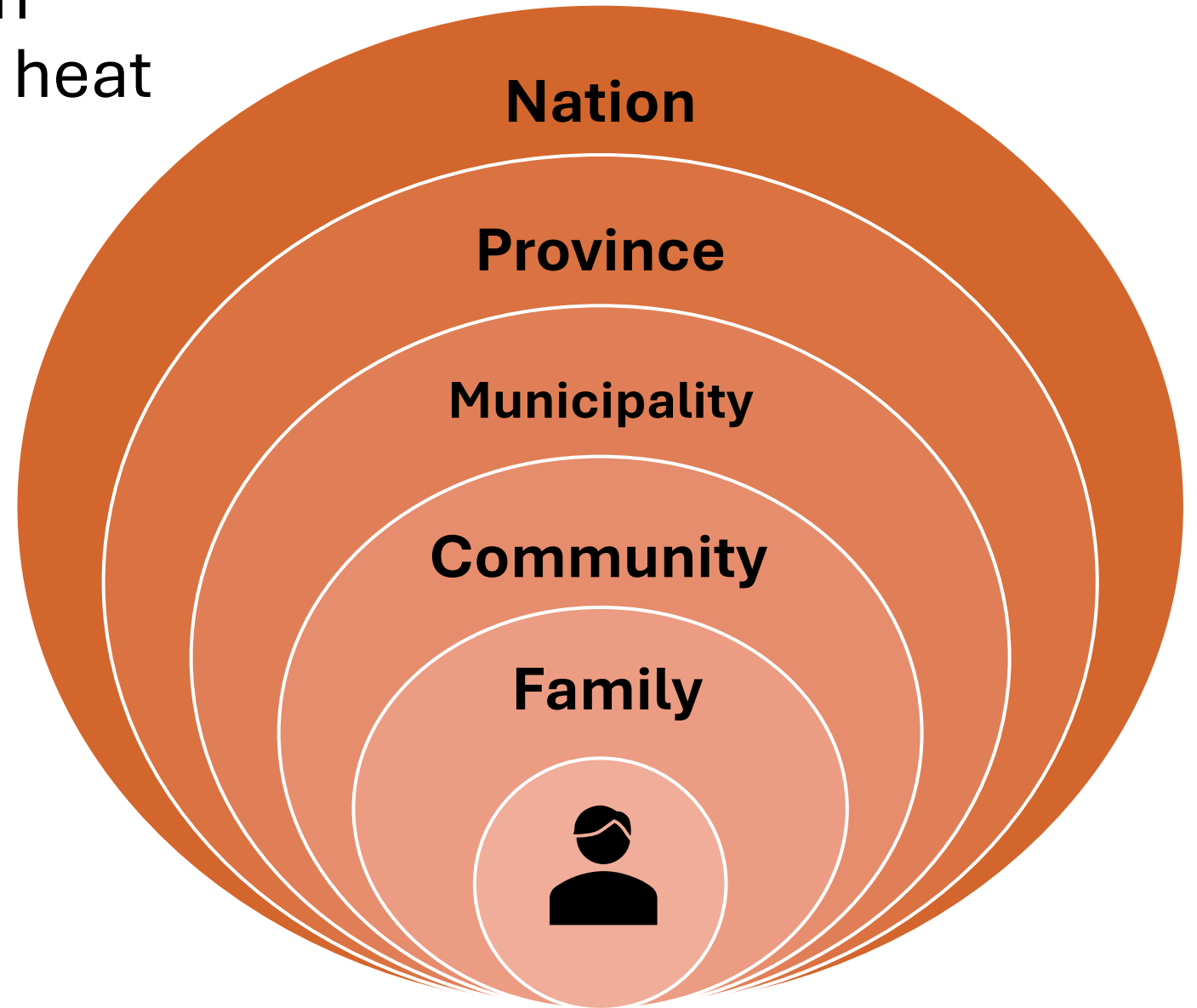
Chart | Table



Name	↓ Publications
Organization, Country	
Glen Patrick Kenny	45
University of Ottawa, Canada	
Robert Douglas Meade	26
University of Ottawa, Canada	
Emily Jeanne Tetzlaff	22
University of Ottawa, Canada	
Sarah B Henderson	18
BC Centre for Disease Control, Canada	
Fergus K O'Connor	17
Griffith University, Australia	
James Jeremy McCormick	13
University of Ottawa, Canada	
Melissa Gorman	12
Health Canada, Canada	

There is no simple solution when it comes to extreme heat preparedness

- Requires preparation and cooperation from individual to national level
- BCCDC research has informed policy, programs, and practices at all levels



Most of the policy, program, and practice work done since 2021 has required multi-agency, intersectoral partnerships and collaboration.

Work done by BC HEAT with partner support	Work done by partners with BC HEAT support
Extreme heat preparedness guide	Indoor temperature network
BC Heat Alert and Response System	Free air conditioner program
Situational awareness dashboard	Municipal by-law changes
	Provincial building code change
	National building code proposal
	National mortality reporting
	Much, much more...

The BC Health Effects of Anomalous Temperatures (BC HEAT) Coordinating Committee was officially established in January 2022.

Happy Movember From
BC HEAT



- Ministry of Health (co-chair)
- BCCDC (co-chair)
- Provincial Health Officer
- Emergency management
- BC Housing
- Ambulance service
- Government communications
- Environment Canada
- Health Canada
- Regional health authorities
- First Nations Health Authority
- Metis Nation BC
- HealthLink BC
- WorkSafe BC
- Union of BC Municipalities
- Coroners service (ad hoc)
- BC Hydro (ad hoc)

Extreme Heat Preparedness Guide



Before Summer

There are many things you can do to prepare for an Extreme Heat Emergency.

The following section walks you through basic readiness steps and heat specific considerations for your emergency plan. Discuss them with your family, friends, and members of your household and use the spaces provided to write notes.



TIP: You can also find and download our fill-in-the-blanks emergency plan at: preparedbc.ca/emergencyplan. It will have you covered for any emergency.

1. IDENTIFY THOSE WHO ARE AT RISK

While everyone can benefit from planning and preparing for extreme heat emergencies, the following people are especially at-risk if they do not have access to air conditioning and need to be prepared and supported:

- seniors aged 65 years or older
- people with substance use disorders
- people who live alone
- people who are marginally housed
- people with pre-existing health conditions such as diabetes, heart disease or respiratory disease
- people who work in hot environments
- people with mental illness such as schizophrenia, depression, or anxiety
- people who are pregnant
- infants and young children

https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/emergency-preparedness-response-recovery/embc/preparedbc/preparedbc-guides/preparedbc_extreme_heat_guide.pdf

2. EVALUATE IF YOU CAN STAY AT HOME

If you know you live in a building or residence that gets very hot, with inside temperatures of 31°C or higher, plan to go elsewhere during an Extreme Heat Emergency.

3. EVALUATE YOUR HOME'S COOL ZONES

Some areas of your residence may stay cooler than others. During an Extreme Heat Emergency, you should prepare to stay in the coolest part of the residence and focus on keeping that one location cool.

Start by identifying a room that's typically coolest and consider how you can modify the layout to support sleeping and day-to-day living for the duration of the heat event.

4. IDENTIFY OTHER LOCATIONS TO GET COOL

If it is not safe for you to stay at home, consider staying with friends or family that have air conditioning or cooler spaces. Alternatively, identify places in your community you can visit to get cool such as:

- libraries
- community centres
- shopping malls
- movie theatres
- religious centres
- parks and other shaded green spaces

You can also contact your First Nation or local government to find out if cooling centres will be available in your area (see contact info on **page 13**).

The BC Heat Alert and Response System (BC HARS) was first established in 2022 and has been updated every year since.

Table 1 BC HARS: 2026 Description of Guidelines and Thresholds

Warning level	Yellow Warning - Heat	Orange Warning - Heat	Red Warning - Heat-
General Criteria	Unusually high daytime and overnight temperatures for 2+ days (see Figure 4 for temperature ranges and zones)	Very high daytime and overnight temperatures for 3+ days (exceeding temperature ranges in Figure 4)	Orange warning conditions with a pattern of substantive day-over-day temperature increases for 3+ days
Expected frequency	Approximately 3 per summer (this is the most common warning)	Approximately 1 per summer (this is an uncommon warning)	Approximately 1 per decade (this is a rare warning)

Note: No minimum temperature (T_{min}) will be considered for issuing the first Yellow Warning – Heat if it is prior to mid-June.



BC HEAT situational awareness dashboard first launched in 2023, updated every year since (ED, ambulance, temperature data).



BCEHS Heat Summary Report Dashboard

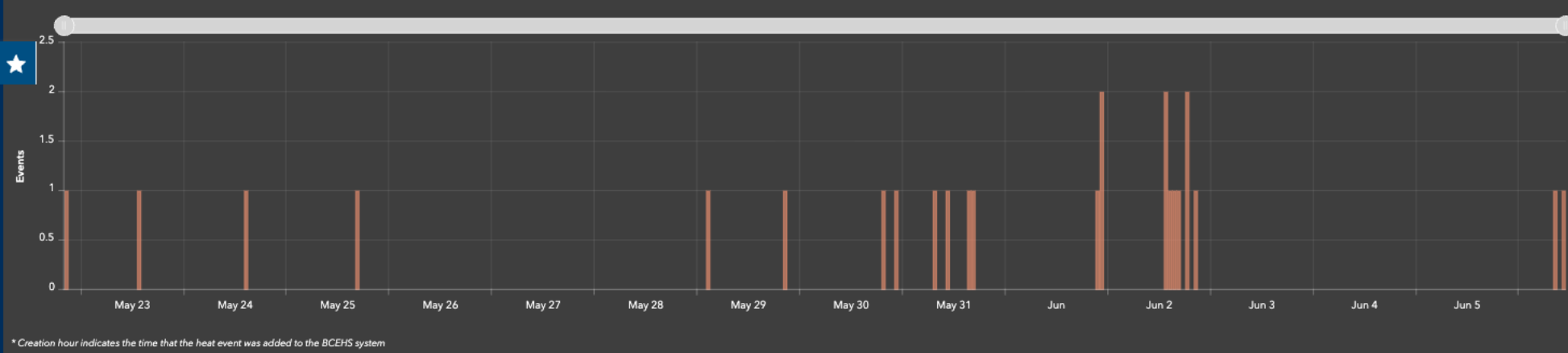
Filter by Beat
Provincial View

Filter by Event Type
Provincial View

Filter by Acuity
Provincial View

Filter by Dispatch Area
Provincial View

Heat Events (Card 20) - All Acuity Colours



All Card 20
24 Hour
All Card 20
4 Day

Not Enough Data to Perform Calculation

▼4 Day Total*: 10
Previous 4 Days*: 11

Card 20 - Heat
Orange
24 Hour
Orange
4 Day

Not Enough Data to Perform Calculation

▲4 Day Total*: 2
Previous 4 Day*: 1

Card 20 - Heat
Yellow
24 Hour
Yellow
4 Day

Not Enough Data to Perform Calculation

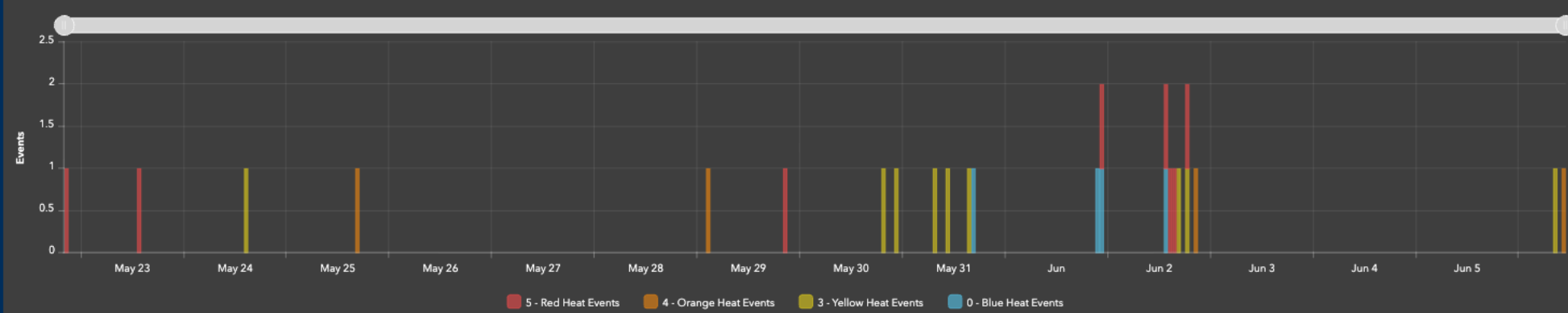
▼4 Day Total*: 3
Previous 4 Days*: 5

Card 20 - Heat
Blue
24 Hour
Blue
4 Day

Not Enough Data to Perform Calculation

▼4 Day Total*: 1
Previous 4 Days*: 3

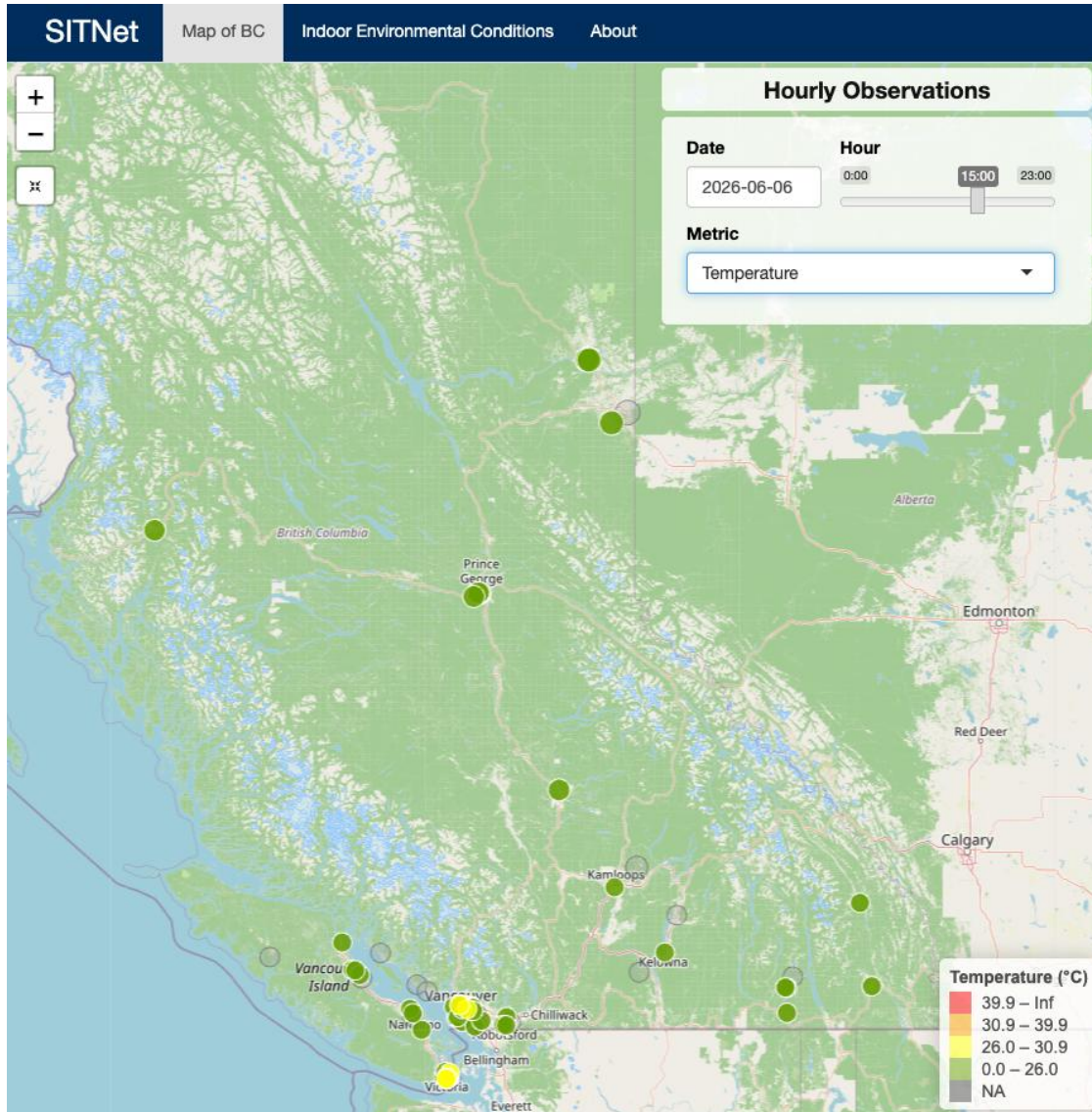
Heat Events (Card 20) by Acuity Colour



5 - Red Heat Events 4 - Orange Heat Events 3 - Yellow Heat Events 0 - Blue Heat Events

* Calculated based hour the event was created

The BCCDC Sentinel Indoor Temperature Network (SITNet) pilot launched with 25 sites in 2024, 100 sites added in 2025.



SITNet65

Location: West End

Temperature

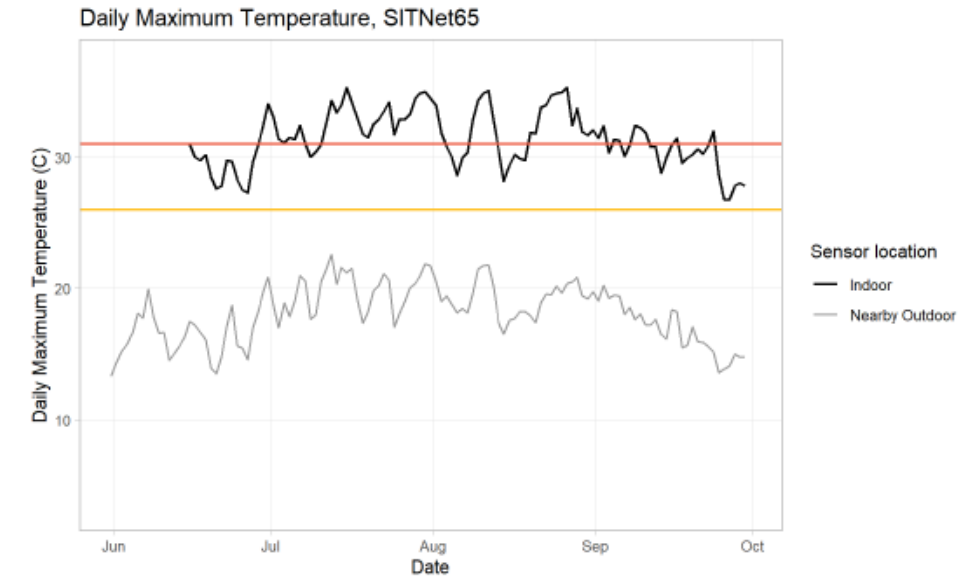


Figure: Daily maximum indoor (black) and outdoor (gray) temperatures. Yellow line = 26°C, red line = 31°C.

Table 115: Indoor temperature summary (hourly data)

Temperature Range	Percent of Hours (%)	Number of Hours
Below 26C	2.9	74
26C to 31C	71.4	1819
Above 31C	25.7	654

Province launches new initiative to protect people during extreme heat emergencies

Updated June 28, 2023

Translations

-  简体中文
-  繁體中文
-  ਪੰਜਾਬੀ
-  Tagalog

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News Release

Vancouver

Tuesday, June 27, 2023 3:05 PM

Media Contacts

Ministry of Health

Communications
250 952-1887 (media line)



(flickr.com)

Vancouver Mandates Air Conditioning in All New Homes

July 25, 2024

English

فارسی

Starting in 2025, Vancouver mandates built-in air conditioning for all new homes to combat rising temperatures and protect residents. This move aims to enhance safety and comfort amid increasing climate challenges.

<https://www.artemissaffari.com/blog/vancouver-mandates-air-conditioning-in-all-new-homes>



Liveable homes: BC government to require new buildings to not exceed 26°C for living space



Kenneth Chan | Dec 6 2023, 3:55 pm

<https://dailyhive.com/vancouver/bc-government-building-code-changes-cooling-accessibility-seismic>



10



[Submit a comment](#)

Proposed Change 2061

Code Reference(s):	NBC20 Div.B 1.1.3.1. (first printing) NBC20 Div.B 6.2.1. (first printing) NBC20 Div.B 9.33.2.1. (first printing) NBC20 Div.B 9.33.3. (first printing) NBC20 Div.B 9.33.5. (first printing)
Subject:	Overheating
Title:	Overheating in New Dwelling Units
Description:	This proposed change requires new dwelling units to be provided with mechanical cooling in locations where the outside summer design temperature exceeds 26°C.

Establishing 26°C as the maximum indoor air temperature aligns with recommendations from the BC Centre for Disease Control (report to the chief coroner), studies by the University of Ottawa and the National Research Council, and is supported by the World Health Organization as an appropriate threshold for the protection of vulnerable populations.

Multiple studies and guidelines highlight the link between indoor temperature control and the reduction of heat-related illness and mortality. Keeping indoor temperatures below this limit helps reduce cardiovascular strain, prevent dehydration, and limit heat build-up in buildings, and thereby lowers the risk of heat exhaustion or heat stroke.

British Columbia

Landlords must ensure apartments don't get too hot under new New West bylaw

City will require landlords to keep at least 1 room in a rented apartment at or below 26 C



[Lauren Vanderdeen](#) · CBC News ·

Posted: Apr 02, 2026 7:00 AM PDT | Last Updated: April 2



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Estimated 4 minutes



Vancouver landlords to face \$1,000 fines for prohibiting air conditioners

By unanimous council vote, Vancouver follows other municipalities in Canada and the United States that have established regulations supporting renters' access to cooling.

By [Dan Fumano](#)

Published Jun 03, 2026 2 minute read [18 Comments](#)



The Canadian Heat-Attributable Mortality Planning Symposium (CHAMPS)

- A national dialogue about investigating and attributing heat-related mortality
- Presentations, panel discussions, and conversations
- Coroners and medical examiners from all provinces and territories invited to attend in Ottawa, May 2027
- Fully funded by Health Canada HeatADAPT
- Hosted by BC Coroners Service and BCCDC



Health checks during extreme heat events

A guide to doing health checks in-person or remotely

1

Extreme heat events can lead to dangerous indoor temperatures in homes without functioning air conditioning. Health checks are used to assess how people at high risk of heat-related illness are doing during extreme events. In-person health-checks are best, but a remote health check is better than no health check.



Rapid risk assessment checklist

This guide has five pages with important information for doing health checks during extreme heat events.

PAGE 1
Rapid risk assessment checklist

PAGE 2
Recognizing and responding to heat-related illness

PAGE 3
In-person health checks

PAGE 4
Remote health checks

PAGE 5
Measuring body and room temperature

To assess whether someone is at risk, check all the personal factors that apply on the following list. **The more boxes checked, the higher the potential risk.**

- Older adult (60 years+)** The body's ability to cool itself is impaired as people age.
- Mental illness or cognitive impairment** Conditions such as schizophrenia, depression, anxiety, and dementia can reduce awareness of heat-related risks.
- Chronic disease** Chronic diseases such as diabetes, heart disease, respiratory disease, and cancer can limit the body's ability to cool.
- Living alone or socially isolated** People who live alone or do not have strong social connections are at higher risk because they have fewer people looking out for them.
- Substance dependency or use** The ability to sense and respond to heat can be affected by use of drugs or alcohol, especially for those who are dependent.
- Impaired or decreased mobility** People with impaired or reduced mobility might be less able to take protective measures during extreme heat events.
- Medication use** Some prescription medications for common conditions can cause dehydration and affect the body's ability to cool itself.
- Poor physical fitness** People who are not engaged in regular physical activity are less able to keep cool in the heat.



Staying safe in extreme heat: A quick guide to health checks

[Video]

June 18, 2025

Video and Tools

We prepared this animated video on health checks during extreme heat to accompany our Extreme heat health check tool, which is available in English, French, Chinese (Traditional and Simplified)...

Climate Change

Extreme Weather



Extreme heat events: Media communication with impact

May 08, 2025

Evidence Review

Key Messages Media reporting on extreme heat events can affect public perception of risk and the protective measures people take in response. Interviews were...

Climate Change

Extreme Weather

Public Health Fundamentals

Health Promotion And Protection



Heat alert and response systems in Canada: A check-up on preparedness

March 31, 2025

Evidence Review

Key messages Context: Extreme heat events are increasing in number, duration, and intensity due to climate change. Heat alert and response systems (HARS)...

Climate Change

Extreme Weather



Thank you!

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BC Centre for Disease Control



National Collaborating Centre
for Environmental Health

Centre de collaboration nationale
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