City of New Orleans

# 2024 Heat and Health Report

Review of Heat and Heat Data from May to October 2024

**January 2026**

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# Contents



# Introduction

The 2024 City of New Orleans Heat and Health Report summarizes heat and health data from May to September of 2024. This is the second report from the New Orleans Department of Health & Human Services, developed in response to the hottest summer on record [1] as well as the first local declared state of emergency for extreme heat in 2023. Exposure to extreme heat has intensified due to the increased severity, frequency, and duration of heat-related weather events [2] [3]. New Orleans' high humidity and severe summertime storms can increase an individual's risk of experiencing **heat illness**, or the body's inability to cope with a particular heat load leading to a significant rise in body temperature. Heat illness in humans presents in many forms, including heat rash, heat cramps, heat syncope, heat exhaustion, and the most severe form — heat stroke. Heat stroke can happen to anyone and is a life-threatening condition. Data associated with heat illness can inform surveillance efforts, strategic planning, agency collaboration efforts, risk communication, and community outreach and education.

This report has three main objectives:

1. Comparing available 2024 heat data to heat metric baselines established in the 2023 Heat and Health Report

2. Defining populations for targeted interventions

3. Exploration of new data sources for heat-related demographic data

# Relevant Definitions

**Heat Illness** – A condition resulting from the body's inability to cope with a particular heat load, leading to a significant rise in body temperature leading to illness.

**Heat Index** – Also called the "feels like" temperature, it takes the ambient temperature and factors in the humidity to create a metric to better represent what a person is feeling.

**Heat-related Death** – A death in which exposure to high ambient temperature either caused the death or significantly contributed to it. In the context of this report, it may also be referred to as a heat death.

**Heat-related Call for Service** – A call for service is categorized as a heat-related call for service when any of the following criteria are met:

- Primary impression is either:
  - Environmental – heat stroke
  - Environmental – heat exhaustion
  - Other – dehydrated
- Secondary impression is either:
  - Environmental – heat stroke
  - Environmental – heat exhaustion
  - Other – dehydrated
- The following primary and secondary impressions are excluded from the definition:
  - Endocrine – hyperglycemia
  - Endocrine – hypoglycemia

**Heat Advisory** – Declared by the National Weather Service if the forecasted heat index is higher than 108°F or the forecasted ambient temperature is higher than 103°F for 1 to 2 days.

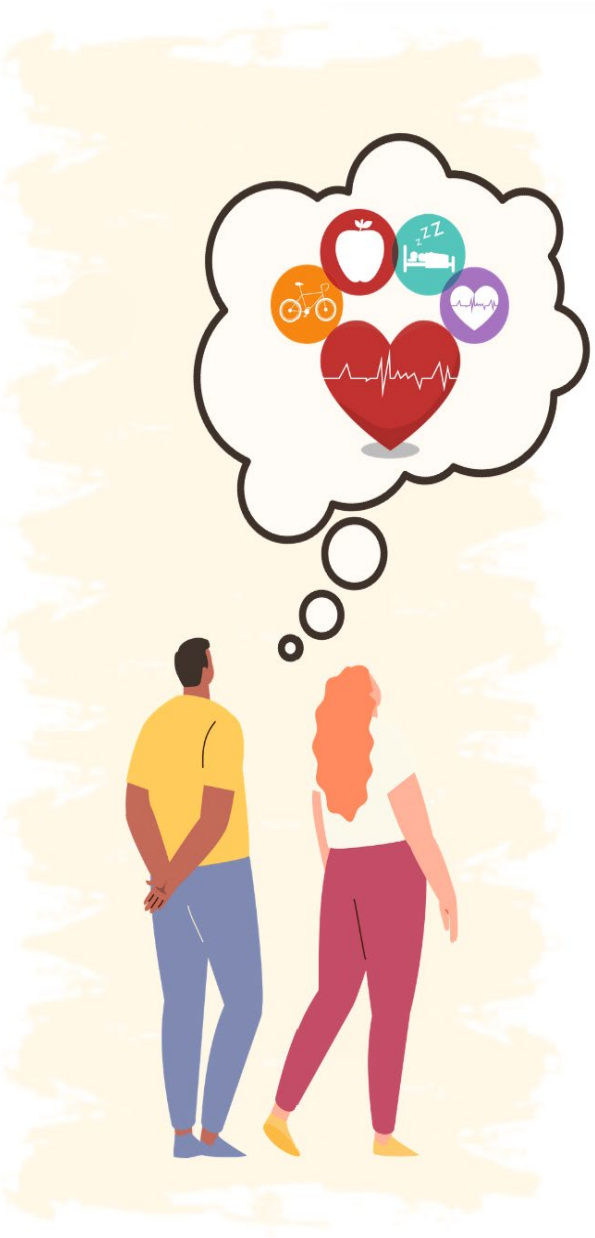
**Excessive Heat Warning** – Declared by the National Weather Service if the forecasted heat index is higher than 113°F or the forecasted ambient temperature is higher than 105°F for at least 2 days.

**Access and Functional Needs** – Refers to individuals, with or without disabilities, who need additional assistance due to conditions that limit their ability to act. It covers physical, communication, transportation, and health needs, focusing on functional requirements rather than specific diagnoses.

**Definitions for Mental Health Calls in Table 6:**

- **MCIU** – Portion of mental health 911 calls where the Mobile Crisis Intervention Unit responded
- **NOPD** – Portion of mental health 911 calls where the New Orleans Police Department responded
- **103M** – New Orleans Police Department call code for a mental health crisis
- **29ST** – New Orleans Police Department call code for a suicide threat
- **29SA** – New Orleans Police Department call code for a suicide attempt
- **29S** – New Orleans Police Department call code for a suicide

## Background



Extreme weather events, including patterns of sustained record high temperatures, have increased over the last few decades [4][5]. Public health and climate researchers indicate that this trend will persist, making it imperative for municipalities to take proactive measures immediately. Local government responsibilities include developing equitable programs and policies that allow for sustained adaptation to these changes; engaging and educating residents of local health risks and worker rights; and collaborating with other sectors to form a cohesive response. Higher temperatures can impact crop growth, increase spread of vector-borne illnesses, worsen chronic diseases, and lead to population displacement [6][7][8][9][10][11]. These challenges disproportionately affect certain populations, such as older adults, socially isolated individuals, unstably housed, children, pregnant and post-partum individuals, outdoor workers, and individuals with mental health issues. The most substantial impacts are often felt by communities of color and limited-income populations. Residential segregation, often a result of redlining, has left these neighborhoods with fewer trees and green spaces, making them more susceptible to heat islands. Additionally, these same residents often face higher rates of cardiovascular and respiratory diseases, largely due to food deserts, inadequate access to medical care, and proximity to industrial areas with high pollution levels. Extended extreme heat also strains energy resources, potentially overloading power grids, while lower-income communities struggle to cope with increased utility costs to stay cool. A study by the International Energy Agency revealed a 2.5-fold increase in global energy demand from 1970 to 2020, with nearly 40% of this increase occurring in humid, lower-income regions like New Orleans, a trend that is likely to persist [12].

## Methodology

This report analyzes extreme heat morbidity and mortality data, as well as Healthy Homes data and environmental data from the following sources:

- Orleans Parish Coroner's Office
- New Orleans Emergency Medical Services
- Orleans Parish Communication District (311)
- City of Orleans WeatherSTEM Stations
- National Weather Service (NWS)

For more information about methodology, please review the 2024 Methodology appendix.

# Report Summary

## Comparison of the Heat Metric Baselines in 2023 Report

- In 2024, there were fewer excessive heat warnings, but slightly more heat advisories.
- While there were fewer days spent in the triple digits, more days reached a heat index of 90°F. The maximum heat index was at least 90°F every day from May 19 to September 5.
- Average maximum heat indices seen across the 26 Orleans Parish WeatherSTEM locations revealed slightly more days at the heat advisory and excessive heat warning thresholds than reported through the NWS.
- Overall, there was a decrease in heat-related morbidity and mortality, aligning best with the decrease in the number of days with average maximum heat indices of 108°F or greater.
- There were less heat-related fatalities in 2024 compared to 2023.
- Heat fatalities began to occur in late May when the average maximum heat index began to stay at or above 90°F and continued to occur until mid-August.

## Defining Targeted Intervention and Establishing Patterns

- A majority of heat-related fatalities were in black men, an increase in percentage from 2023.
- People aged 60-69 made up the greatest number of health-related deaths, same as in 2023.
- The most common, known chronic conditions associated with heat-related fatality were hypertension and drug use.
- Half of heat-related deaths were associated with someone speaking to or seeing the decedent the same day they were discovered.
- Similar to 2023, indoor heat-related deaths most commonly involved situations where an air conditioning unit was not functioning as it should be.
- The zip codes with the greatest number of heat-related fatalities were 70117 and 70126.
- The zip code with the greatest number of heat-related calls for service was the 70119-zip code, followed by 70116, 70112, and 70130.
- Unhoused persons did not specifically influence which zip codes had higher overall heat-related calls for service but showed a greater sensitivity when extreme heat persisted for long periods of time.
- Weeks with higher levels of calls for service with critical patient acuity tended to be weeks that had some of the highest heat indices for the year.

## New Data Sources for Heat-Related Demographic Data

- Healthy Homes Ordinance: There were 103 air conditioning-related Healthy Homes complaints made, 24 of the complaints mentioned populations that are vulnerable to heat living in the home.
- Naloxone administration: There was a slightly higher burden of naloxone-receiving patients experiencing opiate-related and medical-related cardiac arrest during summer months when compared to the rest of the year.

# Comparison of Heat Metric Baselines Established in 2023

**Table 1. Comparison of NWS heat-related weather alerts issued by year**

The summer of 2024 saw fewer heat-related alerts compared to the previous year, with fewer excessive heat warning days. However, there were slightly more heat advisory days in 2024 compared to 2023.

| Alert Type | 2021 | 2022 | 2023 | 2024 |
|---|---|---|---|---|
| Heat Advisory | 20 | 11 | 26 | 30 |
| Excessive Heat Warning | 4 | 1 | 29 | 9 |
| Total Alerts for the Year | 24 | 12 | 55 | 39 |

**Table 2. Comparison of average WeatherSTEM station maximum heat indices by year**

All daily maximum heat indices were averaged together to create an average daily maximum heat index for the city. While 2023 had more days with higher maximum heat indices in the triple digits, 2024 saw more days with a maximum heat index of 80°F and 90°F.

| *Citywide Avg* | 2023 | 2024* | 2024 |
|---|---|---|---|
| Days ≥ 80°F | 212 | 217 | 217 |
| Days ≥ 90°F | 139 | 152 | 152 |
| Days ≥ 100°F | 94 | 96 | 96 |
| Days ≥ 108°F | 55 | 37 | 37 |
| Days ≥ 113°F | 33 | 13 | 13 |

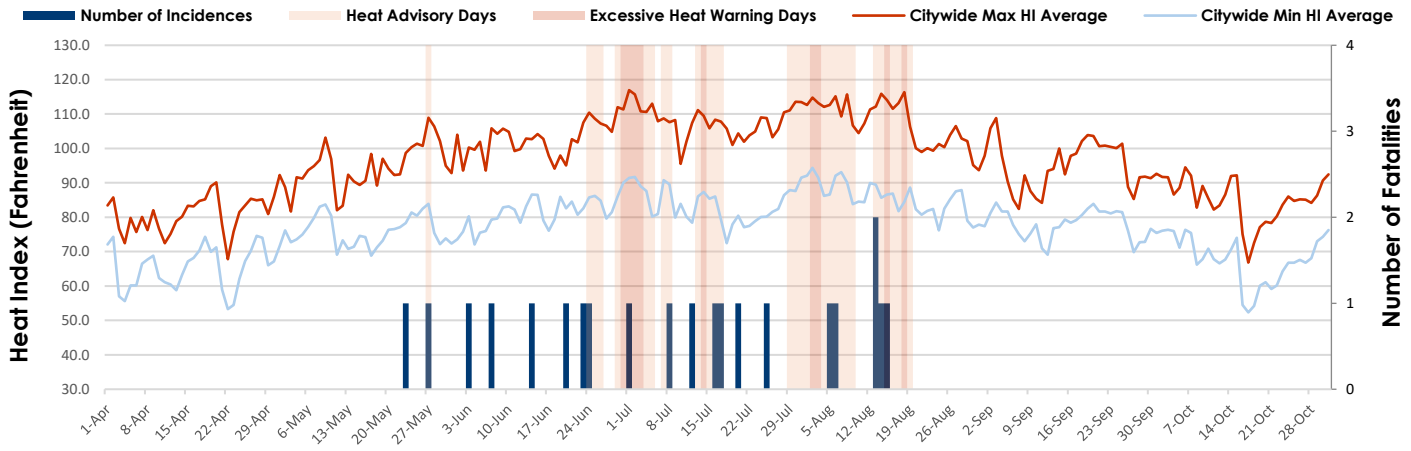
*In 2024, five WeatherSTEM stations were added to the map. To control for these additional data points, these stations were left out of the 2024 maximum average daily maximum heat index calculations in the column labeled with the asterisk within Table 2.

**Table 3. Number of heat-related EMS calls, ED visits, and fatalities by year**

In 2024, there were less heat-related health impacts seen in healthcare facilities and EMS than in 2023. There was a 15.5% decrease in EMS calls, a 34% decrease in Emergency Department (ED) visits, and a 25% reduction in fatalities.

| Incident Type | 2023 | 2024 |
|---|---|---|
| Heat-related EMS calls | 367 | 310 |
| Heat-related ED visits | 416 | 274 |
| Heat-related fatalities | 28 | 21 |

**Graph 1. 2024 Heat mortality compared to maximum HI, minimum HI, and NWS heat-related alerts**



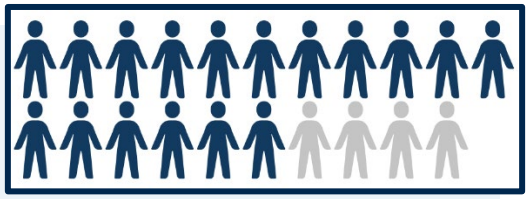

Graph 1 shows the relationship between heat-related fatalities, heat-related weather alerts issued by the National Weather Service (NWS), and the average maximum and minimum heat index (HI) for a given day from the 25 WeatherSTEM stations through New Orleans. Heat fatalities began to occur in late May when the average maximum heat index began to stay at or above 90°F. Heat fatalities continued to occur until mid-August, with only one day where two fatalities occurred within the same day. Similar graphs for both morbidity and mortality in 2023 can be found in the 2023 Heat and Health report.

## Defining Target Populations by Demographic Characteristics

# Heat-Related Fatalities: Part 1

**Figure 1. 2024 heat-related fatalities by sex**

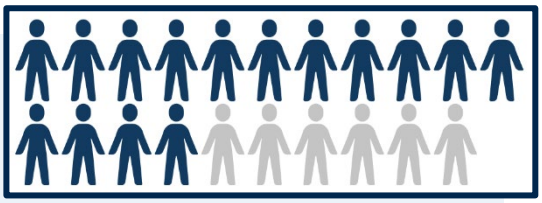
About 81% of the heat-related fatalities were male, compared to 68% of the heat deaths in 2023 [13]. In New Orleans, men make-up 47% of the population [14]. Men may be at higher risk for heat-related illness and death. When compared to women, a higher number of men work outdoors or are homeless and living on the street. These conditions can increase the risk of exposure to extreme heat over prolonged periods of time [15][16].



**17 of 21 heat-related fatalities were male**

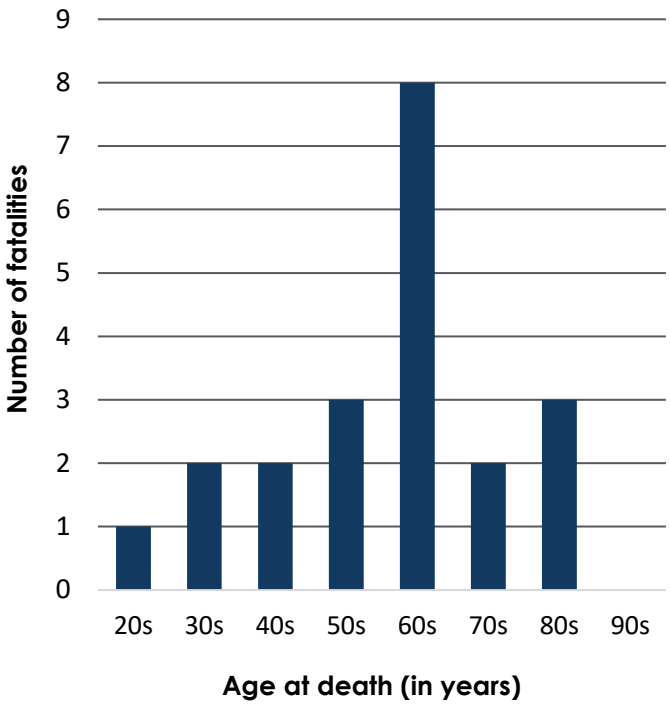
**Figure 2. 2024 heat-related fatalities by race**

About 71% of heat-related deaths in 2024 were Black persons. The other 29% of fatalities were white persons. In 2023 Black individuals made up 46% of heat-related fatalities and white individuals made up 43% of fatalities [17]. For reference Black people make up 55% of the population of New Orleans, while white people make up 32% of the population [18]. Compared to 2023, 2024 saw an increase in the number Black heat-related fatalities.



**15 of 21 heat-related fatalities were Black persons**

**Graph 2. Heat-related fatalities by age group**

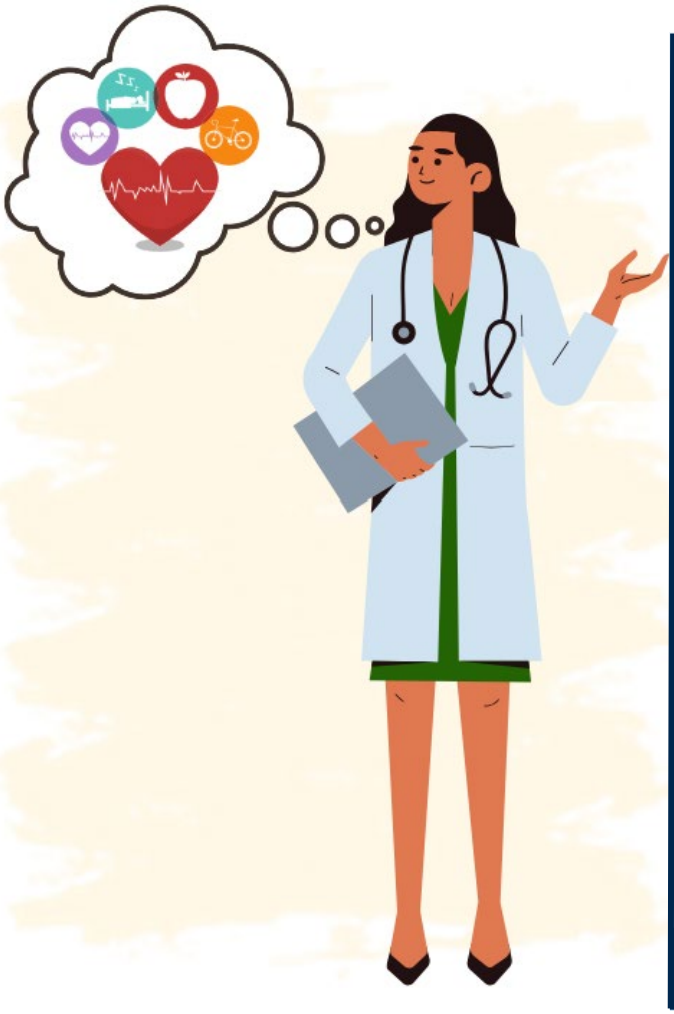



Fatalities were grouped by age, with each blue column representing 10-year groupings. The most heat-related deaths were seen in the 60-69 age group, making up 38% of the heat-related fatalities for 2024. In 2023, this age group also had the greatest number of heat-related deaths, around 29% of fatalities. Data from 2023 and 2024 show an incremental trend in the number of heat-related fatalities per age group, starting at the 20s and 30s age groups to the 60s age group, followed by a sharp decrease in the number of deaths in the 70s and 80s age groups [19]. For reference, the percentages of the city's population by age group are as follows: 20-29 (13%), 30-39 (17%), 40-49 (12%), 50-59 (12%), 60-69 (12%), 70-79 (7%), and 80-99 (3%) [20]. Unlike the fatality data in Graph 2, the 60-69 age group does not make up a significant portion of the city's population. Similarly, the 80-99 age group makes up a small portion of the population compared to the portion of fatalities in this group. It should be noted there were no fatalities in persons younger than 20 years of age.

## Heat-Related fatalities: Part 2

**Figure 3. Known chronic conditions of 2024 heat-related fatalities**


*Chronic conditions were taken from what was available on the coroner's report, not a complete investigation of chronic conditions associated with the 21 heat-related fatalities in 2024.

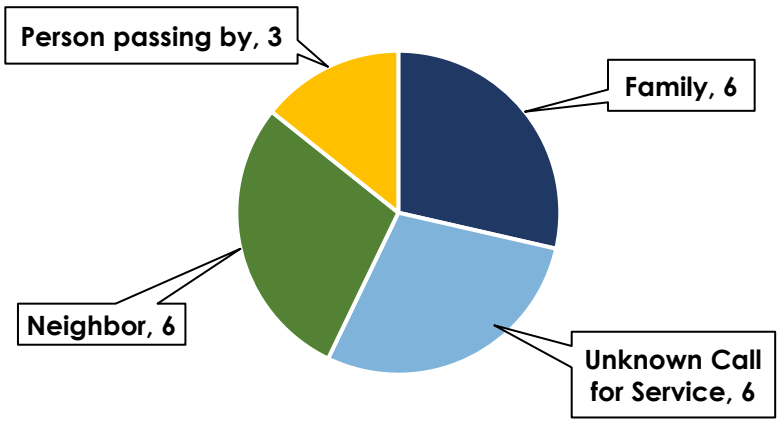


Many factors can contribute to a person's risk of experiencing heat illness, including both personal and environmental factors. Heat-related deaths often involve a combination of factors, some of which can include underlying chronic and/or medical conditions. Diseases that impair the body's ability to regulate temperature such as heart diseases, respiratory diseases, kidney disease, mental health disorders, and even medical issues that can reduce a person's mobility are a few common risk factors associated with heat-related fatalities.

Figure 3 demonstrates the common conditions associated with the 2024 heat-related fatalities. The larger the word appears, the more common that risk factor was in individuals who passed away due to heat-related causes. The most common risk factor found to be associated with heat-fatalities in 2024 was hypertension, followed closely by drug abuse. Other more common conditions found include mental health illness, cardiovascular disease, respiratory illness, and alcoholism. It should be noted that the conditions in the figure above do not represent a comprehensive list of all relevant conditions as data was only taken from what was available in the coroner report and not hospital records.

# Heat-Related Fatalities: Part 3

**Figure 4. Person who prompted decedent discovery**




**Graph 3. When heat-related decedent was last heard from**

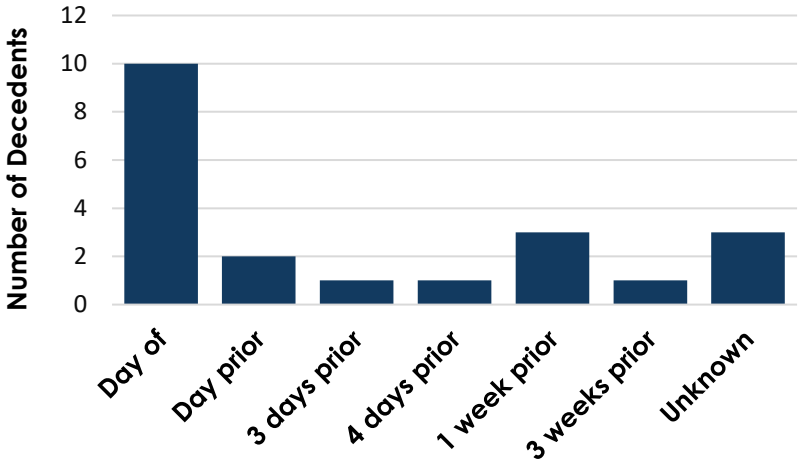
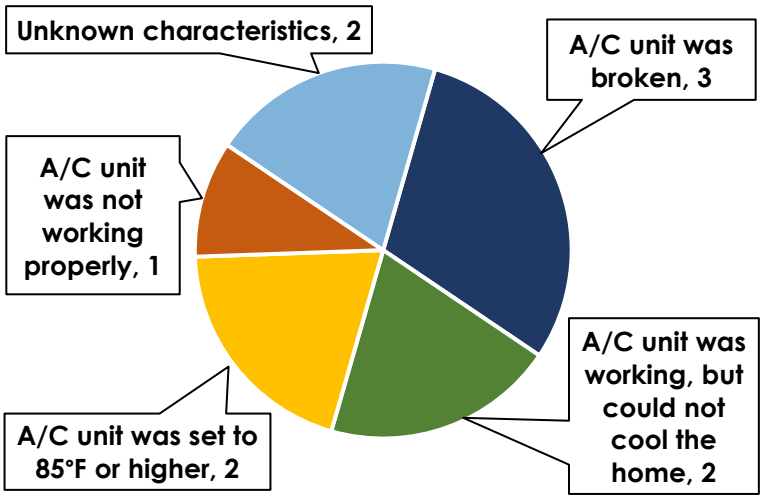



Figure 4 shows the relation of the person(s) who checked in on the well-being of the decedent or called for the welfare check that led to their discovery. For the 2024 heat-related fatalities, around half of the deaths were discovered due to either neighbors or family members checking in. There were also three deaths that were discovered by people passing by due to these heat-related deaths occurring outdoors. The 'Unknown Call for Service' category describes cases where the individual passed away at the hospital and thus the coroner's narrative does not include who prompted the decedents trip to the hospital or what their relationship to the decedent was.

Graph 3 shows the amount of time that passed from the last time someone saw or spoke to the decedent to when they were discovered by a first responder or medical staff. Around half the heat-related fatalities that occurred in 2024 involved someone speaking to or seeing the decedent the same day that they were discovered as deceased. Slightly less than half of the incidences involved a delay in contact ranging from the day prior to 3 weeks prior. However, some level of engagement with the decedent the same day as the incident was by far the most common outcome associated with heat-related fatalities.

**Figure 5. A/C-related characteristics of the 10 residential heat-related fatalities**

Of the 21 heat-related fatalities this year, 10 of them occurred indoors and 11 occurred outside. The 10 indoor fatalities were viewed in more detail to determine the state of the air conditioning within the home. The resulting characteristics can be seen in Figure 5 to the right. Similar to 2023, indoor heat-related deaths most commonly involved situations where an air conditioning unit was not functioning as it should be. In 2024, half the instances involve an A/C unit that was either broken or not working properly. The other half involve instances where the A/C unit was set to a higher temperature or was working but could not effectively cool the home.



## Heat-Related Fatalities: Part 4

In addition to a person's health and wellbeing, both social and environmental factors can also contribute to the risk of experiencing heat illness. Neighborhood-level factors like tree coverage, housing quality, transportation, economic stability, and ability to access resources can impact how someone experiences extreme heat. A person's home zip code can be a predictor of a person's likelihood of experiencing heat illness.

Figure 6 shows heat-related fatalities from 2023 and 2024 when organized by zip code. In 2024, the zip codes with the greatest number of heat-related fatalities were the 70117 and 70126 zip codes. More central zip codes like 70113, 70116, 70119, and 70125 also experienced more than one heat-related fatality. When looking at 2023 and 2024, zip codes with fatalities are spread out across the city and have not been concentrated to one particular area. Two zip codes with the greatest number of heat-related fatalities in 2023 (70130 and 70118) saw fewer fatalities in 2024, with the 70130-zip code seeing a decrease from 5 to 1 fatality. This decrease for 70130 may be due to closing the Tchoupitoulas encampment, as all 2023 heat deaths in this zip code were in unhoused persons, or in those whose housing status was unknown.

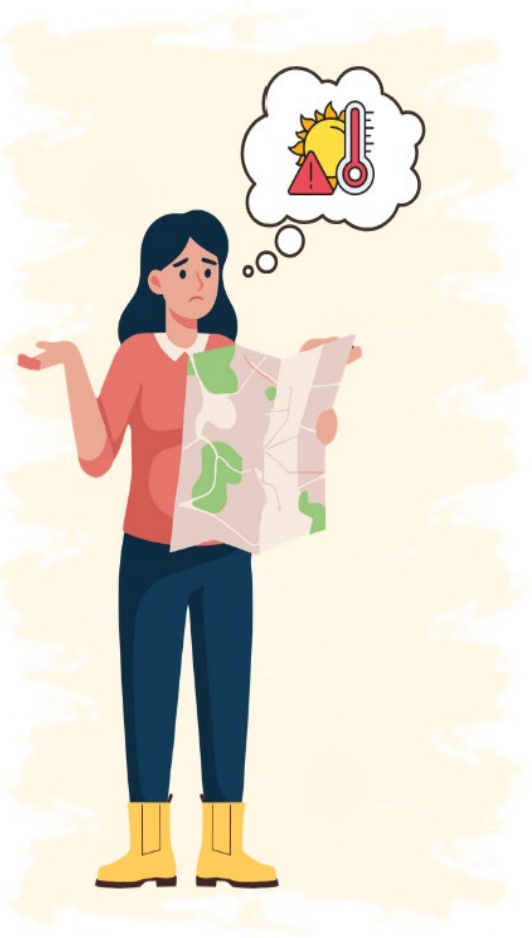
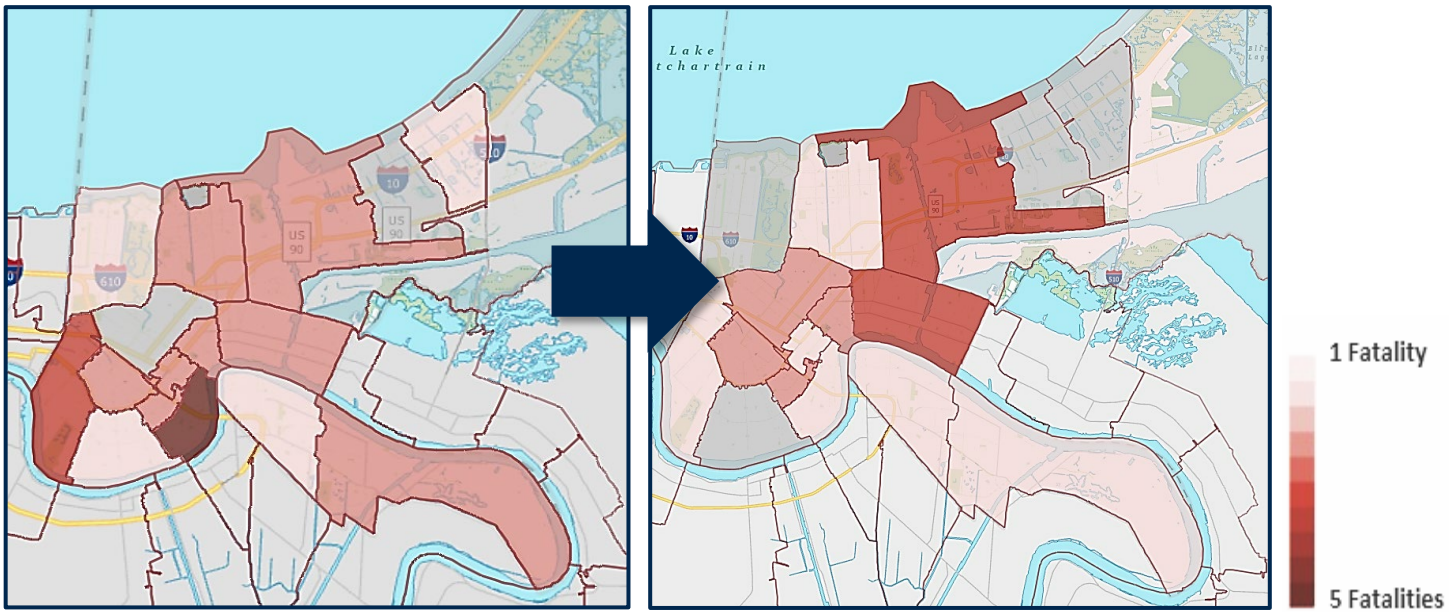


**Figure 6. Comparison of 2023 and 2024 heat-related fatalities by zip code**

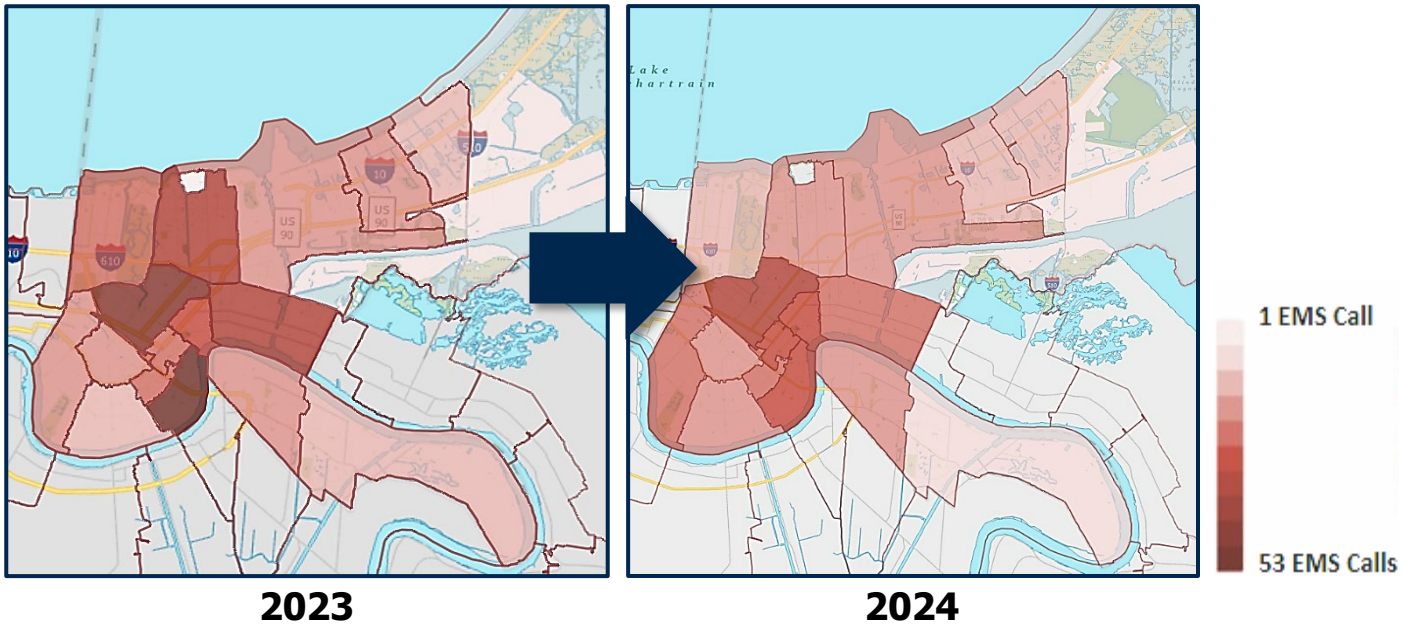


## Heat-Related Calls for Service: Part 1

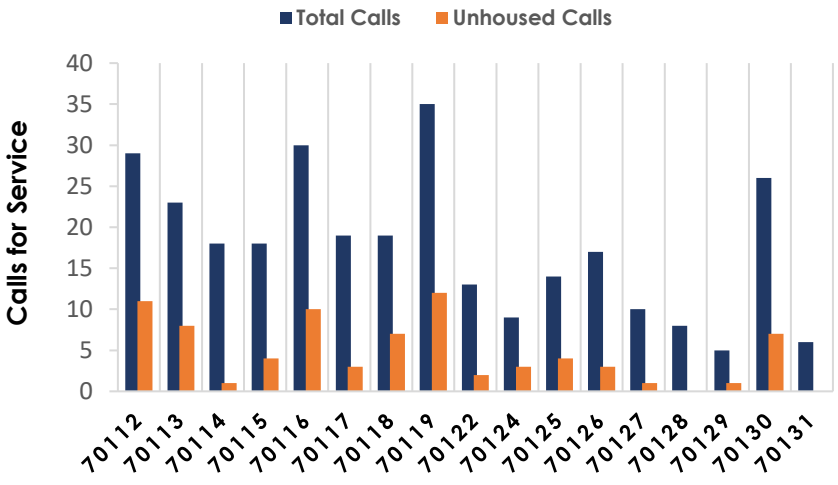
Like the previous figure, Figure 7 shows a comparison of heat-related calls for service (CFS) from 2023 and 2024 when organized by zip code. EMS CFS are a useful metric as a significant number of heat illnesses impact a person's health, but do not result in death. Heat-related CFS are often a better indicator of where people are being exposed to extreme heat compared to emergency department visits and hospitalizations, as the zip code will reflect the location where a person fell ill. When dealing with the later, the zip code is often associated with a home address.

In 2024, the zip code that experienced the greatest number of heat-related CFS was the 70119-zip code, followed by other more central zip codes such as 70116, 70112, and 70130. Of note, the number of CFS in many zip codes decreased from 2023 to 2024, with call density shifting more toward the city's center. Additionally, the 70118-zip code did see a slight increase in the number of heat-related CFS.

**Figure 7. Comparison of 2023 and 2024 heat-related Calls for Service (CFS) by zip code**



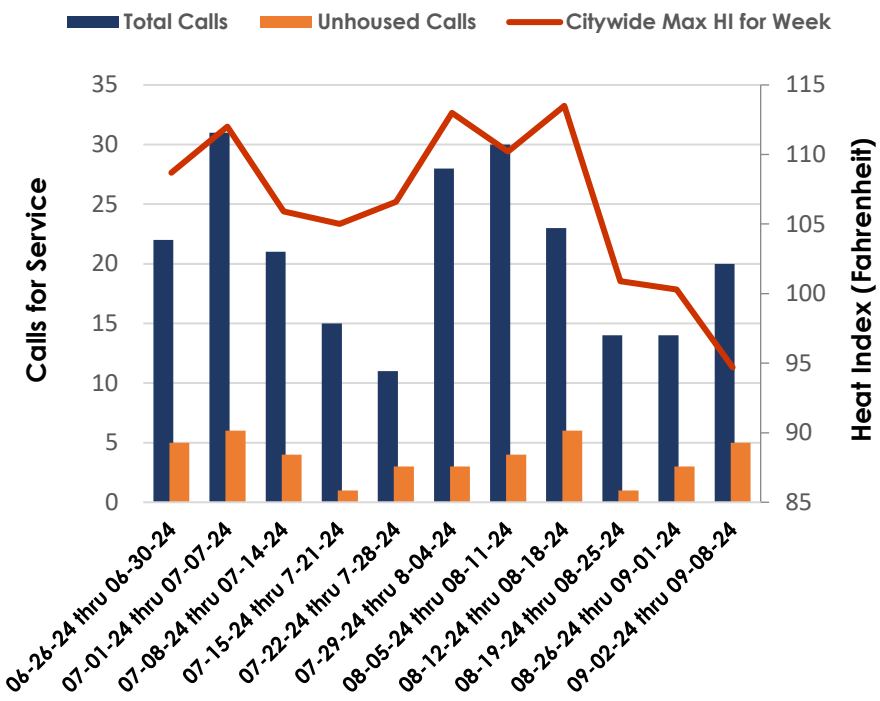

**Graph 4. 2024 heat-related calls for service by zip code**




Graph 4 shows the total number of heat-related CFS by zip code, as well as the portion of the heat-related CFS from unhoused persons. Many zip codes with higher levels of total CFS also had higher levels of CFS from unhoused persons. When CFS from unhoused persons are removed from the total amount, the remaining CFS show similar elevated zip codes to Graph 4. This shows that unhoused persons did not specifically influence which zip codes had higher overall heat-related CFS in 2024.

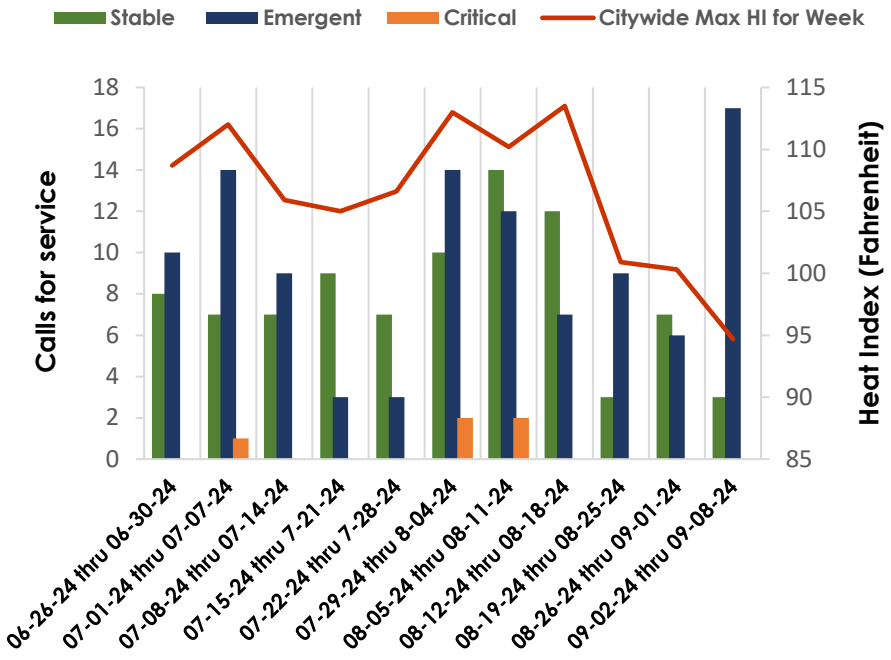
# Heat-Related Calls for Service: Part 2

**Graph 5. 2024 heat-related calls for service by week**




Graph 5 shows the number of heat-related CFS per week compared to an average maximum heat index for each week, taken from the weekly maximum heat index from each WeatherSTEM station. CFS are separated into two columns, total number of calls and calls for people who are unhoused, like Graph 4. While no definitive trends can be determined given the limitations of available data, the weeks with higher numbers of CFS tended to be weeks with higher heat indices. Notably, the week of August 12th had the highest maximum heat index. While the total number of CFS saw a decrease from the previous week, the number of unhoused CFS saw a slight increase, possibly showing a greater sensitivity to extreme heat in this population. Also noteworthy, while the heat index saw a decrease in the last week, both unhoused and total CFS saw an increase from the previous week.

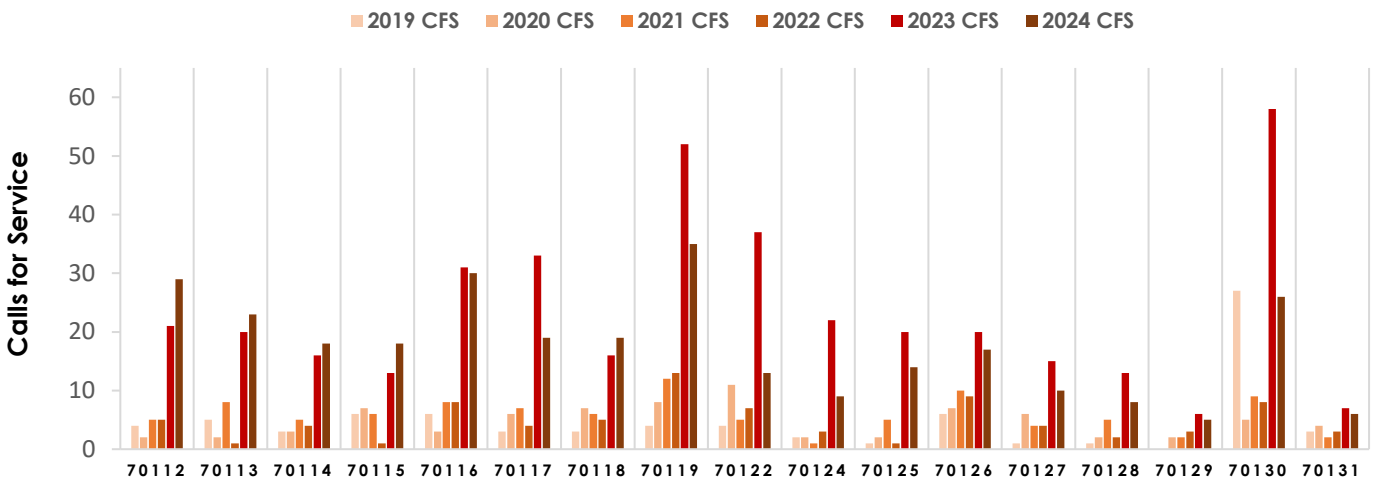
**Graph 6. 2024 reported patient acuity for heat-related calls for service by week**




Graph 6 shows patient acuity for heat-related CFS for each week throughout the summer of 2024, compared to an average maximum heat index for each week, taken from the weekly maximum heat index from each WeatherSTEM station. In this case, patient acuity is organized into three categories stable, emergent, or critical. Again, while no definitive trends can be determined given the limitations of available data, it is notable that the weeks containing CFS with critical patient acuity tended to be weeks that had some of the highest heat indices. Similar to trends in Graph 5, while the last week in the data series had lower heat indices, it had the highest number of CFS with emergent patients.

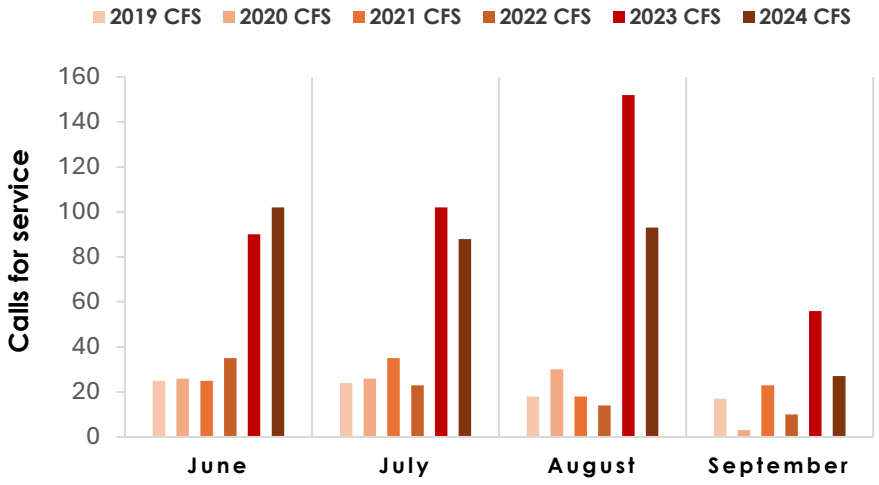
# Heat-Related Calls for Service: Part 3

**Graph 7. Heat-related Calls for Service (CFS) from 2019 to 2024 by zip code**




Graph 7 shows the number of heat-related CFS by zip code over the last five years, from 2019 to 2024. Overall, the number of CFS have risen each year from 2019 to 2023, with the highest number of CFS occurring in 2023. Compared to 2023, most of the zip codes had less CFS in 2024. However, certain zip codes did see a slight increase in the number of CFS from 2023 to 2024, which can be seen in the graph above, but also geographically on the map in Figure 7. Geographical variations in the number of CFS each year can be cause by a variety of factors. The main factor is how high the temperature was that year, particularly for each given zip code. It is important to note that neighborhood-level temperatures can be monitored through the **WeatherSTEM stations** located around the city. However, there are also many social vulnerability factors that can impact the number of CFS in each zip code. Some examples include larger homeless encampments within a certain zip code, access to shade and transportation, and the amount of foot traffic, particularly in people who are unacclimatized to New Orleans heat, like tourists.

**Graph 8. Heat-related Calls for Service from 2019 to 2024 by month**




Graph 8 shows heat-related calls for service (CFS) by month over the last five years, from 2019 to 2024. While 2023 saw a clear increase in the number of CFS from June to August, other years, including 2024, do not show a clear increase in the number of CFS from month to month. Most years, however, do show that the number of CFS will decrease in the month of September.

# New Data Sources for Heat-Related Demographic Data

## Healthy Homes Ordinance and Extreme Heat: Part 1

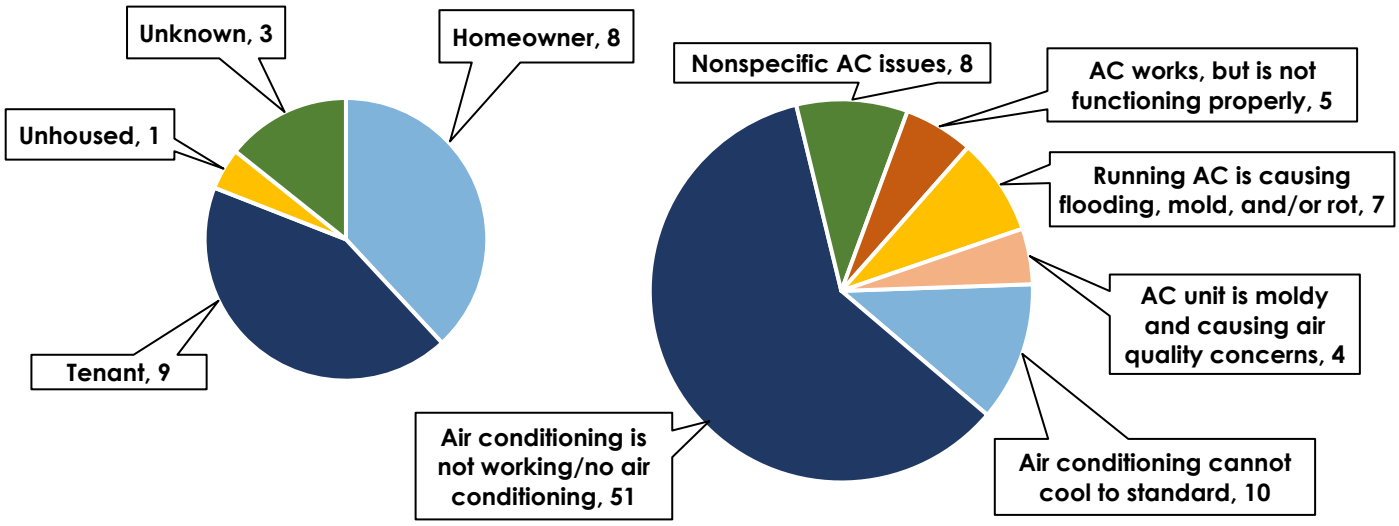
**Table 4. AC-related healthy homes complaints filed in 2024**

| AC-related healthy homes complaints in 2024 | Complaints |
|---|---|
| **Total number of complaints** | **103** |
| Complaints involving elderly tenant | 9 |
| Complaints involving tenant with children | 10 |
| Complaints with tenant who have access and functional needs | 5 |
| **Number of Unique Addresses with AC-related Complaints** | **89** |

The City of New Orleans launched the Healthy Homes Ordinance in January of 2024. Heating and cooling standards for rental housing units leased for occupancy are included as part of the Healthy Housing Ordinance. The ordinance created a reporting mechanism for renters to report substandard housing to the city through 3-1-1. Complaints that mentioned air-conditioning-related concerns were pulled out, and the narrative section of the complaint was analyzed for key words. The total number of complaints for the 2024 year amounted to 103, when duplicate complaints were eliminated, there were 89 unique air conditioning-related complaints associated with different addresses across the city. Nine of these complaints mentioned elderly tenants residing in the home, 10 complaints mention homes with children, and five complaints mentioned homes with a tenant who had access and functional needs. The air conditioning-related complaints were also grouped into categories by characteristics, as seen in Graph 9. Most of the time, the narrative mentioned air conditioning that was not working. Some of the time, however, the narrative mentioned issues that were caused by running the AC or an inability for the air conditioning unit to adequately cool the home. Finally, the 21 heat-related fatalities were organized by housing status in the graph below (Graph 8.), showing that heat fatalities occurred among both tenants and homeowners most commonly in the 2024 year.

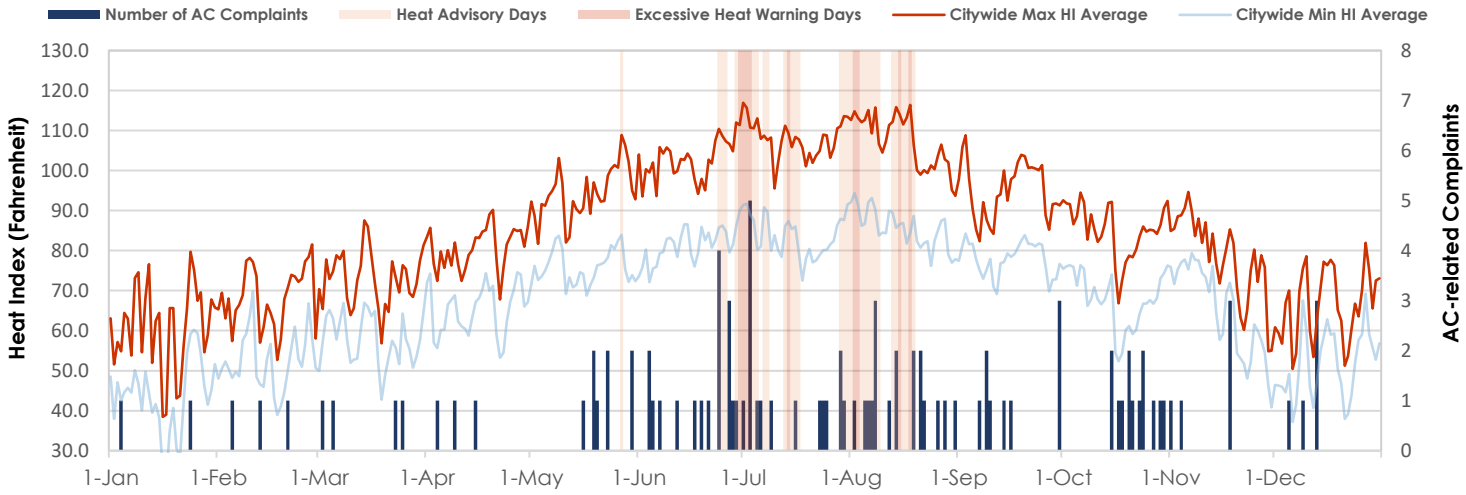
**Graph 8. 2024 heat-related fatalities by housing status (left)**

**Graph 9. Characteristics of unique AC-related healthy homes complaints (Right)**



# Healthy Homes Ordinance and Extreme Heat: Part 2

**Graph 10. AC-related complaints compared to max. HI, min. HI, and NWS heat-related weather alerts**

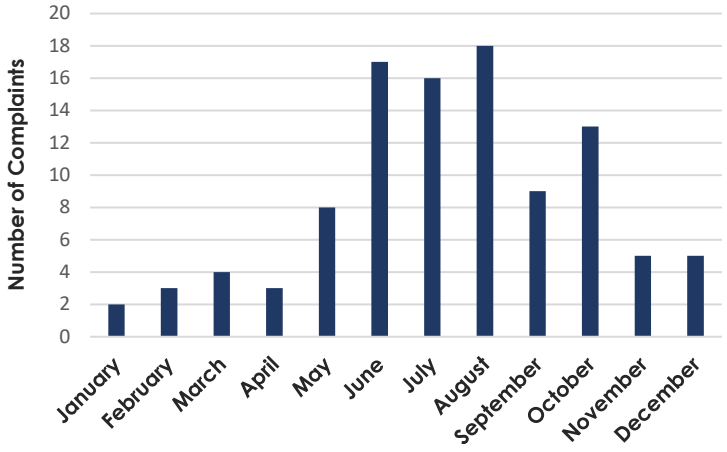



Graph 10 shows the connection between the total number of air conditioning-related 3-1-1 complaints logged, the heat-related weather alerts issued by the NWS, and the average maximum and minimum heat index for a given day. The day with the highest number of air conditioning-related complaints (July 3) did align with the day where the maximum average heat index was the highest.

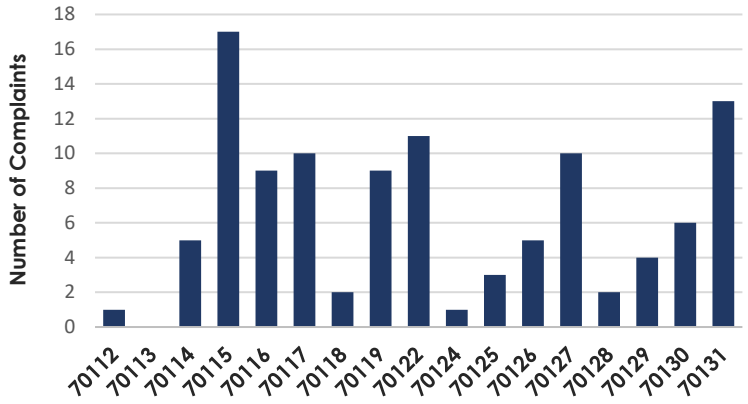
Graph 11 shows the number of 3-1-1 complaints organized by month. This graph reinforces the idea that the peak heat months (June, July and August) experience the greatest number of air-conditioning-based complaints.

Graph 12 shows that the 70115 zip code had the greatest number of complaints, followed by the 70131 zip code. Overall, complaints related to air conditioning were relatively spread out across the city. Heat-related morbidity and mortality data was more central and did not align with zip codes that experienced the greatest number of complaints related to air conditioning.

**Graph 11. Number of AC-related complaints by month**

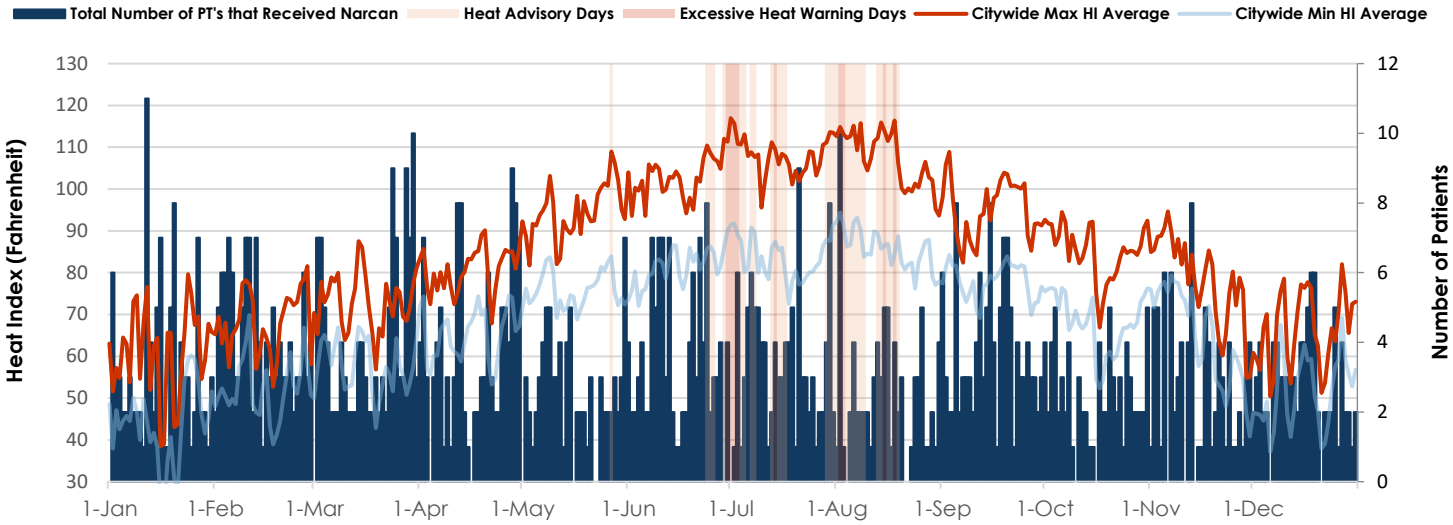



**Graph 12. Number of AC-related complaints by zip code**



# Narcan Use and Extreme Heat

**Graph 13. AC-related complaints compared to max. HI, min. HI, and NWS heat-related weather alerts**




Graph 13 shows daily naloxone administration across the New Orleans Police Department, New Orleans Fire Department, and New Orleans Emergency Medical Services with heat-related weather alerts issued by the National Weather Service and the average maximum and minimum heat index for that given day. This graph is similar in structure to the previous graph depicting heat-related fatalities (Graph 1). Visually, there does not appear to be a relationship between the two.

Table 5 shows the comparison of different circumstances in which patients received naloxone for the entire year, with the period where the maximum heat index stayed consistently above 90°F, which was May 19 to September 5. This period from May 19 to September 5 makes up about 30% of the year. Looking at the percent of patients receiving naloxone during this time, there was not an uneven burden of patients during the summer months. The two circumstances that stand out as having a slightly higher burden of patients during the summer months are opiate-related cardiac arrests and medical-related cardiac arrest with naloxone administration. These are two metrics to consider tracking in future years.

**Table 5. Categorized mental health calls in summer months compared to calls for 2024 year**

| | Entire Year | May 19- Sept 5 | Summer Percentage |
|---|---|---|---|
| Opiate-related Cardiac Arrest | 15 | 6 | 40% |
| Medical-related Cardiac Arrest w/Narcan Admin | 11 | 6 | 55% |
| Admits to Opiate Use | 503 | 145 | 29% |
| No Evidence of Opiates | 0 | 0 | N/A |
| Suspected Opiate Usage | 66 | 184 | 28% |
| NOPD Administered Narcan | 36 | 12 | 33% |
| NOFD Administered Narcan | 273 | 83 | 30% |
| Bystander Administered Narcan | 212 | 55 | 26% |
| Patient Left Against Medical Advice (AMA) | 211 | 55 | 26% |
| Greater than 4mg of Narcan Administered | 116 | 29 | 25% |
| **Total Number of Patients that Received Narcan** | **1200** | **346** | **29%** |

# Mental Health and Extreme Heat

**Graph 14. Total number of mental health calls by month**

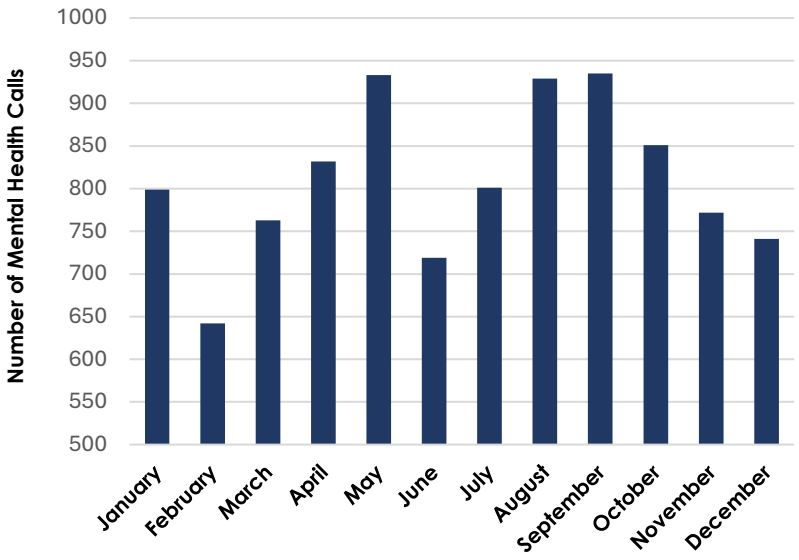



**Table 6. Categorized mental health calls in summer months compared to calls for 2024 year**

| | Total | MCIU | NOPD | 103M | 29ST | 29SA | 29S |
|---|---|---|---|---|---|---|---|
| Calls for Entire Year | 9717 | 3739 | 5978 | 4619 | 829 | 404 | 34 |
| Calls June through August | 2449 | 963 | 1486 | 1157 | 218 | 91 | 6 |
| Summer Percentage | 25% | 26% | 25% | 25% | 26% | 23% | 18% |

Graph 14 shows the total number of 911 calls coded for mental health organized by month. In 2024, the months of May, August, and September experienced the greatest number of mental health calls, each having around 930 calls. While August is usually the hottest month out of the year, and May and September are considered "shoulder months" for extreme heat, this data does not guarantee a connection between extreme heat and mental health strain. There are a variety of factors that can impact someone's mental health and many of them coincide with periods of extreme heat. More in-depth studies, looking at many years' worth of data can better determine correlation. A recent study conducted by Tulane University looking at extreme heat and domestic violence-related calls to law enforcement is a good example of this further exploration [21]. The data above, however, serves as a marker of year-to-year changes in mental health, allowing for trends to be determined as more data is added each year. While the data does not show a definitive correlation between heat and mental health, more resources for mental health-related response should be considered for peak call months and mental health calls should still screen for possible heat-related impacts.

Table 6 shows the comparison of mental health calls for the entire year, with the mental health calls made during summer months. The summer calls made up around 25% of total calls made in 2024 for most of the categories. When considering the constraints of peak heat months (June through August) which makes up 25% of the year, there was not an uneven burden of mental health calls during summer months when compared to the rest of the year.

# Recommendations

## New Orleans Citywide Heat Action Plan

Led by the Office of Sustainability, in partnership with the New Orleans Department of Health & Human Services and Hazard Mitigation Office, the city is creating a Heat Action Plan to help protect our city. This plan will show where heat is the worst, who is most affected, and what we can do to keep people safe.

The Heat Action Plan will:

- Show where the hottest areas are in New Orleans
- Explain how extreme heat affects our health, homes, and streets
- Recommend steps the city can take to cool neighborhoods
- Lift up community voices
- Help guide future funding and projects.

The annual Heat and Health Report will help guide the development of the Heat Action Plan, as well as future modifications and/or revisions of the plan going forward.

**Stay Up to Date on the Heat Action Plan Here**

To see plan progress and to view the completed tasks, please visit **nola.gov/heatplan** or scan the QR code above.

## Individual Actions You Can Take This Summer

- **Know the personal risks** that can make you more vulnerable to extreme heat and talk to your health care provider to plan for summer heat. Personal risks can include:
  - Age – being over the age of 60 or under the age of 4
  - Pregnancy
  - Managing chronic conditions such as hypertensions, cardiovascular disease, respiratory illness, and mental health issues
  - Taking daily medications
  - Not having access to air conditioning
  - Working or exercising outdoors
  - Recreational drug use
- **Know the signs and symptoms of heat exhaustion and heat stroke** and make sure the vulnerable people in your life are aware as well. Signs and symptoms include:
  - Heat stroke – high body temperature (103°F or higher); fast strong pulse; hot, red, dry, or damp skin; headache, dizziness, nausea, confusion; loss of consciousness

- Heat Exhaustion – heavy sweating, cold, pale, clammy skin; dizziness, headache, nausea, or vomiting; muscle cramps; tiredness or weakness; loss of consciousness

- **Know what to do in an emergency:**
  - Heat stroke is a medical emergency, and you should call 911 right away!
  - While waiting for emergency medical services to arrive you can move the person to a cool space, apply cool clothes, and put the person in a cool bath if possible.
  - If a cool bath is not possible, pour water on the person and fan them.
- **Make sure to stay hydrated:**
  - Don't wait until you feel thirsty, drink water throughout the day.
  - Drink low sugar, electrolyte drinks in situations where heavy sweating is expected.
  - plan to limit caffeine and alcohol consumption if you plan to be in the heat.
- **Make a plan to stay cool:**
  - Limit outdoor activity and plan to run errands before 11:00AM or after 5:00PM.
  - Wear lightweight, light-colored, loose-fitting clothing and sunscreen.
  - Pace yourself and rest often if you begin to feel unwell.
  - Use more than a fan as your main cooling device.
  - Plan for meals that are light and do not require the stove to prepare.
- **Prepare your home for extreme heat:**
  - Keep windows covered and doors closed during the hottest parts of the day.
  - Focus on cooling rooms where people are present and close off rooms in the house that are unoccupied.
  - Change the filters on your air conditioning units every month.
  - Make sure to set your ceiling fan to counterclockwise.
  - If you rent your home and have concerns about cooling, visit nola.gov/next/heathy-homes/home/ to find out more information about the Healthy Homes Ordinance and how to make a 311 complaint.
- **Make sure to stay informed:**
  - Know where your closest local library is located. Libraries are a good place to escape the heat, refill water bottles, and charge phones. For a map of locations and operating hours visit nolalibrary.org.
  - Sign-up for Smart 911 to share valuable health information with 911 ahead of an emergency. Sign up at nola.gov/smart911 or call 311 to speak to a representative.
  - Make sure you and your loved can recognize what heat illness feels like. If you think you may be experiencing any signs or symptoms related to heat illness, but are not sure it is an emergency, call a loved one and ask if they check in on you frequently until you start to feel better. This can be done in person or by phone.

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