ADAPTATION TO CLIMATE CHANGE IN AFRICA
PLAN OF ACTION FOR THE HEALTH SECTOR
2012-2016

APRIL 2012

PRINTED BY:
WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR AFRICA
BRAZZAVILLE • 2012
CONTENTS

PAGE

ABBREVIATIONS .............................................................................................................. IV
EXECUTIVE SUMMARY ................................................................................................... V

PARAGRAPHS

INTRODUCTION ................................................................................................................. 1–6

FRAMEWORK FOR PUBLIC HEALTH ADAPTATION TO CLIMATE CHANGE ....... 7–28

OBJECTIVES ....................................................................................................................... 8
TARGETS ............................................................................................................................. 9
GUIDING PRINCIPLES ....................................................................................................... 10
PRIORITY INTERVENTIONS AT THE COUNTRY LEVEL .................................................. 11–20
INTERNATIONAL COORDINATED ACTIONS TO SUPPORT
IMPLEMENTATION AT THE COUNTRY LEVEL ............................................................... 21–25
GOVERNANCE ................................................................................................................... 26–27
FINANCIAL IMPLICATIONS ............................................................................................. 28

PLAN OF ACTION 2012–2016 ....................................................................................... 29–32

ANNEXES

PAGE

1. RESOLUTION — AFR/RC61/R2: FRAMEWORK FOR PUBLIC HEALTH
ADAPTATION TO CLIMATE CHANGE IN THE AFRICAN REGION ..................... 19
2. DECISION SS4/1: DECISION ON CLIMATE CHANGE ................................. 22
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMCEN</td>
<td>African Ministerial Conference on Environment</td>
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<td>CCC</td>
<td>Country Coordination Committee</td>
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<td>IRS</td>
<td>Indoor Residual Spraying</td>
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<td>IVM</td>
<td>Integrated Vector Management</td>
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<td>JTT</td>
<td>Joint Task Team for the Health and Environment Strategic Alliance</td>
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<td>LLIN</td>
<td>Long-Lasting Insecticidal Net</td>
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<td>NAP</td>
<td>National Adaptation Plan (of the UNFCCC)</td>
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<td>SANA</td>
<td>Situation Analysis and Needs Assessment</td>
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<td>UNEP</td>
<td>United Nations Environment Programme</td>
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<tr>
<td>UNFCCC</td>
<td>United Nations Framework Convention on Climate Change</td>
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<td>WHO</td>
<td>World Health Organization</td>
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</table>
EXECUTIVE SUMMARY

Ministers of health and ministers of environment Africa have agreed to implement the framework for Public Health Adaptation to Climate Change, through resolution AFR/RC61/R2 of the WHO Regional Committee for Africa, and Decision SS4/1 of the African Ministerial Conference on Environment, both adopted in September 2011. The Plan of Action is a response to the call of ministers to WHO, UNEP, the African Development Banks, the African Union Commission and other development partners to provide technical assistance to countries for implementation, and to facilitate access by African countries to existing climate funds.

The main objective of the Plan of Action is to minimize the adverse public health effects of climate change in Africa. The specific objectives are to identify country-specific health risks associated with climate change in all African countries; strengthen core national capacities that enable health systems to prepare for and effectively respond to climate change threats to human health; facilitate the implementation of essential public health and environment interventions for the management of both acute and long-term health risks resulting from climate change; facilitate operational and applied research on local health adaptation needs and solutions; and disseminate lessons learnt and country experiences in order to facilitate implementation of adaptation strategies in other sectors.

The plan of action is based on Decision CP16 of the UNFCCC COP 16. Countries will implement a set of public health and environment interventions to strengthen their resilience by developing and implementing national action plans for public health adaptation to climate change. These plans will be based on an essential public health package of interventions that would include baseline risk and capacity assessments, capacity building, integrated environment and health surveillance, awareness raising and social mobilization, public health-oriented environmental management, scaling-up of existing public health interventions, strengthening of partnerships and, promotion of research. At the international level, specialized agencies and technical institutions will coordinate their actions to provide guidance, tools and technical support to countries for implementation of the above interventions. An initial estimated budget required for implementation of the plan is USD 1 001 000 000 for a 5-year period.
INTRODUCTION

1. Ministers of health of the WHO African Region met in Yamoussoukro, Côte d’Ivoire from 29 August to 2 September 2011, at the Sixty-first session of the WHO Regional Committee for Africa. They adopted Resolution AFR/RC61/R2 on the Framework for Public Health Adaptation to Climate Change.

2. The Framework for Public Health Adaptation to Climate Change is intended to provide a comprehensive and evidence-based coordinated response of the health sector to climate change adaptation needs of African countries in order to support the commitments and priorities of African governments, within the Cancun Adaptation Framework. Ministers of health resolved to initiate immediately its implementation and requested the Regional Director of WHO:

   - to establish a Pan African Programme for Public Health Adaptation to Climate Change with a view to leveraging and coordinating international-level technical and financial support to Member States;
   - to collaborate with the United Nations Environment Programme and other technical agencies to develop and disseminate for use by Member States, the necessary technical tools required for the immediate implementation of the Framework;
   - to advocate use of the Framework for Public Health Adaptation to Climate Change as the basis for coordinating partners’ actions;
   - to facilitate access by countries to financial resources made available to developing countries, especially climate change funds, to secure the required funding for implementation of the national action plans mentioned above.

3. Ministers of Environment also met in Bamako, Mali, from 15 to 16 September 2011, at the 4th Special Session of the African Ministerial Conference on Environment (AMCEN). They adopted Decision AMCEN/SS4/1 on climate change in which they requested the African Union Commission, the United Nations Environment Programme, the World Health Organisation and other development partners to support the implementation of the framework for public health adaptation to climate change in the African Region adopted by the World Health Organisation Regional Committee for Africa at its Sixty-first session held in Yamoussoukro from 29 August to 2 September 2011 through an appropriate mechanism.

4. It is therefore against the above Resolution and Decision that WHO and UNEP in collaboration with the African Development Bank, the World Meteorological Organization, and other partners have drafted the Plan of Action to catalyze and coordinate public health
adaptation at the national and international levels in Africa for the period 2012–2016. The draft plan was sent to the 46 Member States of the WHO African Region. In every country, teams of national experts from ministries of health, ministries of environment, other national technical institutions and partners met to review and make their comments on the document. A total of 37 countries provided their comments and inputs on the draft Plan of Action. 1

5. Countries welcomed the proposed Plan of Action. They found that the plan covered all major areas of intervention that are required both at national and international levels. They acknowledged that the proposed plan responded to the needs of African countries and recommended flexibility in implementation at the national level. Member States emphasized the need for immediate financial support to initiate implementation of activities. They recognized that the proposed budgets appeared to be responding to expected needs of countries and underlined that allocation should be country-driven to fully reflect the diverse national specificities and needs.

6. A Joint Task Team of WHO, UNEP and the African Development Bank met at the UNEP Headquarters in Nairobi from 26 to 28 March 2012. The team reviewed comments and inputs provided by Member States and produced the final version of the Plan of Action accordingly.

FRAMEWORK FOR PUBLIC HEALTH ADAPTATION TO CLIMATE CHANGE

7. The negative effects of climate change on public health include higher levels of certain air pollutants, increased transmission of diseases from poor water quality, increased vector-borne diseases, disruption of health services, mass casualties and death. To cope with these effects, countries of the African Region have adopted the framework described below.

OBJECTIVES

8. The implementation of the Framework is a joint responsibility of ministries of health, ministries of environment and other relevant ministries, under the context of the Health and Environment Strategic Alliance. The overall objective of the Framework is to guide the formulation of country-specific action plans that will form the health component of national

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climate change adaptation plans, aimed at minimizing the adverse public health effects of climate change in Africa. The specific objectives are:

(a) to identify country-specific health risks associated with climate change in all African countries;
(b) to strengthen core national capacities that enable health systems to prepare for and effectively respond to climate change threats to human health;
(c) to facilitate the implementation of integrated essential public health and environment interventions for the management of both short- and long-term health risks resulting from climate change;
(d) to facilitate operational and applied research on local health adaptation needs and solutions;
(e) to disseminate lessons learnt and country experiences in order to facilitate implementation of adaptation strategies in other sectors.

TARGETS

9. All Member States of the African Region should, as agreed upon in the Joint Statement on Climate Change and Health:

(a) Undertake comprehensive assessments of health and environment vulnerability to climate change by the end of 2012;
(b) Implement an essential public health package to strengthen the climate change resilience status of all the countries by 2014.

GUIDING PRINCIPLES

10. The guiding principles for implementation of the Framework are:

(a) Evidence-based planning: Adaptation measures, strategies and plans deployed on the basis of the results of vulnerability assessments undertaken in various local ecosystems;
(b) Country ownership and community participation: Public health adaptation interventions coordinated by the relevant national government departments, building upon already existing public health and environment programmes, and promoting active involvement of local communities;
(c) **Intersectoral cooperation and collaboration:** Joint implementation of public health adaptation interventions by ministries of health and ministries of environment, engaging other relevant sectors. This will be done in accordance with the Libreville Declaration implementation process which requires multisectoral country coordination committees that are responsible for coordinating intersectoral action at the national level;

(d) **Synergies with other public health initiatives:** Establishment of synergies with existing major public health and environment initiatives being actively promoted on the African continent;

(e) **Advocacy at the national and international levels:** Mainstreaming potential public health impacts of climate change in national policies and plans will be essential in order to implement appropriate adaptation and mitigation measures.

**Priority interventions at the country level**

11. The Framework promotes the deployment of an essential public health package to strengthen resilience to climate change. The package is a set of interventions including comprehensive assessment of the risks posed by climate variability and change to public health and health systems, surveillance, delivery of preventive and curative interventions including preparedness for and response to the public health consequences of extreme weather events and research. The section below provides a brief description of the proposed priority interventions.

12. **Undertake baseline risk and capacity assessments** to establish the vulnerability of existing populations to climate-sensitive health risks and the degree to which health systems can provide effective response and manage these risks. These assessments will serve as an important first step in strengthening health and health-sector resilience to climate change, taking into consideration the risks posed by projected long-term climate change.

13. **Capacity building** based on the needs and gaps identified from the above assessments. The key technical areas of expertise that would require capacity building for climate-change adaptation and resilience will be addressed as specific components of national adaptation programmes.

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14. **Implement integrated environment and health surveillance** to support timely and evidence-based decisions for effective management of environmental risks to human health by forecasting and preventing increases in related ill-health and disease. Integrated environment and health surveillance will be of particular importance in tracking environmental changes that will affect health determinants in the context of national plans of joint actions for implementation the Libreville Declaration.

15. **Undertake awareness raising and social mobilization** using information generated from baseline risk and capacity assessments and from integrated surveillance and response to inform communities about the local-level public health risks of climate change. Appropriate information, education and communication activities including communication for behavioural impact will be undertaken to support community-based adaptation strategies, as they relate to health.

16. **Promote public-health oriented environmental management** to ensure active involvement of public health experts in the development of environmental management interventions to reduce vulnerability. It will also be used to support ecosystem services and to build and sustain natural adaptive resilience against the impact of climate change.

17. **Scale up existing public health interventions** to provide the required coverage for integrated vector management in order to reduce or interrupt the transmission of vector-borne diseases. Increasing household water treatment and safe storage and drinking water quality control and implementing water safety plans will reduce the risks of waterborne diseases especially during droughts or floods. These interventions will also strengthen food hygiene and safety measures to prevent foodborne diseases. Legislation and regulatory instruments will be harmonized and enforced to help achieve substantial reduction in particulate matter in the air and to improve air quality. Countries will also need to identify population subgroups with special nutritional needs and implement interventions for the management of nutritional deficiencies.

18. **Strengthen and operationalize the health components of disaster risk reduction plans** to prevent casualties resulting from the health consequences of extreme weather events. All the required curative interventions will be strengthened especially to manage the acute health impacts of climate change.

19. **Promote research on climate change impacts and adaptation:** a research agenda will be developed and implemented to enhance understanding of the local health effects of climate change and to generate and disseminate knowledge on appropriate local adaptation measures.

20. **Strengthen partnerships and intersectoral collaboration:** implementation of country level plans will require strong intersectoral action between all relevant government sectors, as well as partnerships between governments, WHO, UNEP, UNFCCC, the African Union, the African
Development Bank, Regional Economic Communities and all other relevant partners. The role of intersectoral collaboration and partnerships at national level will be to streamline planning, undertake joint implementation of activities, resource mapping and allocation, as well as joint evaluation of interventions. At the international level, this partnership will be essential for advocacy and resource mobilization.

**INTERNATIONAL COORDINATED ACTIONS TO SUPPORT IMPLEMENTATION AT THE COUNTRY LEVEL**

21. In order to support planning, implementation, monitoring and evaluation of the above interventions at the national level, specialized organizations and technical institutions will coordinate their actions for technical assistance. These actions will focus in priority on planning, capacity strengthening, implementation, monitoring and evaluation as well as research.

22. Guidance provided by the subsidiary bodies of the UNFCCC will serve as the basis to support countries to prepare their national action plans for public health adaptation to climate change as components of their National Adaptation Plans (NAPs). Following the needs assessment exercises undertaken by countries, an African capacity building framework for public health and climate change adaptation as well as a specific plan of action will be prepared. Relevant institutions within and outside the continent will be identified, and operating mechanisms for direct assistance of these institutions to various countries established.

23. Direct technical assistance for implementation of national action plans by specialized organizations and technical institutions will be promoted and supported. To this end, specialized networks by specific areas of expertise (safety of drinking water, air pollution, vector control, nutrition and food safety, etc.) will be established. Such networks will be responsible for developing harmonized guidance, supporting implementation, sharing of information, and research.

24. WHO, UNEP and other relevant agencies will collaborate in the preparation of a monitoring and evaluation framework. The framework will ensure harmonization of procedures and comparability of results. The framework will be based on a set of standardized outcome and impact indicators and procedures to track the implementation and impact of national adaptation programmes.

25. At the regional level, progress in the implementation of this Framework will be tracked using the following indicators:

   (a) number of countries that have developed or updated the health component of their NAPs on the basis of this Framework;
(b) number of countries that have completed comprehensive assessments of the risks posed by climate variability and change;
(c) number of countries that are implementing integrated environment and health surveillance;
(d) number of countries that have formulated specific capacity-building action plans for public health adaptation to climate change; and
(e) number of countries reporting reduced morbidity and mortality attributable to climate variability and change.

GOVERNANCE

At the country level

26. At the Second Interministerial Conference on Health and Environment in Africa that was held in Luanda, Angola in November 2010, ministers of health and ministers of environment have decided to institutionalize Country Coordination Committees (CCC) for the implementation of the Libreville Declaration. The CCCs are intended to be the national technical and advisory entities to address health and environment issues, including climate change. They are to be multisectoral, multidisciplinary and representative of all relevant ministries; they have to include government representatives, development partners and civil society. In every country initiating implementation of the Plan of Action, CCCs will need to be established to coordinate preparation, implementation, monitoring and evaluation of national plans of action. The country action plan will represent the health components of the NAP for the UNFCCC. National networks of experts will be formed to provide scientific backstopping and technical support, particularly in vulnerability assessment, surveillance and research. A national consortium of climate-change and health partners will help to establish close collaboration and coordination among ongoing public health and environment programmes, particularly in the areas of surveillance, malaria, other vector-borne diseases, and waterborne diseases.

At the international level

27. A programme steering committee will be established and will include country and representatives of technical institutions and specialized agencies. The steering committee will ensure overall coordination, provide guidance for implementation, undertake advocacy and support resource mobilization and allocation. The work of the steering committee will be
supported by a Technical Advisory Committee of climate change and public health experts. The Joint Task Team for the Health and Environment Strategic Alliance will serve as the Secretariat to the above bodies.

**FINANCIAL IMPLICATIONS**

28. In every country, a number of public health and environment programmes are already being implemented (ongoing activities), in a way that contributes to the management of existing risk factors. These activities should be strengthened with supplementary activities to enhance resilience to climate change. An assessment of the financial resources required for supplementary activities has been undertaken in selected countries of the African Region. It was found that these supplementary activities would require a minimum average investment of US$ 0.15 per capita per year.³

3. **PLAN OF ACTION 2012–1016**

29. Activities are grouped in two categories: ongoing and supplementary. Ongoing activities already exist and are being implemented in various public health and environment programmes; they contribute to the management of existing risk factors. Supplementary activities further support resilience and public health adaptation to climate change. They are the focus of this Plan of Action.

30. The plan has seven main components as follows: (i) risk and capacity assessments, (ii) capacity-building, (iii) integrated environment and health surveillance, (iv) response, (v) research, (vi) monitoring and evaluation, and (vii) coordination and management.

31. Table 1 lists activities to be implemented by countries. These activities will need to be reviewed by relevant national authorities and programmes to adapt them to their respective situation, during the national planning process. The tentative budget proposed is based on a required a minimum average investment of US$ 0.15 per capita per year for supplementary activities. Table 2 provides activities for technical assistance by international partners, in support of countries, and according to their anticipated needs. Table 3 and Table 4 indicate an initial estimated budget for implementation of activities at the country level and at the international level respectively. The Gantt Chart in table 5 highlights the timelines of country level operations. Each country will adapt the chart depending on its specific situation. It is however recommended that countries complete the preparation of their action plans before end of 2013.

32. The estimates in table 3 provide an indication of the resources needed at the continental level to implement the Plan of Action. These estimates are based on per capita figure of USD 0.15 per year. Resources currently available through global health initiatives and other public health programmes contribute to climate change adaptation. However, these resources remain largely insufficient to strengthen countries’ resilience. It is expected that each country will prepare its own budget in relation to its specific situation, based on national priorities. However, it is recommended that at the onset of the national adaptation processes, the following components be given high priority: planning, vulnerability and capacity assessments, capacity building and integrated environment and health surveillance. This latter component will be the backbone of country resilience, by providing the necessary evidence base for appropriate management of climate sensitive environmental risk factors to health.
### Components and expected results

<table>
<thead>
<tr>
<th>Components and expected results</th>
<th>Ongoing activities (with their limitations where applicable)</th>
<th>Supplementary activities to support adaptation</th>
</tr>
</thead>
</table>
| **Preparation of national action plans** | • Preparation of national climate change response strategies  
• Implementation of projects under the Africa Adaptation Programme  
• Development of national plans of joint actions for implementation of the Libreville Declaration | • Designate national focal points at ministries of health  
• Undertake national consultations with stakeholders  
• Prepare a draft action plan  
• Participate in regional workshops for peer review and finalization |
| **Expected Results:**  
All African countries have prepared a national action plan for public health adaptation to climate change | | |
| **Component 1: Risk and capacity assessments** | • Assessment of climate change sensitive risks  
• Technology needs assessment for climate change  
• Implementation of Situation Analysis and Needs Assessment for implementation of the Libreville Declaration (SANA)  
• Preliminary studies on the effect of climate change on some climate sensitive risks/conditions  
• Limited vulnerability assessments | | |
| **Expected results:**  
• Climate-sensitive environmental risk factors to human health identified and risk levels determined  
• Baseline situation of national capacities for the sound management of identified risks established  
• Gaps in core capacities identified | | |
| **Component 2: Capacity-building** | • Implementation of national sectoral plans of action for strengthening national capacities: health, education, water, transport, justice, finance, agriculture, housing, transport, energy, rural development, etc.  
• Meteorological early warning systems modelling | | |
| **Expected result:**  
National core capacities for the sound management of public health risks related to climate change made available | | |
| | | |
### Table 1: Components, expected results and activities at the country level (continued)

<table>
<thead>
<tr>
<th>Components and expected results</th>
<th>Ongoing activities (with their limitations where applicable)</th>
<th>Supplementary activities to support adaptation</th>
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</thead>
</table>
| **Component 3: Integrated environment and health surveillance** | • Sub-optimal performance of the national health information management system  
• Integrated surveillance of some climate-sensitive diseases  
• Ad hoc and limited surveillance of certain climate-sensitive environmental risk factors: water quality, air quality in some areas  
• Early-warning system for management of environmental climate-sensitive risk factors in limited areas  
• Health Management Information Systems being strengthened | • Undertake country-wide integrated surveillance of all identified climate-sensitive risk factors  
• Integrate surveillance of all climate-sensitive diseases  
• Develop a platform to integrate, interpret and disseminate data from environmental and disease surveillance  
• Establish/strengthen and use early-warning systems for the management of climate-sensitive risk factors  
• Set up a platform for validation and exchange of information related to the integrated environment and health surveillance system  
• Implement the Global Framework for Climate Services  
• Undertake additional surveys to supplement integrated disease surveillance and response |

**Expected result:**  
• Timely, evidence-based decisions are taken for the sound management of public health risks related to climate change

| **Component 4: Response** | • Ad hoc environmental management with public health objectives  
• IVM activities mostly limited to malaria vectors; IRS in limited areas; distribution of LLINs to children and pregnant women  
• Awareness raising and educational activities for treatment and conservation of drinking water, through promotion of hygiene and sanitation  
• Limited enforcement of regulations related to air quality, promotion of improved cooking stoves, promotion of low carbon release transportation means | • Establish mechanisms for effective participation of experts from ministries of health and other public health institutions in environmental management activities of other relevant sectors, especially planning, implementation, monitoring and evaluation of environmental management interventions that will result in reducing exposure to environmental risk factors related to climate change  
• Plan, implement, monitor and evaluate IVM activities for climate-sensitive vector-borne diseases, including expansion of IRS, distribution of LLINs, and environmental management for control of disease vectors  
• Intensify awareness raising and community education for point-of-use water conservation and treatment, and implementation of national water safety plans |

**Expected result:**  
• Reduced public health impact of climate change
Components and expected results | Ongoing activities (with their limitations where applicable) | Supplementary activities to support adaptation
---|---|---
**Component 4: Response**  
**Expected result:**  
- Reduced public health impact of climate change
- Vitamin A supplementation in children under 5 years; promotion of breastfeeding; social mobilization for improved nutrition in schools; establishment of a national agency for food security
- Updating of national contingency action plans in relation to environmental emergencies including climate-change induced disasters, management of the intersectoral coordination committee on disasters and emergencies
- Inadequate waste management
- Insufficient diagnosis and treatment of climate sensitive conditions
- On-going adaptation projects in some coastal areas
- Update of national norms on air quality; enforcement of existing regulations on air quality; expanded promotion of improved cooking stoves, modern cooking devices, and cleaner means of transportation
- Strengthen food security activities; extend Vitamin A supplementation activities
- deploy social mobilization interventions for safe nutrition; strengthen food safety programmes as well as promotion of breastfeeding
- Establish/strengthen national poisons centres
- Include and implement climate-related disaster risk reduction interventions in the context of national disaster reduction plans; strengthening of national disaster management intersectoral coordination committee
- Strengthen early diagnosis and adequate treatment of climate sensitive conditions
- Undertake health promotion to cover climate change issues
- Develop legislation on climate change and health
- Develop interventions for management of heat stress
- Strengthen and enforce regulations on climate change and health
- Review and update relevant public health programmes to take into consideration climate change adaptation
- Ensure early warning (provide relevant meteorological information for seasonal weather predictions)

**Component 5: Research**  
**Expected result:**  
- Local knowledge on climate health-risks factors, their management and indigenous adaptation strategies documented and disseminated
- Research undertaken by multiple institutions, but uncoordinated and with limited use of results
- Harnessing of indigenous knowledge
- Develop and implement a research agenda on climate change and health
- Coordinate research activities; establish databases on climate change and health information and expertise
- Establish national climate-change knowledge-management networks
- Promote community participation in knowledge acquisition and dissemination
- Strengthen national research institutions
- Review/update research already performed in relation to public health adaptation to climate change
- Establish research and policy dialogue
- Disseminate and use of research findings for policy making
<table>
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<tr>
<th>Components and expected results</th>
<th>Ongoing activities (with their limitations where applicable)</th>
<th>Supplementary activities to support adaptation</th>
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</thead>
</table>
| **Component 6: Monitoring and evaluation** | Monitoring and evaluation of national disease control programmes as well as national action plans for environment protection  
National communication to UNFCCC |  
Develop process, result and impact indicators for the programme at national and international levels  
Prepare and implement monitoring and evaluation procedures and annual work plans  
Undertake supervision |
| **Expected results:**  
- Programme implemented effectively and in timely manner  
- Process, result and impact indicators of the programme assessed, documented and disseminated  
- Annual progress reports |  
Country Task Teams for the implementation of the Libreville Declaration  
Fragmented ad hoc resource mobilization |  
Strengthen country coordination committees  
Recruit and deploy additional staff in programmes  
Recruit and deploy consultants (National and international)  
Provide logistics and communications  
Promote inter-country experience sharing and information exchange  
Undertake systematic and comprehensive resource mobilization activities to support national action plan by preparing and submitting proposals to access climate change funding  
Organize national advisory stakeholders forum |
| **Component 7: Management and coordination** |  |  |
| **Expected result:**  
- Programme expected results are achieved |  |  |
### Table 2: Components, expected results and activities at the international level

<table>
<thead>
<tr>
<th>Components and expected results</th>
<th>Supplementary activities to support adaptation</th>
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<tbody>
<tr>
<td><strong>Preparation of National Action plans</strong></td>
<td>• Finalize and disseminate guidelines for planning</td>
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<tr>
<td><strong>Expected Result:</strong></td>
<td>• Organize sub-regional planning workshops</td>
</tr>
<tr>
<td>Guidance, tools and technical support available to countries for preparation of national action plans</td>
<td>• Strengthen collaboration between national and international experts</td>
</tr>
<tr>
<td><strong>Component 1: Risk and capacity assessments</strong></td>
<td>• Support national planning activities</td>
</tr>
<tr>
<td><strong>Expected result:</strong></td>
<td></td>
</tr>
<tr>
<td>Guidance, tools and technical support available to countries to undertake risks and capacity assessments</td>
<td></td>
</tr>
<tr>
<td><strong>Component 2: Capacity-building</strong></td>
<td>• Design tools for baseline capacity assessments</td>
</tr>
<tr>
<td><strong>Expected result:</strong></td>
<td>• Undertake pilot testing of tools, finalize and disseminate to countries.</td>
</tr>
<tr>
<td>Guidance, tools and technical support available to countries to strengthen their capacities for public health adaptation to climate change</td>
<td>• Provide technical assistance to countries to undertake risk and capacity assessments</td>
</tr>
<tr>
<td><strong>Component 3: Integrated environment and health surveillance system</strong></td>
<td>• Undertake a systematic identification of institutions working on climate risks</td>
</tr>
<tr>
<td><strong>Expected result:</strong></td>
<td>• Prepare, facilitate endorsement and disseminate a framework for capacity strengthening</td>
</tr>
<tr>
<td>Guidance, tools and technical assistance available to countries to track environmental changes driven by climate change and their associated public health impacts</td>
<td>• Coordinate development, testing, finalization and dissemination of capacity building tools.</td>
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<td></td>
<td>• Coordinate technical assistance for national capacity building</td>
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<td>• Facilitate networking among institutions working on climate change risks</td>
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<td></td>
<td>• Develop, field test and roll out a set of standardized indicators for integrated surveillance of environment risk factors and associated health effects</td>
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<tr>
<td></td>
<td>• Develop and validate standardized tools and protocols for data collection, collation, analysis and interpretation</td>
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<td></td>
<td>• Identify relevant national institutions and strengthen their capacities, including skills and infrastructures to apply the above tools to generate the required information for decision makers and project managers</td>
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<td></td>
<td>• Generate on a regular basis state of environment and health reports</td>
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<td></td>
<td>• Establish a coordination mechanism to share information related to the implementation of multilateral environmental agreements of particular interest to human health as well as management of trans-boundary environmental issues of relevance to human health</td>
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<tr>
<td></td>
<td>• Mechanism to share information on the implementation of multilateral environmental agreements related to health and trans-boundary issues</td>
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</table>
### Component 4: Response

**Expected result:**
Guidance, tools and technical assistance available to countries to mitigate identified public health impacts associated with climate change.

- Provide adequate support to countries to undertake a review of climate-sensitive disease prevention and control programmes to identify gaps in adaptation actions (Identification and support regional and national centres of excellence).
- Provide country-specific recommendations to update above programmes in order to strengthen adaptation measures as required.
- Provide technical assistance to scale-up public health and environment interventions in response to increased health risks associated with climate change.
- Undertake advocacy towards donors to increase resource allocations to country programmes with a view to containing increased climate risks.
- Support Small Island Developing States

### Component 5: Research

**Expected result:**
Guidance, tools and technical support available to countries to undertake the necessary research on climate change and health

- Support identification of research priorities through the World Health Assembly and the regional committees of WHO.
- Support prioritization of specific research topics within national adaptation plans.
- Establish a regional coordination mechanism to support communities of practice and develop a roster of African researchers on health and climate change issues.
- Create/strengthen existing networks by supporting inclusion and coordination of research undertaken on health and climate change.
- Organize a regular African Conference on health adaptation to climate change.

### Component 6: Monitoring and Evaluation

**Expected result:**
Guidance, tools and technical support available to countries to undertake monitoring and evaluation of their national action plans on public health adaptation to climate change.

- Organize a set of technical consultations to develop a monitoring and evaluation framework.
- Organize a set of technical consultation to agree on specific risks factors on which to develop indicators and methodologies (outcome and impact), assessment methodologies and protocols.
- Provide technical assistance to countries to implement the framework.

### Component 7: International Coordination

- Establish and support the functioning of the Steering Committee and the Technical Advisory Committee.
- Establish and support the functioning of inter-agency technical support teams.
- Support the functioning of the JTT.
- Support the organization of interministerial conferences.
- Undertake required advocacy and communications activities.
- Coordinate evaluations at the international level.
### Table 3: Initial estimated expenditures by component and by year for countries (in US dollars)

<table>
<thead>
<tr>
<th>Programme component</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>Total</th>
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### Table 4: Initial estimated expenditures by component and by year for international assistance (in US dollars)

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<th>Programme component and % of total budget</th>
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<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>Total</th>
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Table 5: GANT Chart

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<td>Risk and capacity assessments</td>
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ANNEXES
ANNEX 1

RESOLUTION

AFR/RC61/R2: FRAMEWORK FOR PUBLIC HEALTH ADAPTATION TO CLIMATE CHANGE IN THE AFRICAN REGION

The Regional Committee,

Having examined Document AFR/RC61/10 entitled “Framework for Public Health Adaptation to Climate Change”;

Concerned that Africa is already experiencing the effects of climate change which exacerbate traditional and emerging environmental risk factors on human health, threaten health development, jeopardize decades of development gains and hamper the continent's efforts to attain the Millennium Development Goals;

Noting that countries of the African Region are currently the most vulnerable to the negative impacts of climate change and, at the same time, the least prepared to respond effectively to these impacts;

Recognizing that there is currently a lack of an integrated health sector response to address climate change adaptation comprehensively;

Aware that so far, public health impacts of climate change are still not adequately reflected in the negotiations of the United Nations Framework Convention on Climate Change (UNFCCC);

Recalling the Libreville Declaration on Health and Environment in Africa (2008) which establishes a strategic alliance between the health and environment sectors as the basis for plans of joint action;

Recalling also the African Ministers of Health and Environment Joint Statement on Climate Change and Health adopted at the Second Interministerial Conference on Health and Environment in Africa which was held in Luanda, Angola, in November 2010.

Considering the recommendations of the 5th Conference of African Union Ministers of Health held in Windhoek, Namibia in April 2011.

1. APPROVES the Framework for Public Health Adaptation to Climate Change in the African Region.
2. **URGES** Member States:

(a) to strengthen their resilience by developing and implementing national action plans for public health adaptation to climate change. Such plans will be based on an essential public health package of interventions that would include baseline risk and capacity assessments, capacity building, integrated environment and health surveillance, awareness raising and social mobilization, public health-oriented environmental management, scaling-up of existing public health interventions, strengthening of partnerships and, promotion of research;

(b) to establish the relevant intersectoral coordination mechanisms, as agreed upon at the second Interministerial Conference on Health and Environment in Africa held in Luanda, Angola in 2010, in order to undertake joint planning and implementation of activities required for public health adaptation to climate change, in the context of the Health and Environment Strategic Alliance;

(c) to request African negotiators of the UNFCCC to use this Resolution as the common position of the Ministers of Health of the African Region on matters related to public-health impacts of climate change.

3. **REQUESTS** the Regional Director:

(a) to establish a Pan African Programme for Public Health Adaptation to Climate Change with a view to leveraging and coordinating international-level technical and financial support to Member States for implementation of the above-mentioned actions;

(b) to collaborate with the United Nations Environment Programme and other technical agencies to develop and disseminate for use by Member States, the necessary technical tools required for the immediate implementation of the Framework;

(c) to advocate use of the Framework for Public Health Adaptation to Climate Change as the basis for coordinating partners actions;

(d) To ensure the participation of the WHO Regional Office for Africa at the 17th Conference of the Parties of the United Nations Framework Convention on Climate Change to be held in South Africa;
(e) to facilitate access by countries to financial resources made available to developing countries, especially climate change funds, to secure the required funding for implementation of the national action plans mentioned above;

(f) to report to the Sixty-second Session of the Regional Committee, and thereafter, every other year on progress being made.
ANNEX 2

DECISION SS4/1: DECISION ON CLIMATE CHANGE

*We African Ministers of Environment,*

*Having met* in Bamako from the 15 to 16 September 2011 at the fourth special session of the African Ministerial Conference on the Environment;

*Welcoming* decisions of the African Union Assembly at its seventeenth ordinary session held in Malabo 30 June to 01 July 2011 on Africa’s preparation for the seventeenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the seventh Meeting of the Parties to the Kyoto Protocol. Further welcoming Decision 257 (XIII) of the African Union Assembly on the African common position on climate change including the modalities of the representation of Africa to the World Summit on Climate Change;

*Recalling* paragraph 3 of Decision 525 (XV) of the Executive Council which requested the African Union Commission, in collaboration with partners, to elaborate a comprehensive African strategy on climate change, including development of sector technical back-up data on the impacts of climate change, its cost to the economy and the amount of carbon sequestered in various African ecosystems;

*Recalling* paragraph 4 of Decision 375 (XVII) which urges the Committee of African Heads of State and Government on Climate Change to convene a meeting to consider and take forward the African common position on climate change to the seventeenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the seventh Meeting of the Parties to the Kyoto Protocol, which the African Ministerial Conference on the Environment will have considered and endorsed at its fourth extraordinary session;

*Recalling* paragraph 9 of Decision 375 (XVII) requesting the African Development Bank to accordingly present a report reflecting modalities and progress in the design of the Africa Green Climate Fund to the next meeting of the Africa Ministerial Conference on the Environment;
Recalling the resolution on the framework for public health adaptation to climate change in the African region adopted by the World Health Organisation Regional Committee at its sixty first session held in Yamoussoukro from 29 August to 2 September 2011;

Recalling the decision by the African Ministerial Conference on the Environment made at its twelfth session to develop and adopt a common negotiating position on climate change, which affirms an international climate regime that ensures full, effective and sustained implementation of the United Nations Framework Convention on Climate Change and the Kyoto Protocol thereto;

Recalling the outcomes of the sixteenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the sixth Meeting of the Parties to the Kyoto Protocol held in Cancun, and the thirteenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the third Meeting of the Parties to the Kyoto Protocol held in Bali;

Aware of the forthcoming seventeenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the seventh Meeting of the Parties to the Kyoto Protocol to be held in Durban from 28 November to 9 December 2011.

Decide:

1. To welcome the report of the African Union Commission on the development of the African Strategy on Climate Change and call on the Commission to continue this work and reflect inputs made at the fourth Special Session of African Ministerial Conference on the Environment in the strategy,

2. To request the African Union Commission to circulate the final draft of the African Strategy on Climate Change to member States for comments and further input, upon which the President of the Africa Ministerial Conference on the Environment is urged to convene meeting of the Bureau to consider inputs from member States and endorse the strategy,
3. To adopt the African common position on climate change and the key messages\textsuperscript{5} on climate change negotiations for the seventeenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the seventh Meeting of the Parties to the Kyoto Protocol presented as the outcome of the African group of negotiators meeting held in Bamako from the 13 to 14 September 2011,

4. To request member States and the African group of negotiators and invite the Committee of African Heads of State and Government on Climate Change to use the common position as the basis for their positions during the seventeenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the seventh Meeting of the Parties to the Kyoto Protocol,

5. To welcome the report of the African Development Bank on the design of the Africa Green Fund and call on the bank to continue this work and reflect the inputs made in its final report and urge the Bank to complete the design of the Fund ahead of the seventeenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the seventh Meeting of the Parties to the Kyoto Protocol as mandated by the African Union Summit decision 375 (XVII),

6. To request the African Development Bank to further consult in 2012 with the African group of negotiators on the potential linkages of the Africa Green Climate Fund to the financial mechanism of the United Nations Framework on Climate Change including the Green Climate Fund and to report to the Africa Ministerial Conference on the Environment at its next ordinary session for consideration of such linkages,

7. To request the African Union Commission, the United Nations Environment Programme, the World Health Organization and other development partners to support the implementation of the framework for public health adaptation to climate change in the African region adopted by the World Health Organization Regional Committee at its Sixty-first session held in Yamoussoukro from 29 August to 2 September 2011 through an appropriate mechanism,

8. To agree that the African common position will be continuously backed by new findings, including the best available scientific, economic and technical information, and in this regard, invite institutions, African centres of excellence, the African Union Commission, the African Development Bank, the United Nations Environment Programme, the United Nations Economic

\textsuperscript{5} Annex to decision SS4/1: key messages for COP17.
Commission for Africa, African Climate Policy Centre, and other development partners including the World Bank to support the elaboration of the research agenda in support of the African common position,

9. To invite all member States to attend and participate in the seventeenth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change and the seventh session of the Meeting of the Parties to the Kyoto Protocol and promote the African common position,

10. To mandate the President of the African Ministerial Conference on the Environment to submit the outcomes and decisions of the fourth special session of African Ministerial Conference on the Environment to the Committee of African Heads of State and Government on Climate Change,

11. To request the African Union Commission to take note of the report of the fourth special session of the African Ministerial Conference on the Environment and submit it to the next African Union Summit.