The health sector constitutes 10% of the global economy. It is one of the largest global employers and its workers are among the most trusted professionals in the world. Their work over the last year against COVID-19 has saved hundreds of thousands of lives.

Yet, health has not always got the seat it deserves at the UN climate change negotiations table. For instance, there are not many representatives from Ministries of Health in the delegations that Parties send to the UNFCCC and, even if there are, they are not likely to have the mandate to promote health. Negotiations are mainly conducted by representatives from the Ministries of Environment and countries rarely promote health issues within their national positions.

So, how can health priorities be promoted in the climate change agenda?

In this lesson, we will explore:

- The options to integrate health-related issues into national policies and strategies on climate change;
- The key entry points to advance health priorities at COP26 negotiations; and
- WHO's recommendations for action at COP26.
Introduction

Welcome to Lesson 5 of the Climate Change Negotiations and Health course.

How can governments, negotiators and other stakeholders improve the health agenda in current and future climate change negotiations? And how can health professionals and supporters raise their voices for a healthy and green recovery from the COVID-19 pandemic? *(See next lesson for more information on the COVID-19 recovery).*

Let’s begin our journey by watching a short introductory video (check online lesson).

The health community has a **critical and unique contribution** to make to the health of our planet and its people.

Health sector professionals and all negotiators could significantly contribute to the debate, highlighting the **health argument** as a key motivational factor to foster more ambitious and urgent action on climate change.

In addition, climate action in other **health-relevant sectors**, such as agriculture, water, transport or waste management, can have far-ranging consequences on health.

So, how can governments include health-related issues into their national policies and strategies? We'll find out in the next segment.
National Policies and Processes on Climate Change - NAPs and HNAPs

GOVERNMENTS NEED TO DEVELOP NATIONAL ADAPTATION PLANS (NAPs) AS PART OF THEIR COMMITMENT TO THE UNFCCC.

THIS IS A CRUCIAL STEP TO PROTECT HEALTH FROM CLIMATE CHANGE.

How can governments include health-related issues into their national adaption plans? Watch the video on the online lesson to find out.
How can governments develop comprehensive health plans as part of their NAPs or HNAPs for building climate resilient health systems?

**HNAP Development Process**

WHO has developed guidance to support countries in developing their HNAP. It highlights quality criteria in 6 broad areas to develop comprehensive HNAPs.

<table>
<thead>
<tr>
<th>Leadership and Enabling Environment</th>
<th><strong>Active engagement of the health sector</strong> with the national climate change agenda, including in the process to formulate and implement the NAP, is critical. <strong>Leadership from the Ministry of Health and formalized endorsement processes</strong> are crucial steps for ensuring ambitious HNAPs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cross-sectoral Coordination and Policy Coherence</td>
<td>It is crucial that health is protected and promoted not only by the health sector, but also by other health-determining sectors such as food and agriculture, energy, urban planning, water, sanitation and hygiene. The <strong>active involvement of these sectors</strong> in HNAP development and implementation is likely to contribute to a more effective HNAP.</td>
</tr>
<tr>
<td>Comprehensive Coverage of Climate-sensitive Health Risks</td>
<td>One of the steps in the NAP process is assessing climate vulnerabilities and identifying adaptation options at the sector, subnational, national and other appropriate levels. A comprehensive V&amp;A, covering a wide range of <strong>climate-sensitive health risks</strong> is thus critical for ensuring that the HNAP is evidence based.</td>
</tr>
<tr>
<td>Comprehensive Adaptation Options to Face Climate-Sensitive Health Risks</td>
<td>The HNAP is part of a long-term process of adaptation planning. Therefore, a <strong>systematic approach</strong> to addressing climate change in the health sector that prioritizes actions, considers climate-sensitive health risks, along with building a climate-resilient health system is recommended.</td>
</tr>
<tr>
<td>Resourcing</td>
<td>HNAP implementation requires human, financial and other resources, and an <strong>estimation of these resources</strong> and</td>
</tr>
</tbody>
</table>
Resource mobilization strategy are crucial for effective planning and implementation.

| Monitoring, Evaluation and Reporting | The HNAP includes a comprehensive monitoring, evaluation and reporting (M,E&R) plan to oversee successful HNAP implementation, and the impact of the implementation of adaptation actions. |

For further information on developing the HNAP process and quality criteria for HNAPs, review the “WHO guidance to protect health from climate change through health adaptation planning” and the WHO quality criteria for HNAPs.

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Are there other ways in which governments can include health-related issues into their national policies and strategies? Yes! Let’s find out how in the next segment.

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National Policies and Processes on Climate Change - NDCs

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Governments can develop health-promoting climate policies by strengthening their nationally determined contributions (NDCs).
WHO Recommendations for Healthy NDCs

Another entry point for including health-related issues into national policies and strategies is the Nationally Determined Contributions (NDCs), which are the national climate plans that each country commits to in order to meet the goals of the Paris Agreement.

Governments submitted an initial round of NDCs after the adoption of the Paris Agreement in 2015, and are required to regularly update - or submit a new – NDC. A new round of NDCs is due by COP26.

WHO has issued a broad set of recommendations for NDCs to include health-promoting commitments, through incorporation of health considerations in the following 4 areas:

1. **Health Co-Benefits of Mitigation in the NDCs**
   Measure and monitor the health co-benefits of climate actions, to ensure they can bring the largest possible health gains.

2. **Health Impacts from Climate Change in the NDCs**
   Identify and include all climate-sensitive health risks, and recognize the health sector as vulnerable to climate change.

3. **Health as a Priority Adaptation Sector in the NDCs**
   Prioritize comprehensive health adaptation actions, including by developing an HNAP.

4. **Means of Implementation for Health in the NDCs**
   Ensure the necessary finance, capacity building and technology transfer to protect health from climate change, and address the existing barriers for the health sector to access climate finance.

For further information on NDCs is available in the "[Health in the Nationally Determined Contributions (NDCs)](Health_in_the_Nationally_Determined_Contributions_(NDCs))."

Health is a powerful argument to enhance national climate ambition. So, how is health positioned in current NDCs?

**Health in the NDCs**

70% of the NDCs (i.e. 129 out of 184) submitted to the UNFCCC at the end of 2019 incorporated public health considerations.
What do you think? What percentage of initial NDCs measured and monitored the health gains from proposed climate change actions?

**About 1%.** Even though the majority of NDCs do refer to health, only a handful of NDCs measure or monitor the health co-benefits of climate action to help inform their policies.

According to UNFCCC decision 1/CP.21 adopted at COP21 in Paris, in 2015, Parties are expected to update their NDCs (for those whose timeframe spans 10 years, until 2030) or prepare new ones (for those whose timeframe spans 5 years, up until 2025) and communicate them to the UNFCCC secretariat by 2020.

The UNFCCC Secretariat will generate a synthesis report of the new and updated NDCs and present it at COP26.

**Role of the Health Sector**

The health sector has a role to play in the development or updating process of the national NDC to ensure the NDCs:

1. Effectively incorporate evidence on the health impacts of climate change that is generated at national level, for example through climate change and health vulnerability and adaptation assessments.
2. Include mitigation actions that effectively promote those measures that maximize health co-benefits, particularly by reducing the deaths caused by air pollution.
3. Include in the adaptation section information on plans developed (e.g. HNAP) or implemented interventions aiming to strengthen the climate resilience of health (e.g. the development of climate-informed health early warning systems or climate resilient and environmentally sustainable healthcare facilities).
4. Include health within their finance priorities, at both the national and international level.
5. Prioritize the quantification and monitoring of health gains from proposed mitigation and adaptation actions.

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In the next segment, we will look into financing opportunities.

### Climate Finance for Health

According to the UNFCCC, “climate finance refers to local, national or transnational financing —drawn from public, private and alternative sources of financing—that seeks to support mitigation and adaptation actions that will address climate change.”

Countries’ ability to implement climate change adaptation and mitigation interventions largely depends on their financial capacity.
A financial mechanism under the UNFCCC provides financial resources to developing country Parties to respond to climate change. This mechanism, which includes two operating entities — the **Global Environment Facility (GEF)** and the **Green Climate Fund (GCF)** — also serves the Kyoto Protocol and the Paris Agreement. It is accountable to the COP, which decides on its policies, priorities, and funding criteria.

**The GEF**

Available since the UNFCCC entered into force in 1994, the Global Environment Facility (GEF) is an international partnership including over 180 countries, international institutions, private sector, and civil society organizations. Since its establishment, the GEF has provided grants for more than $21.1 billion, while mobilizing other $114 billion in co-financing, to support over 5,000 projects in 170 countries.

**The GCF**

Established during COP16 in Cancun in 2010, the Green Climate Fund (GCF) is the largest fund dedicated to supporting developing countries in reducing their GHG emissions and improving their capacity to respond to climate change. The GCF has received pledges for over USD 10 billion, mostly from developed countries, but also other countries and entities. Multiple mechanisms have been set-up for accessing its funds (see next section).

*Photo credit: UN Photo/Milton Grant (April 1993/Massawa, Eritrea)*

**Special Funds**

In addition to the GEF and the GCF, Parties have established the Special Climate Change Fund (SCCF) and the Least Developed Countries Fund (LDCF), both managed by the GEF. Additionally, the Adaptation Fund finances concrete adaptation projects and programmes in developing country Parties that are particularly vulnerable to the adverse effects of climate change. The World Health Organization (WHO) assists countries to access these funds for the implementation of health-relevant climate actions.

➢ The Special Climate Change Fund (SCCF)
Managed by the GEF, the **SCCF** was established to support initiatives in the following areas of adaptation:

- Technology transfer and capacity building;
- Energy, transport, industry, agriculture, forestry and waste management; and
- Economic diversification.

➢ **The Least Developed Countries Fund (LDCF)**

The **LDCF** was established to assist LDCs taking into account their special needs. As part of its work, it supports them in developing and implementing National Adaptation Programs of Action (NAPAs), which are national strategies that address the most immediate adaptation needs. It is also managed by the GEF.

➢ **The Adaptation Fund (AF)**

The **AF** finances concrete adaptation projects in country that are particularly vulnerable to climate change. Initially established in 2001 under the Kyoto Protocol, the Adaptation Fund now serves under the Paris Agreement, and receives funding via a share of proceeds from carbon markets and other cooperative approaches (Article 6 of the Paris Agreement).

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In the next segment, we will explore the different mechanisms for accessing GCF funds.

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**Accessing the Green Climate Fund**

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**THE GREEN CLIMATE FUND (GCF) SUPPORTS DEVELOPING COUNTRIES IN ADVANCING CLIMATE CHANGE ADAPTATION AND MITIGATION.**
The GCF is governed by a Board composed of 24 country members. Multiple mechanisms have been set-up for accessing its funds.

➢ Project Preparation Facility (PPF)

The PPF provides technical and financial assistance for the preparation of funding proposals, with resources up to USD 1.5 million per application. It is open to all GCF Accredited Entities, with a particular focus on supporting projects in the micro and small-sized category.

➢ Simplified Approval Process Pilot Scheme (SAP)

The SAP simplifies the approach to approve small size projects (i.e. up to USD 10 million) with minimal environmental and social risks.

➢ Private Sector Facility (PSF)

The PSF aims to involve the private sector to support projects promoting climate change adaptation and mitigation in developing countries.

➢ GCF Readiness Programme and WHO as a Readiness Partner

Countries can also access the GCF Readiness Programme to strengthen their institutional capacities to effectively engage with the Fund. The World Health Organization is a GCF Readiness Delivery Partner, enabling WHO to support countries in accessing GCF Readiness funds, undertaking adaptation planning and developing strategic frameworks to build their programming with the GCF.

A developing country can access up to USD 1 million a year for all readiness activities, as well as up to USD 3 million one off for adaptation planning processes.

**Note:** For further information, please view the webinar on Accessing GCF Readiness Funds for Health and Climate Change.

You can access templates and forms for these processes here: [Accessing GCF Readiness Funds for Health and Climate Change](#).

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In the next segment, we will discuss the health priority areas that are relevant to the COP26 negotiations in 2021.
Which of the following do you think should be key health priorities for the COP26 negotiations?

- Promote the human right to health and a healthy environment in response to climate change.
- Help remove existing barriers for the health sector to access climate finance.
- Ensure health systems worldwide are resilient to climate impacts and environmentally sustainable.
- Develop indicators to measure losses and damage associated with health.

COP26 negotiations will cover the human right to health and a healthy environment and the development of indicators to measure losses and damage associated with health, among other topics.

Various entry points exist to take health into account in these twelve health priorities at COP26.

The UNFCCC Long-Term Goal and Health
The long-term goal of the UNFCCC is highlighted in its article 2.

"The ultimate objective of this Convention and any related legal instruments that the Conference of the Parties may adopt is to achieve, in accordance with the relevant provisions of the Convention, stabilization of greenhouse gas concentrations in the atmosphere at a level that would prevent dangerous anthropogenic interference with the climate system. Such a level should be achieved within a time frame sufficient to allow ecosystems to adapt naturally to climate change, to ensure that food production is not threatened and to enable economic development to proceed in a sustainable manner."

At COP25, Parties decided that the second review of the adequacy of the UNFCCC long-term goal and progress towards its achievement will be initiated during the second half of 2020 and conclude at the COP session to be held in 2022. During this period, three Structured Expert Dialogues (SEDs) will be organized.

A round table on pre-2020 implementation and ambition will take place at COP26, with its conclusions contributing to the review process. Although 'health' is not directly mentioned in the long-term goal of the UNFCCC (Article 2), the goal is built on the principle that governments need to avoid the "adverse effects of climate change", including impacts on “human health and welfare” (Article 1). Parties should aim to include health in this discussion by highlighting the need for long-term commitments to ensure global public health is not threatened.

Response Measures and Health

As we saw in Lesson 4, Response Measures deal with “the effects arising from the implementation of mitigation policies and actions, and the cross-border environmental, social, and economic impacts these might have.” To address these issues, Parties have set the “Forum on the impact of the implementation of response measures”, which consolidates relevant knowledge and deliberations, and the "Katowice Committee of Experts on the Impacts of the Implementation of Response Measures (KCI)", which provides countries with a platform for best practices, tools, and methodologies.
Recognizing health co-benefits of climate action as obvious positive impacts of mitigation and adaptation policies, at COP26, Parties could:

- Highlight positive impacts of health co-benefits in the discussions on response measures; and
- Share related methodologies, best practices, and tools to measure and monitor these benefits, and ensure they inform decision-making (for example, the WHO Carbon Reduction Benefits on Health (CaRBonH calculation tool).

**Carbon Markets and Health**

At COP26, countries will continue to discuss how to design market and non-market cooperative approaches under the Paris Agreement (Article 6), as well as associated safeguards to ensure environmental and social integrity.

These safeguards include human rights. Therefore, they should comprise the human right to a healthy environment and the human right to health. Additional to safeguard mechanisms for health, carbon markets and other cooperative approaches can be more ambitious if the true cost of greenhouse gas emissions on public health is included in carbon pricing (also known as “the social cost of carbon”).

A crucial ask from health delegates and observers should also be the insurance that Article 6 contributes to overall climate ambition, through:

- **Corresponding Adjustments (CA),** that is avoiding double-counting and adjusting national GHG emission figures when emission reductions units are sold to another country;
- **Overall Mitigation of Global Emissions (OMGE),** which considers the removal of some of the emission reduction credits from the carbon markets with the goal of avoiding a zero-sum game and achieving a net reduction in overall global emissions; and
- **A share of proceeds for adaptation efforts, which involves using a part of the income from carbon markets to be channeled to the Adaptation Fund (AF) to support adaptation in the most vulnerable countries, including health adaptation.
Loss and Damage and Health

Health is usually considered a non-economic impact under loss and damage. This means it is not easy for it to be valued using normal market prices, even though WHO systematically quantifies health losses and damages from climate change.

From a health perspective, the work of the **Warsaw Intentional Mechanism (WIM)** on loss and damage (PA Art. 6) at COP26 should include the provision of new and additional finance for vulnerable developing countries.

COP26 should also help to define a clear role for WIM in supporting the implementation of COP24 and COP25 outcomes, which include:

1. The integration of loss and damage in policies, plans, and strategies; and
2. Encouraging parties to take into consideration recommendations made by the WIM’s Executive Committee.

Under the WIM enhancing process, countries should develop better measurable and comprehensive indicators, as well as strong methodologies for interpretation, to assess health losses and damages.

Adaptation and Health

At COP26, the Adaptation Committee (AC) will hold several technical meetings to discuss matters related to adaptation action in its areas of work.
These discussions will address multiple areas, including:

- Coherence and collaboration;
- Gender;
- Regional centers and networks;
- Technical support and guidance;
- Means of implementation; and
- Communication.

Health considerations should be included in the AC meetings and all other adaptation discussions, as well as in the report that will be submitted to COP26. Of particular relevance is the inclusion of health within any technical support, guidance and indicators to be developed to support Parties.

A comprehensive set of guidance targeting the health sector has already been made available by WHO.

**Finance and Health**

Only 0.5% of climate finance currently supports health projects.

At COP26, the Standing Committee on Finance (SCF) will discuss two key technical reports on “Determination of the Needs of Developing Country Parties” and “Biennial Assessment and Overview of Climate Finance Flows”. Parties will also discuss the goal of mobilizing at least USD 100 billion a year in climate finance by 2020 and will start negotiating a new goal post-2025.

In finance discussions (PA Art. 9) at COP26, delegates and observers should promote the inclusion of the health implications (i.e. health co-benefits) of mitigation and adaptation measures in the development of economic and fiscal policies, including carbon pricing and the reform of fossil fuel subsidies.

Existing barriers to accessing finance for health should be removed, especially for climate-resilient and environmentally sustainable health systems and facilities.
Furthermore, funding should be made available to promote the health co-benefits of mitigation and adaptation policies in other sectors (in line with article 4.1.f. of the UNFCCC).

**Transparency and Health**

During COP26, the reporting tables for the Transparency Framework (PA Art. 13) will continue to be negotiated. This could be an opportunity to include health co-benefits, impacts, vulnerabilities and other health aspects in the biannual reporting of this framework. In turn, this could further enhance health-related communications of countries' NDCs and NAPs as well as the global stocktake.

**Agriculture and Health**

The [Koronivia Joint Work on Agriculture (KJWA)](https://www.koroniavia.org) is a COP23 decision(4/CP.23) that highlights the importance of the agriculture sector in adapting to and mitigating climate change. It focuses on the next steps for agriculture within the UNFCCC framework, and lays out a road map for final reporting at COP26.

It is important for countries to consider health aspects associated with food and agriculture, such as nutrition, sustainable diets and food security, and to include those topics in coming workshops.

Between COP25 and COP26, different workshops will be organized to discuss soil and nutrient use, water and livestock management, and socioeconomic and food security dimensions of climate change and agriculture.
Biodiversity and Health

The conservation and sustainable management of biodiversity is crucial to address climate change.

It is now widely recognized that climate change and biodiversity are intrinsically interconnected. Climate change accelerates biodiversity loss, compounding associated negative consequences on human health and well-being. Conversely, biodiversity and healthy ecosystems, through the ecosystem services it sustains, can make an important contribution to both climate-change mitigation and adaptation and safeguarding human health.

The 2019 Global Assessment Report on Biodiversity and Ecosystem Services by the Intergovernmental Platform for Biodiversity and Ecosystem Services (IPBES) found that nature-based solutions have the potential to provide over one third of the CO2 emissions reductions needed to meet the goal of keeping climate warming below 2°C by 2030.

There is also considerable unrealized potential to maximize gains for health and well-being, particularly for the most vulnerable and marginalized populations most reliant on biodiversity.

Examples of themes where action on climate, biodiversity and health intersect include food and nutrition security, water resource management, community and urban health, resilience to climate impacts, and management of infectious diseases.

At COP26, nature-based solutions will be especially relevant for discussions on NDCs, adaptation, carbon markets, climate finance and the Koronivia Joint Work on Agriculture (KJWA).
In 2021, an important UN biodiversity conference will also be taking place: the fifteenth meeting of the Conference of the Parties (COP 15) to the Convention on Biological Diversity (CBD). At the biodiversity conference, governments will agree on a Global Biodiversity Framework to preserve biodiversity worldwide, recognizing nature provides the foundation for “the nutrition, food security, and livelihoods of people, especially for the most vulnerable”.

Gender and Health

The health impacts of climate change are felt differently by women and men, boys and girls. Gender equality and health equity play a key role in both climate action and public health goals.

At COP25, Parties adopted a 5-year enhanced Lima Work Program on Gender (LWPG) and the Gender Action Plan (GAP). Their main priorities include:

- Enhancing the capacity of parties to develop gender-responsive policies; and
- Improving the participation of women in the negotiations and in the representation of Parties in bodies established under the Convention.

At COP26, Parties will have the opportunity to exchange on how to enhance the GAP as well as take gender into account in other areas.

For further information, please consult the WHO publications on Gender, Climate Change and Health and Mainstreaming Gender in Health Adaptation to Climate Change Programmes.
Indigenous Peoples and Health

The Local Communities and Indigenous Peoples Platform (LCIPP) Facilitative Working Group (2/CP.23) is a constituted body that was established at COP24.

It aims to operationalize the LCIPP and facilitate the implementing of its three functions related to:

1. Knowledge
2. Capacity for engagement
3. Climate change policies and actions

A first two-year work plan (2020-2021) is currently being implemented.

In addition to conducting health and vulnerability assessments with a special focus on indigenous peoples, Parties should include in the working group:

- Knowledge on indigenous medicines, practices and health issues; and
- The importance of indigenous peoples and practices as guardians for a healthy environment.

Youth and Health
Ahead of COP26, YOUNGO – the constituency of non-governmental youth organizations that make up one of the nine civil society groups represented in the UNFCCC, will organize its annual Conference of Youth (COY).

The COY provides a space for swapping experiences, knowledge and good practices to strengthen the international youth climate movement and involve next generations in developing climate actions.

Italy will also host “Youth4Climate: Driving Ambition”, an international event dedicated to young people where almost 400 youth representatives from all over the world (aged between 18 and 29) will elaborate concrete proposals for global climate action on topics relevant to the negotiation process of the preparatory ministerial meeting (PreCOP) and COP26.

Other initiatives that seek to reinforce youth-led climate action include:

- Youth UNESCO Climate Action Network (YoU-CAN, launched by UNESCO at COP25)
- Mock COP26 (convened from November 19 to December 1, 2020)
- SDG7 Youth Constituency
- UNSG Youth Advisory Group on Climate Change
- Connect4Climate
- Fridays for Future movement.

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AND YOU?
WHAT WILL YOU DO TO ADVANCE THESE HEALTH PRIORITIES?
Global Conference on Health and Climate Change

At the margin of COP26, WHO and partners will convene the 2021 Global Conference on Health and Climate Change, with a special focus on Climate Justice.

The aim of the conference is to support and showcase the different health priorities at COP26, as shown in this lesson, and including ambitious Nationally Determined Contributions (NDCs) to the Paris Agreement that are based on the principles of health and equity.

The conference will also mobilize the rapidly growing movement of health professionals around the world who are proactively driving global climate action by, for instance, calling for a healthy recovery post-COVID-19.

Health Recommendations for Action at COP26
Taking into account the need to support a green and healthy recovery from COVID-19, WHO and the global health community will make a set of key recommendations on climate change and health to all Parties attending the COP26.

Moreover, the government of the United Kingdom, which holds the COP26 Presidency, has established a COP26 Health Programme, which includes several key priorities for health.

**Building Climate Resilient Health Systems**

Health systems are the main line of defence in protecting populations from emerging threats, including the impacts of a changing climate. At the same time, health is recognized as a priority sector vulnerable to climate change impact, while billions of people lack access to the most basic services that are required to protect their health. The COP26 health programme aims to secure additional commitments at local and
national levels, as well as increased finance, to strengthen the climate resilience of health systems worldwide.

You can learn more about WHO’s country support on climate resilient health systems on the WHO website.

Developing Low Carbon Sustainable Health Systems on a Pathway to Net Zero

Health care facilities and health systems aim to protect and improve the health of their target communities, despite an increasingly unstable and changing climate. The COP26 health programme and Health Care Climate Challenge aims to empower health care facilities to be environmentally sustainable, by optimizing the use of resources, minimizing the release of waste into the environment, and committing to net zero greenhouse gas emissions.

You can learn more about climate resilient and environmentally sustainable health care facilities on the WHO website, while you can learn more on the Health Care Climate Challenge on the HCWH website.

Strong Inclusion of Health in Nationally Determined Contributions (NDC)
Health is a powerful argument to enhance climate ambition. Health-promoting NDCs recognise the impacts of climate change on health, and the need for health and equity to be integrated into mitigation and adaptation planning. They set out interventions that both reduce emissions and offer immediate and local health benefits. The COP26 Health Programme aims to strengthen the inclusion of health in the NDCs in the lead up to the UN climate conference.

You can learn more about health in the NDCs here.

**Health Campaigns at COP26**

The COP26 Presidency is running five campaigns in the lead up to the UN climate conference, to drive action across key sectors of the economy to reduce emissions, adapt to the effects of climate change and build resilience.

The topics of these five campaigns are closely connected to health:

- Adaptation and resilience
- Energy transition
- Clean transport
- Nature
- Finance
The health community has a **critical and unique contribution** to make to the health of our planet and its people – though **ensuring** that people are protected from the rising health risks of climate change and environmental destruction, through **reducing** the growing carbon emissions from healthcare, and by **promoting** the huge health gains that come from more sustainable and low carbon policies and behaviors.

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**In the next segment, we will recap the key points covered in the lesson.**
Recap

➢ Integrating Health in National Climate Change Processes and Policies

There are many ways in which governments can include health-related issues into their national climate change policies and processes.

These include:

• Integrating health into the National Adaptation Plan Process (NAPs) by including a specific health chapter and/or developing an independent Health National Adaptation Plan (i.e. HNAP); and
• Integrating health into the National Determined Contribution (NDC) development or updating process.

The Global Environment Facility (GEF), the Green Climate Fund (GCF) and the AF are the key international climate change funds providing financial resources to developing countries to address climate change.

As a GCF Readiness Partner, WHO is supporting countries to develop GCF Readiness proposals for health.

➢ Key Health Priorities in COP 26 Negotiation Streams

In the context of the COVID-19 recovery, entry points exist to advance health priorities in various COP26 priorities:

➢ WHO Recommendations for Action at COP26

WHO’s recommendations to all Parties attending COP26 on climate change and health include:

• Building climate resilient health systems
• Developing low carbon sustainable health systems on a pathway to net zero
• Strong inclusion of health in nationally determined contributions (NDC)

Additionally, the COP26 Presidency is running five campaigns in the lead up to the UN climate conference focusing on topics that are connected to health:

1. Adaptation and resilience
2. Energy transition
3. Clean transport
4. Nature
5. Finance
Check Your Understanding

1. Match the Items below
   
   a. LCIPP Facilitative Working Group
   b. LWPG and GAP
   c. KJWA
   d. WIM

   1. Loss and Damage and Health
   2. Gender and Health
   3. Indigenous Peoples and Health Working Group
   4. Agriculture and Health

2. Fill in the Blank

   The GEF, the GCF and the ________________are the key international climate change funds providing financial resources to developing countries to address climate change.

3. In the lead up to the UN climate conference, the COP26 Presidency is running five campaigns that are connected to health. Can you identify the campaign topics?
a. Adaptation and resilience
b. Population growth
c. Energy transition
d. Clean transport
e. Corruption
f. Nature
g. Sustainable development
h. Finance

Answers
1. a-3, b-2, c-4, d-1
2. Adaptation Fund
3. a, c, d, f, h
Useful Resources

- [WHO Guidance for Climate Resilient and Environmentally Sustainable Health Care Facilities](#)
- [WHO Guidance to Protect Health from Climate Change through Health Adaptation Planning](#)
- [Health in the Nationally Determined Contributions (NDCs)](#)