





COP26 Health Programme

Country commitments to build climate resilient and sustainable health systems

Summary of initiative commitments

Commitment area 1: Climate resilient health systems

- Commit to conduct climate change and health vulnerability and adaptation assessments (V&As) at population level and/or health care facility level by a stated target date;
- Commit to develop a health National Adaptation Plan (HNAP) informed by the health V&A, which forms part of the National Adaptation Plan (NAP) to be published by a stated target date;
- Commit to use the V&A and HNAP to facilitate access to climate change funding for health (e.g. project proposals submitted to the Global Environmental Facility (GEF), Green Climate Fund (GCF) or Adaptation Fund (AF) or GCF Readiness programme)

Commitment area 2: Sustainable low carbon health systems

- <u>High ambition/high emitters</u>: Commitment to set a target date by which to achieve health system net zero emissions (ideally by 2050).
- All countries: Commitment to deliver a baseline assessment of greenhouse gas emissions of the health system (including supply chains)
- All countries: Commitment to develop an action plan or roadmap by a set date to develop a sustainable low carbon health system (including supply chains) which also considers human exposure to air pollution and the role the health sector can play in reducing exposure to air pollution through its activities and its actions.

Process for recording/tracking commitments

- Commitments should be made at Ministerial level and published through government communications channels. The COP26 Health Team should be informed of commitments to enable tracking: COP26Health@fcdo.gov.uk
- Country level commitments are not made to the COP Presidency or to the UK; they are made by countries to their own citizens.







1. Introduction

Climate change is resulting in poorer health outcomes, increasing mortality and is a driver of health inequities. However, health is well placed to be a significant part of the solution; the positive health impacts from stronger climate change action can motivate stronger global ambition; health systems which are resilient to climate change can help protect their populations from the negative impacts (in the short and longer terms); and sustainable low carbon health systems can make a substantial contribution to reducing national and global emissions.

Health has been chosen as a COP26 science priority area. The COP26 Health Programme has been established to bring stronger health focus and ambition to COP26. This document sets out two key health priorities for COP26, where countries can state their ambition to develop climate resilient sustainable health systems:

- Building climate resilient health systems
- Developing low carbon sustainable health systems

2. Climate resilient health systems

2.1 What is the initiative?

This initiative aims to get country commitment to develop a national health and climate change plan/strategy which is based on a systematic assessment of the vulnerability and adaptive capacity of the health systems to climate change.

2.2 Why should this be a priority area for action?

As observed during COVID-19 pandemic, health systems are the main line of defence in protecting populations from emerging threats, including the impacts of a changing and more variable climate such as: food and water insecurity; flooding; extreme weather; reduced air quality (including increasing ground level ozone); among others.

It is essential to ensure that health systems can continue to deliver essential health functions during extreme events and under climate stress, and for them to play their critical role in a coordinated multisectoral response to emergencies. Climate change places stress on the capacity of health systems to prevent, adapt and respond to increased and new health risks and can also be impacted by shocks posed by increased extreme weather events. In order to protect the health of populations from the effects of climate change and avoid widening health inequities, countries must build climate resilient health systems, which consider the current climate and future projections. Currently, only 50% of countries globally have a national health and climate change strategy; with only half of those reporting high or moderate levels of implementation.

To build a climate resilient health system a country must understand how it is vulnerable and its adaptative capacity to climate change. These vulnerabilities should then be addressed in a national health and climate change strategy integrated into their national adaptation plan and/or as a more detailed stand-alone health adaptation plan.







2.3 What should you do?

The Adaptation Action Coalition (AAC) is made of a group of countries to accelerate global action on adaptation. This is part of the COP26 Adaptation and Resilience campaign. The AAC is driving action through the delivery of sectoral focused workstreams, including health, where the ask of countries is to develop plans to address climate resilience in country health systems.

The World Health Organization (WHO) is leading the delivery of the AAC's health workstream to improve the resilience of their health system to climate change. The country commitment will be based around the following:

- commit to conduct climate change and health vulnerability and adaptation assessments (V&As) at population and/or health care facility level by a stated target date;
- commit to develop a health National Adaptation Plan (HNAP) informed by the health V&A, which forms part of the National Adaptation Plan (NAP) to be published by a stated target date;
- commit to use the V&A and HNAP to facilitate access to climate change funding for health (e.g. project proposals submitted to the Global Environmental Facility (GEF), Green Climate Fund (GCF) or Adaptation Fund (AF) or GCF Readiness programme).

2.4 How do you make the commitment?

The commitment should be made at Minister level. Ideally, you should publicise this commitment through government media and communications channels and **inform** the COP26 Presidency of the substance of this commitment in an email or letter¹.

The process for gaining commitments is led by the 'Climate Change and Health' Unit at WHO. However, for ease of coordinating commitments and queries across the COP26 Health Programme you should contact the COP26 Health Team, who will direct your query to the most relevant person (COP26Health@fcdo.gov.uk).

3. Building sustainable low carbon health systems

3.1 What is the initiative?

This is an initiative between UK COP26 Presidency and the UNFCCC Climate Champions Team, with partners in Healthcare Without Harm, Greener NHS Team and WHO. The aim is to gain country commitments to develop national plans for sustainable resilient low carbon health systems, which ultimately sets them on a pathway to net zero.

Ambitions for health sector decarbonisation are relevant to all countries even though country health systems are at different points of health system development. The level of commitment made by the country health system can take this into account whilst agreeing to develop an action plan for a low carbon sustainable health sector that aligns with the Paris Agreement and also contributes to greater resilience.² Ideally countries should also commit to reaching net zero by a specific target date (ideally 2050 at the

¹ It should be noted that you are **not** making a commitment to the UK government; this communication is for the purposes of recording national commitments.

² See Global Road Map for Health Care Decarbonization, Health Care Without Harm and Arup, April 2021. www.healthcareclimateaction.org







latest) with their trajectory reflecting the level of development and emissions produced by the country health sector, as well as national emissions targets under the Paris Agreement.

The action plan should also recognise the close relationship between emission reduction and air quality, and include a focus on how health care emission reductions can also help achieve reductions in local air pollution.

3.2 Why should this be a priority area for action?

The health sector is a substantial contributor to greenhouse gas emissions, accounting for around 4.6% globally. This provides the health sector with an opportunity to demonstrate leadership on emission reduction, contribute to national climate targets, build greater health facility resilience, and directly address the intersection between climate and health.

There is also a close synergy between carbon emissions and air pollution, with some health systems making a substantial contribution to local air pollution. Air pollution is the world's largest environmental health threat. Some countries are showing leadership in this area, with the NHS in England setting an ambitious target for the health sector emissions under their direct control to reach net zero by 2040.

The initiative is aimed at high, middle and low income countries. In line with the Paris Agreement, high carbon emitting health sectors are expected to make commitments which see a rapid and steep reduction in emissions targeting net zero by 2050 at the latest. Some low and middle income countries may have similarly high ambitions for immediate action, while others may see their health system emissions increasing into the second half of this decade. However, all countries can take action. It is important that all develop plans for implementing low-carbon, resilient health care that align their health sectors with the ambition of the Paris Agreement and realise the health benefits and cost-savings of a sustainable, low carbon health system.

The sooner sustainable, low carbon health services are developed, the more cost effective they can be: reducing air pollution and therefore the ensuing demand for healthcare, by avoiding becoming locked into high carbon service delivery; and by not having to retro-fit sustainable solutions later.

3.3 What should you do?

Countries should make a commitment to develop a plan to build a sustainable and low carbon health system, and where appropriate for their health system to reach net zero by a target date. Commitments are encouraged to include the following:

- <u>High ambition/high emitters</u>: Commitment to set a target date by which to achieve health system net zero emissions.
- All countries: Commitment to deliver a baseline assessment of greenhouse gas emissions of the health system (including supply chains)
- All countries: Commitment to develop an action plan or roadmap³ by a set date to develop a sustainable low carbon health system (including supply chains) which also considers human exposure to air pollution and the role the health sector can play in reducing exposure to air pollution through its activities and its actions.

³ See Global Road Map for Health Care Decarbonization tool for guidance on health care decarbonisation, and fact sheets for country level data on emissions and recommendations for reducing health care emissions: https://healthcareclimateaction.org/roadmap







The highest level of commitment is an option open to all countries (regardless of the development stage of their health system), so that countries can be as ambitious as possible. However, the aim is to get countries to set their health system development on a low carbon pathway, with a plan to direct this.

3.4 How do you make the commitment?

The commitment should be made at Minister level. Ideally, you should publicise this commitment through government media and communications channels and **inform** the COP26 Presidency of the substance of this commitment in an email or letter⁴.

The process for recording commitments is coordinated by the COP26 Health Team and notification of commitments, or queries, should be directed to: COP26Health@fcdo.gov.uk.

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⁴ It should be noted that you are **not** making a commitment to the UK government; this communication is for the purposes of recording national commitments.