



Technical Webinar Series Climate Change and Health

Developing a Health National Adaptation Plan: Quality criteria for HNAPs

25 September 2024

9:30 – 11:00 CEST
15:00 – 16:30 CEST

WHO Technical Webinar Series



<https://www.who.int/teams/environment-climate-change-and-health/climate-change-and-health/country-support/webinars>

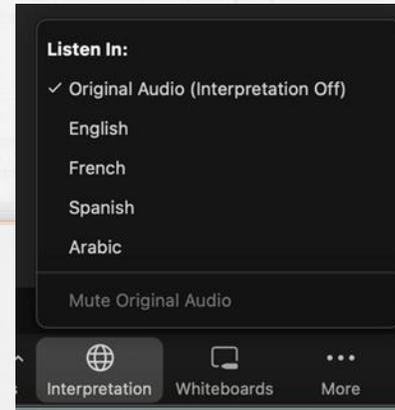


Date & time (CEST)	Topic*
24 th April 2024	Getting started: climate change and health vulnerability & adaptation assessments
30 th April 2024	WHO as an Accredited Implementing Entity of the Adaptation Fund; Accessing AF funding for Climate Change and Health
15 th May 2024	WHO Operational Framework for building climate resilient and low carbon health systems
12 th June 2024	Developing a Health National Adaptation Plan: Introduction
19 th June 2024	GIS and risk mapping in climate change and health vulnerability & adaptation assessments
10 th July 2024	Climate resilient and environmentally sustainable health care facilities
17 th July 2024	Quantitative approaches for Vulnerability & Adaptation assessments: sensitivity analyses and projecting future health risks of climate change
18 th Sept 2024	Integrating health in NDCs and LT-LEDS
25 th Sept 2024	Developing a Health National Adaptation Plan: Quality criteria for HNAPs
16 th Oct 2024	Conducting a gender analysis for climate change and health vulnerability & adaptation assessments



Interpretation

AM session: English, French and Arabic
PM session: English, French and Spanish



To activate interpretations (in English):

1. Click on the interpretation icon.
2. Select "English"
3. **Optional** : mute original audio

Pour activer les interprétations (en français):

1. Cliquez sur l'icône d'interprétation
2. Sélectionnez "Français"
3. **Facultatif** : couper le son d'origine

Para activar interpretación (en español)

1. Haga clic en el icono de interpretación.
2. Seleccionar "Español"
3. **Opcional**: silenciar el audio original

لتفعيل التفاسير باللغة العربية

1. اضغط على أيقونة التفسير.
2. اختر "العربية"
3. اختياري: كتم الصوت الأصلي

Agenda

Time	Agenda item	Speaker
9:30 – 9:35 (5 minutes)	Welcome and Housekeeping	Dr Yiqi Pan, Technical Officer, Climate Change and Health Unit, WHO
9:35 – 9:40 (5 minutes)	Opening remarks	Dr Diarmid Campbell Lendrum, Unit Head, Climate Change and Health Unit, WHO
9:40 – 10:10 (30 minutes)	Health National Adaptation Plans (HNAPs): Quality Criteria	Dr Amy Savage, Technical Officer, Climate Change and Health Unit, WHO
10:10 – 10:20 (10 minutes)	Country experience 1: HNAP Quality Criteria – Montenegro	Dr Borko Bajic, Head of the Department for School and Occupational Hygiene, Institute of Public Health Montenegro
10:20 – 10:30 (10 Minutes)	Country experience 2: HNAP Quality Criteria - Bangladesh	Dr Ahammadul Kabir, Programme Officer Climate Change, WHO Bangladesh
10:30 – 10:50 (20 minutes)	Interactive activity	
10:50 – 10:58 (8 minutes)	Group feedback	Breakout group volunteers Moderated by Amy Savage
10:58– 11:00 (2 minutes)	Close webinar	Dr Yiqi Pan, Technical Officer, Climate Change and Health Unit, WHO

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**Has your country already developed
an HNAP?**

① Start presenting to display the poll results on this slide.



Has your country already developed an HNAP?

Multiple Choice Poll 36 votes 36 participants

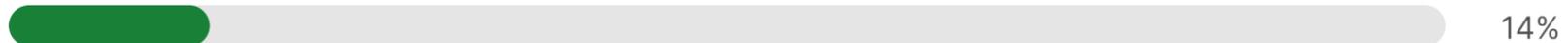
No, not yet - 4 votes



Yes/Started; I am involved in its development/implementation - 6 votes



Yes/Started; I am familiar with its content - 5 votes



Yes/Started - 7 votes



I do not know / I am not sure - 14 votes





Quality Criteria for Health National Adaptation Plans (HNAPs)

By the end of this training module learners will be able to:



Understand how HNAPs contribute to adaptation planning processes



Explain the HNAP process and sequence of steps for developing an HNAP



Identify criteria for a high quality HNAP

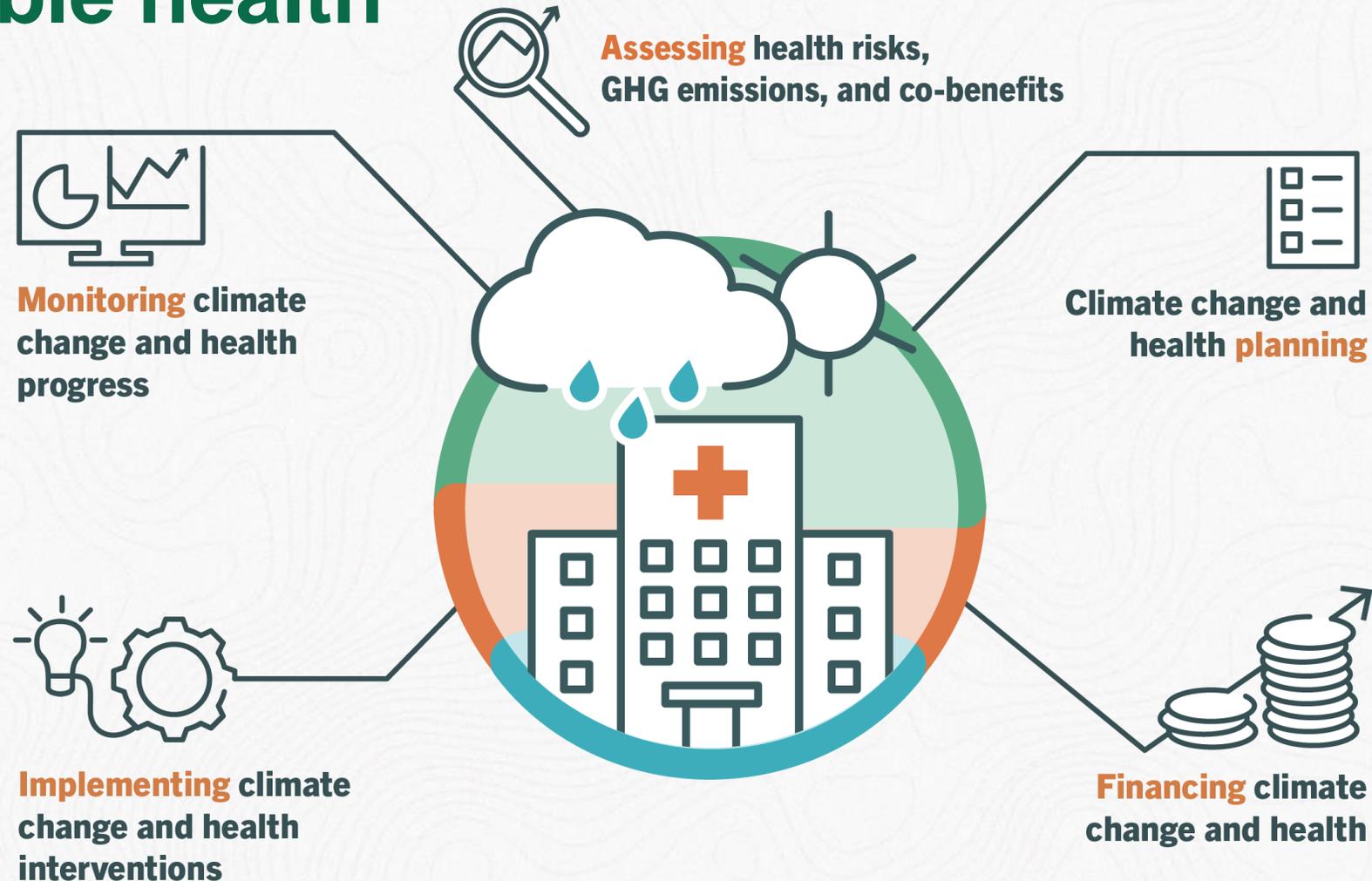


Use the WHO Operational Framework for Building Climate Resilient and Low Carbon Health Systems



Apply this knowledge within the broad context of health systems

Building climate resilient and sustainable health



Assessing health risks,
GHG emissions, and co-benefits



Monitoring climate
change and health
progress



Climate change and health **planning**



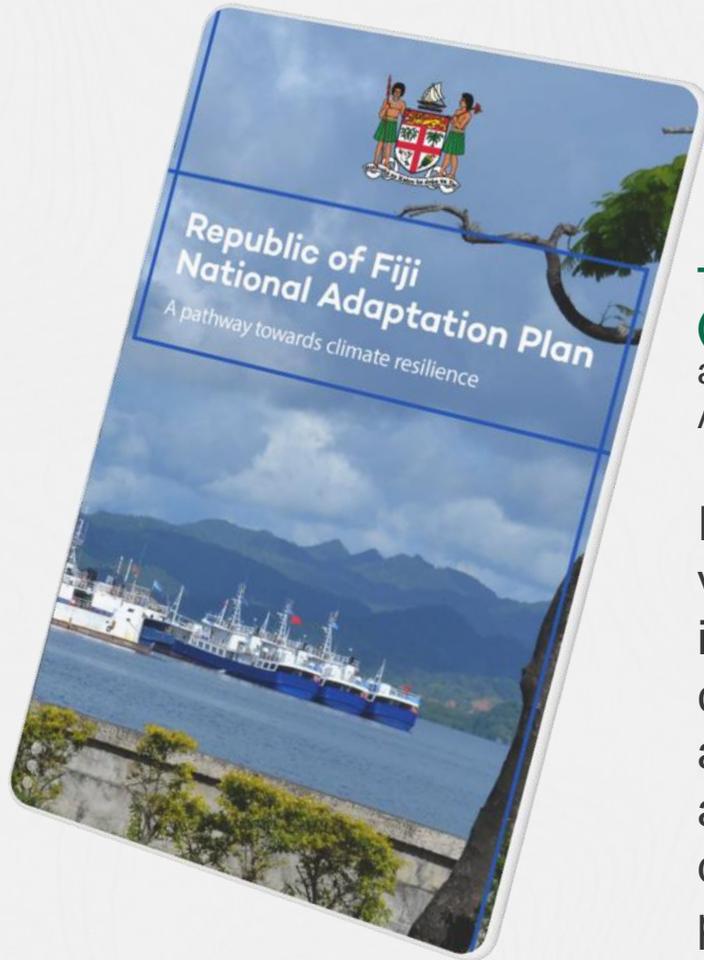
Implementing climate
change and health
interventions



Financing climate
change and health



Health National Adaptation Plans



The National Adaptation Plan (NAP) is a process established as part of the UNFCCC/Paris Agreement agenda.

It aims to reduce vulnerability to the impacts of climate change and integrate adaptation into policies and programmes through development strategies, plans and budgets.



Health National Adaptation Plan (HNAP) is the health component of the National Adaptation Plan (NAP) process



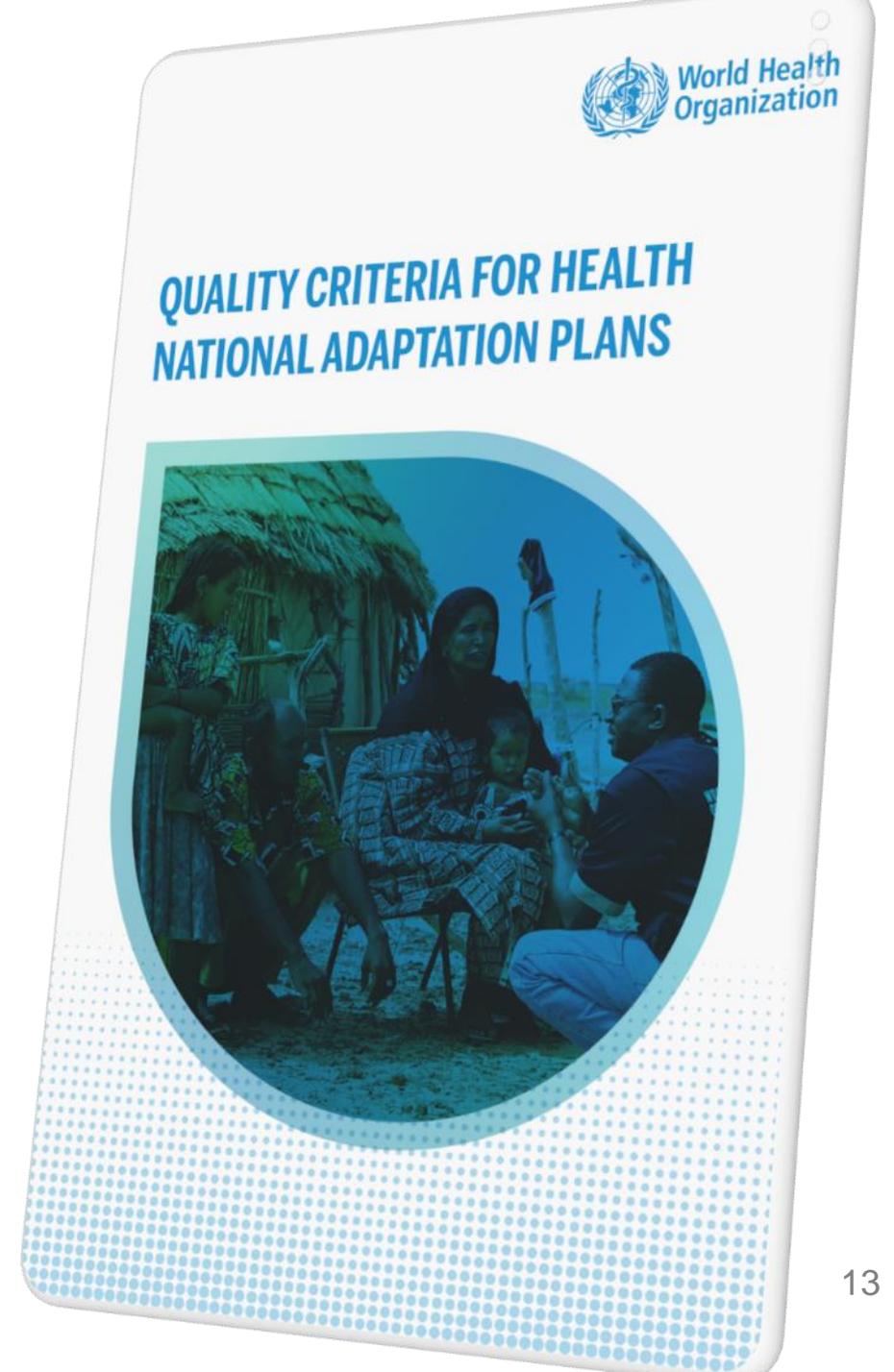
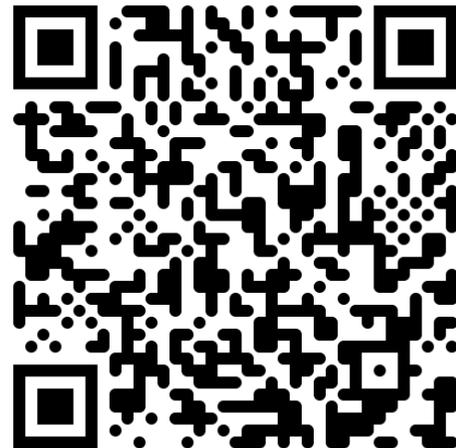
HNAP +



Quality criteria

Based on the WHO guidance:

Quality criteria for health national
adaptation plans.





HNAP + Quality criteria



 **Leadership and enabling environment**

- MoH leads HNAP development
- Govt endorsement/approval
- Active engagement of the health sector in the process to formulate and implement the NAP
- Climate-informed health planning and programming

 **Cross-sectoral coordination and policy coherence**

- Coordination and synergy with health-determining sectors

 **Comprehensive coverage of climate-sensitive health risks**

- Evidence-based HNAP
- Coverage of climate-sensitive health risks
- Prioritization of climate-sensitive health risks

 **Comprehensive coverage of adaptation options and actions**

- Comprehensive adaptation options to address climate-sensitive health risks
- Consideration of vulnerability factors
- Prioritisation of health adaptation actions

 **Resourcing**

- Estimation of the required resources for HNAP implementation – human and financial
- Resource mobilization strategy

 **Monitoring, evaluation and reporting**

- Comprehensive monitoring, evaluation and reporting plan included in HNAP
- Periodic HNAP iterations

Quality criteria for health national adaptation plans. Geneva: World Health Organization; 2021



World Health Organization

HNAP + Quality criteria



Step D

Reporting, monitoring and review

9. Monitor and review the HNAP
10. Update the HNAP regularly
11. Reporting on progress and effectiveness of the HNAP

Monitoring, evaluation and reporting

Step C

Implementation Strategies

7. Develop an implementation strategy for operationalising the HNAP
8. Promote coordination and synergy with the NAP process

Resourcing

Step B

Preparatory Elements

4. Conduct a health vulnerability and adaptation assessment
5. Review implications of climate change on health-related development goals and policies
6. Develop a health national adaptation plan

Comprehensive coverage of climate-sensitive health risks

Comprehensive coverage of adaptation options and actions

Step A

Lay the groundwork and address the gaps

1. Align the HNAP with the NAP process
2. Take stock of available information
3. Address capacity gaps in undertaking the HNAP

Leadership and enabling environment

Cross-sectoral coordination and policy coherence





Laying the groundwork and addressing gaps



Develop institutional arrangements to **coordinate and promote health** adaptation within the NAP process



Assess the **available evidence** on climate change and health and **identify gaps**



Identify the links between **national development priorities** and **health adaptation strategies**



Laying the groundwork and addressing gaps:

A case study from Nepal:

- Nepal MoH led the development of the HNAP, recognizing the importance of developing the health component of the NAP
- Active consultation with MoE and other stakeholders.
- A dedicated unit was created within MoH to manage overall coordination of HNAP implementation and its integration in NAP.
- Strong leadership of MoH enabled the development of HNAP and prioritization of climate change and health at the national level.



Leadership and enabling environment

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Cross-sectoral coordination and policy coherence



Coordination and synergy with health-determining sectors

Preparatory elements



Conduct a health **Vulnerability and Adaptation Assessment**, including short- to long-term adaptation needs in the context of development priorities



Development of **National Strategy** on health adaptation to climate change



Develop a **plan of action** which identifies **priority actions** for adaptation

A case study from Ethiopia:

- **MoH conducted the first V&A in 2015** using secondary data on exposure, sensitivity and adaptive capacity.
- The V&A found climate-related **extreme weather events** (such as floods and droughts) are a continued threat.
- Key climate-sensitive health outcomes and risks included **diarrhoea, malaria, yellow fever and dengue**.
- The V&A informed the HNAP development, contributing to the **creation of multisectoral and multidisciplinary expertise**, including knowledge transfer to universities.
- The evidence generated from the V&A was used to establish an early warning and surveillance system for climate sensitive diseases, which has been piloted in 11 health facilities in Ethiopia.



Comprehensive coverage of climate-sensitive health risks



Evidence-based HNAP



Coverage of climate-sensitive health risks



Prioritization of climate-sensitive health risks

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Comprehensive coverage of adaptation options and actions



Comprehensive adaptation options to address climate-sensitive health risks



Consideration of vulnerability factors



Prioritisation of health adaptation actions

Countries are encouraged to be ambitious in their coverage of CSHRs

Table 2. Climate-sensitive health risks

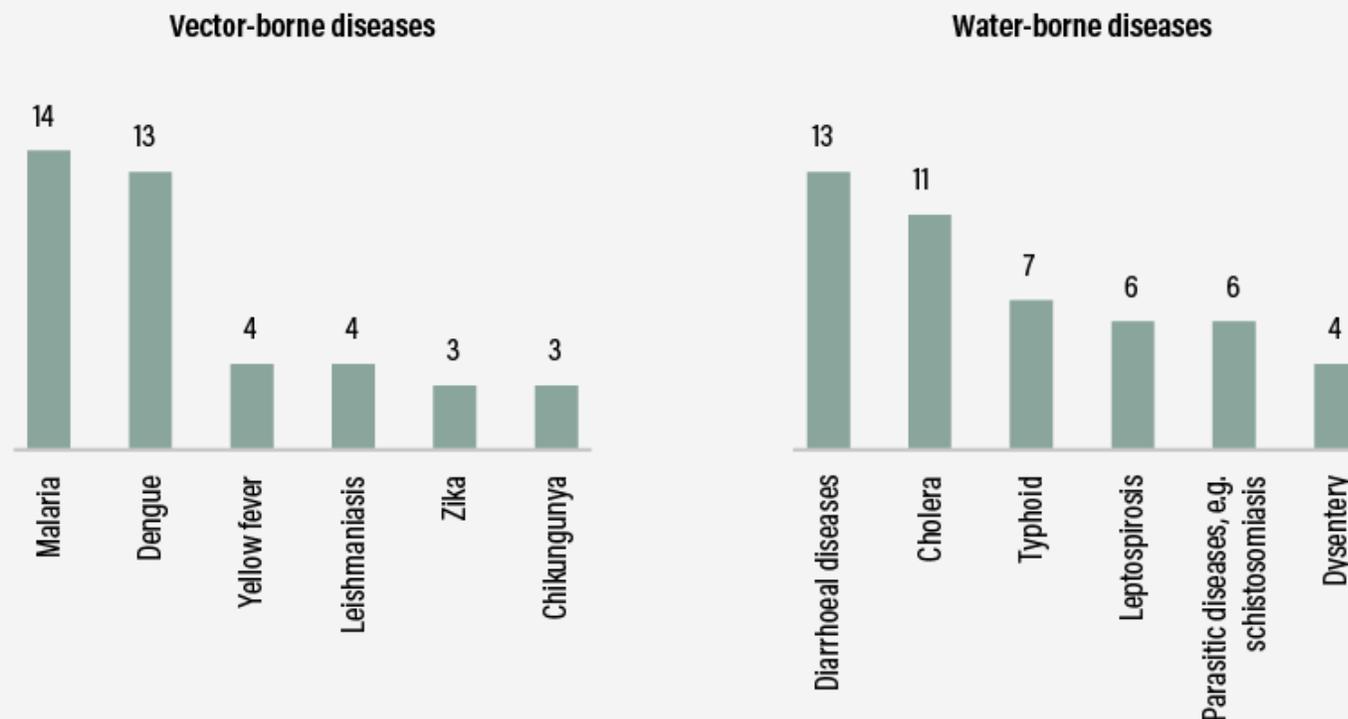
Health impacts	Examples
Health impacts of extreme weather events	Injury or death
Heat-related illnesses	Heat stroke, heat rash, heat cramps, heat exhaustion
Respiratory illnesses	Infections, obstructive airways disease (such as asthma) and the pulmonary effects of heat and air pollution
Water-borne diseases and other water-related health impacts	Cholera, schistosomiasis, diarrhoeal illnesses, harmful algal blooms, leptospirosis
Zoonoses	Rabies
Vector-borne diseases	Malaria, dengue fever, zika virus, chikungunya, lyme disease
Malnutrition and food-borne diseases	Underweight, wasting, stunting micronutrient deficiencies, food-borne diseases causing diarrhoeal illness, ciguatera
Noncommunicable diseases	Circulatory diseases (such as cardiovascular disease, cerebrovascular disease, hypertension), endocrine disorders (such as diabetes), cancers
Mental and psychosocial health	Depression, anxiety, post-traumatic stress disorder
Impacts on health care facilities	Destruction of infrastructure, disruption of supply chains, impaired water access and availability, disruption or discontinuation of health services
Effects on health systems	Compromised access to health services, additional strains on scarce resources

Review: Health in National Adaptation Plans

All NAPs consider a range of **climate-sensitive health risks** (CSHRs).

Most frequently included were vector-borne and water-borne diseases.

Number of NAPs which included specific diseases

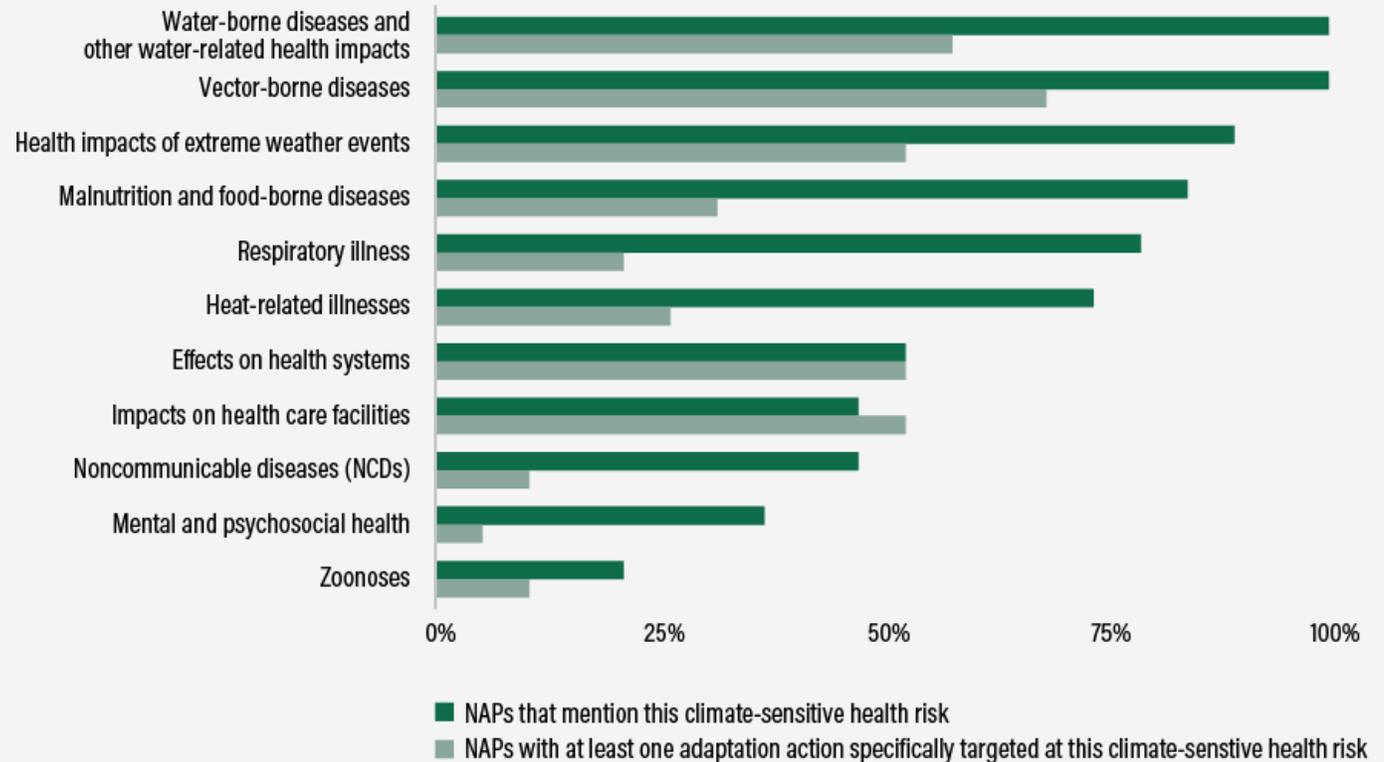




Review: Health in National Adaptation Plans

There are gaps between the **CSHRs identified** and the **specific actions** required to address them.

The comprehensiveness of climate-sensitive health risks in NAPs:



Implementation Strategies:



Health adaptation measures in the form of **policies, projects and programmes**



Coordination with the **NAP process**, national development priorities, and other health-determining sectors, can promote synergies and increase success



The **HNAP** can be used to help **mobilize financial resources**

A case study from Republic of Montenegro

- A national working group with representatives from various key health institutions was established
- Strong emphasis on the adequate allocation of human and financial resources and approaches to overcome institutional barriers
- A resource mobilization plan was a key element for implementation



Resourcing



Estimation of the required resources for HNAP implementation – human and financial



Resource mobilization strategy

Reporting, monitoring and review



Strengthen health monitoring systems for **health vulnerability** and **health system resilience**, for example, integrated surveillance and early warning systems

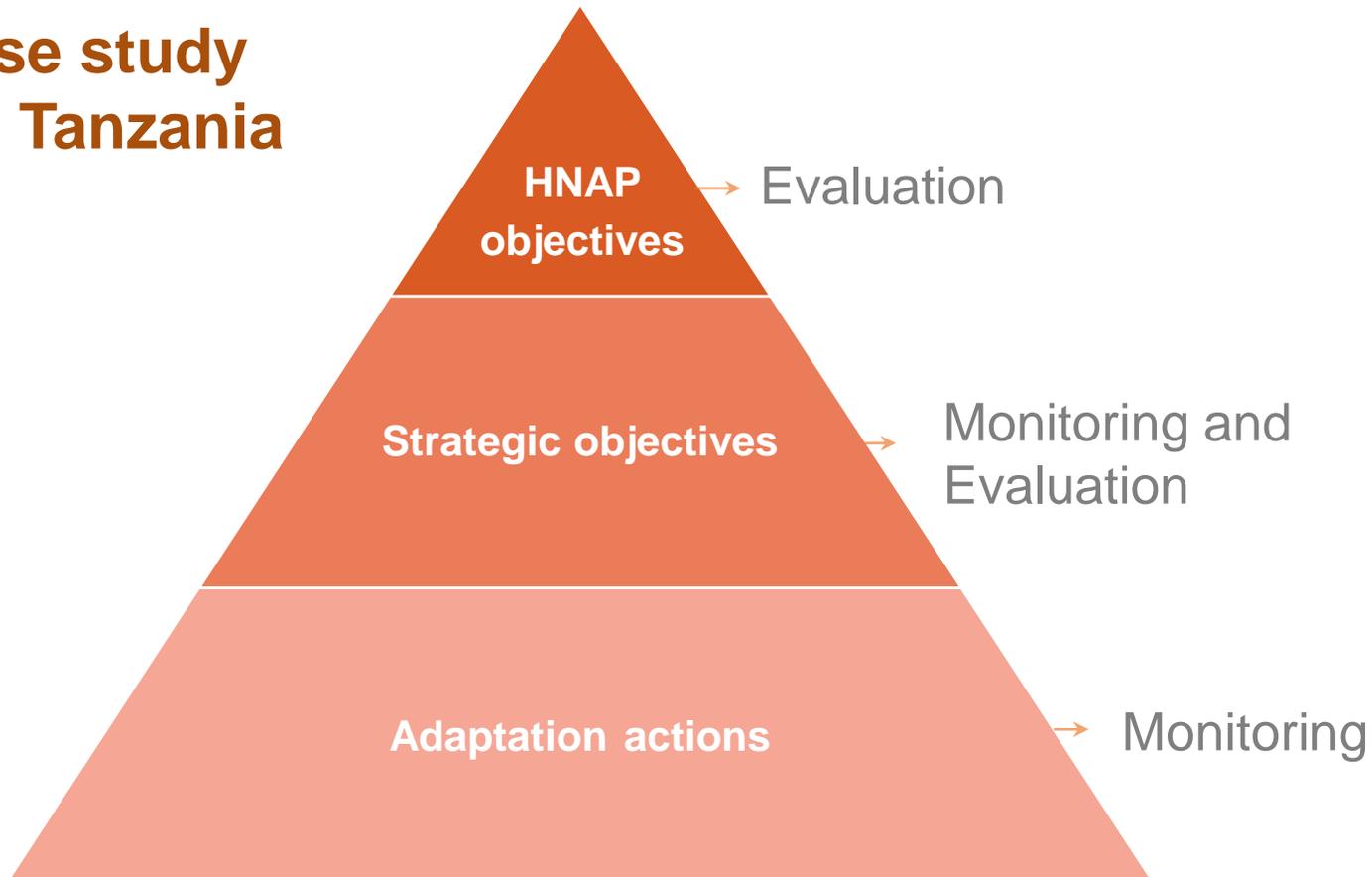


Integrate cross-sector monitoring of **health indicators**, and include **climate indicators** within national health monitoring systems



Iteratively update the HNAP, each time the NAP is revised

A case study from Tanzania



Monitoring, evaluation and reporting

- Comprehensive monitoring, evaluation and reporting plan included in HNAP
- Periodic HNAP iterations



HNAP + Quality criteria



Leadership and enabling environment

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Cross-sectoral coordination and policy coherence

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Quality criteria for health national adaptation plans. Geneva: World Health Organization; 2021



World Health
Organization



**World Health
Organization**

A Health National Adaptation Plan (HNAP) in Montenegro

Dr Borko Bajić

Montenegro NFP for Environment and Health Process

Institute for Public Health Montenegro



WHO CCH Technical WEBINAR SERIES

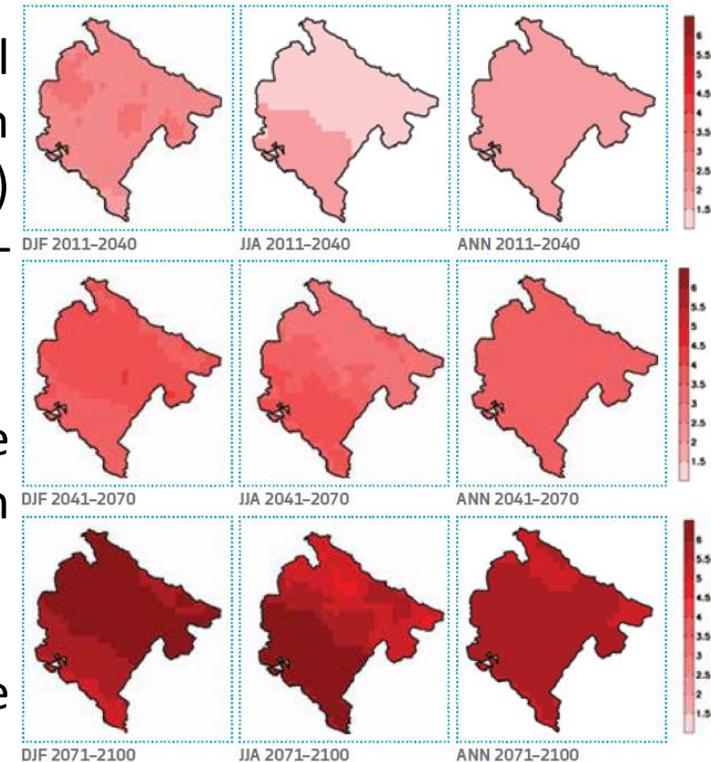
Developing a Health National Adaptation Plan: Quality criteria for HNAPs

25th September 2024



Climate Change in Montenegro

- Due to geographical location, topography and socio-economic characteristics, Montenegro is particularly vulnerable to the effects of climate change.
- The results from the climate projections show an increase in the annual temperature of 1.5° C to 2° C by 2040 throughout the country. The increase in the temperature during the winter months December–January–February (DJF) is expected to be between 2° C and 2.5° C, and in the summer months June–July–August (JJA) it is expected to be on average around 2° C.
- The impacts of climate change are already visible in Montenegro and are expected to result in additional impacts in key sectors, including the health and water sector.
- The average annual temperature in 2023 was + 2.5 °C higher than the climatological norm for the period 1961-1990.
- 2023 was the warmest year over a larger area of the country: spring +0,9 °C, summer +3,9 °C , autumn +1,97 °C, winter 1,16 °C.



Developing Program on climate change adaptation in the health sector process

Continuous support by WHO

May 2017

Workshop on initiating the development process of the HNAP

May –December 2017

Meeting of the coordination team for process planning
Forming Working group on climate change and health

January-June 2018

First draft version finalized by the Coordinator Workshop for determining the first draft version

June-December 2018

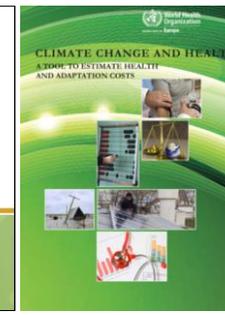
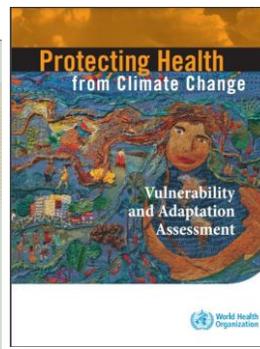
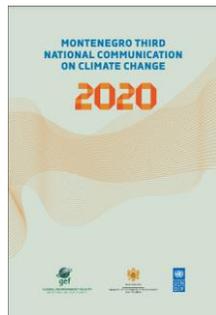
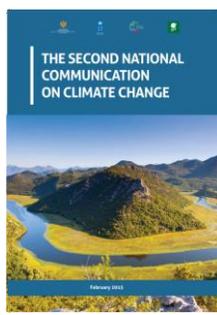
Presenting the first summarized product to the Ministry and sharing it with the other institutions

2019

Stakeholder roundtable
Preparation of a final version and delivery to the Government of Montenegro

2020

Program on climate change adaptation in the health sector adopted by Government



Program on climate change adaptation in the health sector

STRATEGIC OBJECTIVE I:	Reduce the vulnerability of the health sector to climate change
Operational objective 1:	Strengthen the foundations of public health and health services
Operational objective 2:	Strengthen the involvement of the health sector in the development of plans for emergency situations and the development of early warning systems
Operational objective 3:	Reducing morbidity and mortality from infectious diseases (airborne and foodborne diseases) attributed to climate change
STRATEGIC OBJECTIVE II:	Improve measures to adapt the health sector to climate change
Operational objective 1:	Generating evidence on the impact of climate change on health and incorporating it into climate change policies and practices
Operational objective 2:	Raising the level of public awareness about climate change and its impact on health
Operational objective 3:	Raising the level of readiness of health institutions to act in difficult conditions due to climate change

Comprehensive coverage of climate-sensitive health risks

- Desk review of all available evidence informs the development of the HNAP;
- Priority action areas identified;
- The Action Plan has three levels of performance to track progress towards climate-resilient readiness of health institutions:
 - (i) insufficiently prepared system of public health and health services to respond to climate change;
 - (ii) strengthened system of public health and health services to respond to climate change;
 - (iii) a prepared system of public health and health services to respond to climate change.

Comprehensive coverage of climate-sensitive health risks

- Support integration of health issues into climate change related policies, measures and strategies, through strengthening health sector engagement in emergency planning for extreme weather events and developing cross sector plans
- Support strengthening health, social and public health systems and services, through
 - (a) integration of climate change into health policy,
 - (b) strengthening environmental health, laboratory and PH services,
 - (c) Strengthening surveillance of climate sensitive diseases
- Raise awareness and build capacity on mitigation climate change health risks
- Estimation of the human, financial and other resources.

Challenges in developing and implementing their HNAP

- Low awareness and understanding of the health impacts of climate change, both in the Ministry of Health and in other health-determining sectors;
- Lack of evidence-base to inform HNAP development;
- Lack of a comprehensive range of adaptation actions needed to build a climate-resilient health system;
- Lack of resource planning for HNAP implementation, including a strategy to mobilize required funds.

“Enhancing Montenegro’s Capacity to Integrate Climate Change Risks into Planning” (NAP Project);

- Approved for funding under The Green Climate Fund Readiness Programme (GCF), aimed to bolster Montenegro’s institutional resilience against climate change impacts.
- A comprehensive stocktaking exercise in collaboration with national stakeholders and the Government of Montenegro identified water, agriculture, tourism, and health as the initial sectors prioritised for intervention;
- The National Council for Sustainable Development established a permanent working group, backed by UNDP, to support mitigation and adaptation to climate change.

“Enhancing Montenegro’s Capacity to Integrate Climate Change Risks into Planning” (NAP Project);

The key climate vulnerability findings for the health sector are:

- Higher temperatures increasing mortality and incidence of disease in vulnerable populations, increase in food and vector-based disease and reduced nutrition;
- Poor air quality health impacts, increased in energy-related pollution and wildfires;
- Increased coastal and inland flooding and poor water quality, increasing incidence of drowning, illness and mental health
- Insufficient number of healthcare professionals and lack of capacity on climate related risks
- Geographic–regional discrepancies in the access to healthcare. Remote and socially deprived population groups
- Adequate health screening of vulnerable populations.

NAP – Health objectives and measures

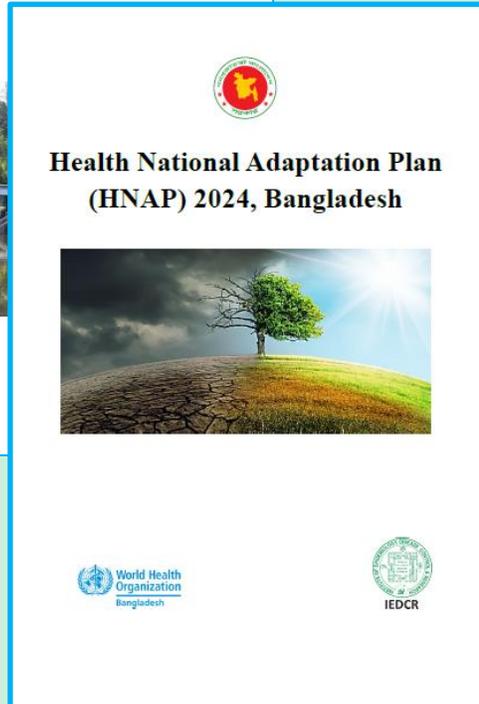
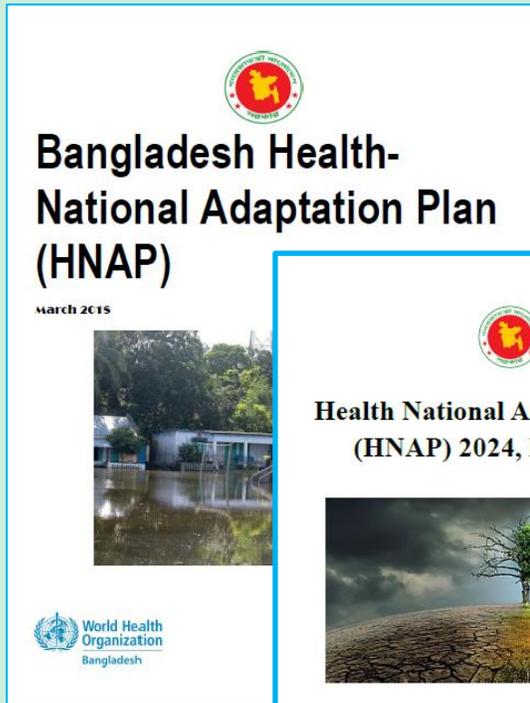
High Priority Adaptation Measure
Medium Priority / Shortlisted Adaptation Measure
Lower Priority / Longlisted Adaptation Measure

HSO – Health Strategic Objective
HOO – Health Operational Objective
H – Adaptation Measure

Thank you for your attention!

Strategic Objective	Operational Objective	Adaptation Measure
HSO 1. Improved human and technical capacities of the health sector to provide timely planning and response to climate hazards, with a particular focus on marginalized groups.	HOO 1.1 Enhance preparedness of the sector to climate change through development of processes and systems	H1.1.1 Improve the preparedness of staff, facilities and systems for climate hazards, through training, climate risk assessments and specific interventions .
		H1.1.2 Include and define health sector's role in hazard preparedness and response in the national and local level readiness plans
		H1.1.3 Introduce an early warning system to prepare the health sector for appropriate response during the weather extremes, supported by training programs to enhance knowledge and skills of the workforce in the health care facilities
	HOO 1.2 Improved capacity of healthcare providers to reduce vulnerabilities to climate change	H1.2.1 Improve working conditions for healthcare workers and improve capacity and staff levels in rural areas to reduce regional disparity in healthcare and vulnerability to climate change
		H1.2.2 Provide the health care system in the country with essential medical products, service delivery, technologies, and health care infrastructure for climate adaptation and resilience
	HSO 2. High-resolution data collection and management for evidence-based planning and evaluating specific vulnerabilities leading to targeted adaptation measures.	HOO 2.1 Support research into health sector and climate change
H2.1.2 Conduct field research on homelessness and health In line with the legal framework on social housing and National Housing Strategy		
H2.1.3 Defining and implementing priority research in areas (such as vector borne diseases, impacts of heat waves)		
HOO 2.2 Support data collection and management into health sector and climate change		H2.2.1 Setting up procedures, legal and institutional mechanisms for systematic collection of data for digitalization of health sector and data management including on: healthcare statistics, new and prospective diseases, climate change related hazards and ensuring sex disaggregated data, with sufficient training of staff on digitalization and collecting data
		H3.1.1 Development and promotion of education, awareness raising and general guidelines and support of facilities for the population during heat waves and extremes.
		H3.1.2 Introduce evidence-based heat wave protection action plans and implement selected pilot projects in Podgorica and Danilograd
HSO 3. Improved public awareness, particularly for vulnerable groups, to reduce the health related impacts of climate change.	HOO 3.1 Implement public preparedness and awareness campaigns and measures	H3.2.1 Develop a Long-Term Strategy on Climate Action in Health Sector which is in line with the EU requirements and prospects for climate action until 2050.
		H3.2.2 Define, legally regulate and institutionalize the national climate adaptation planning processes for health sector
	HO 3.2 Develop a legislative framework for gender sensitive climate action in the Health sector	

Source: Draft NAP Report 2024



HEALTH NATIONAL ADAPTATION PLAN (H-NAP)

*Ahammadul Kabir
Programme Officer Climate Change
WCO BAN*

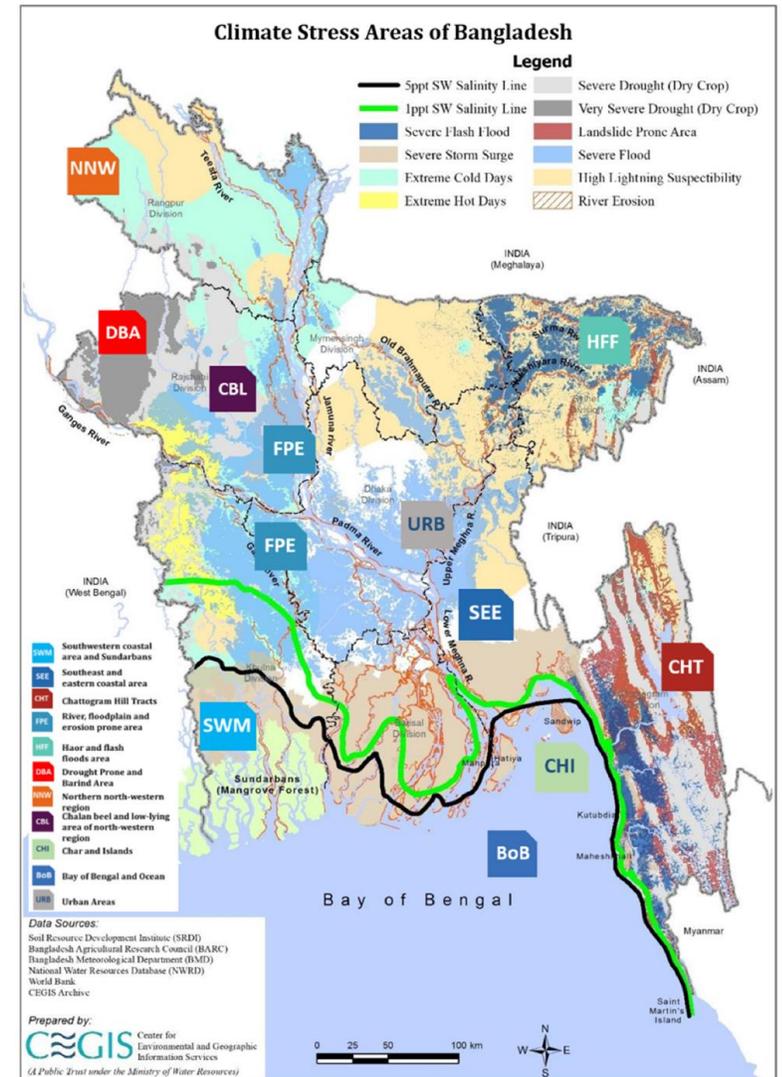
Health Sector is a Separate Sector

Impacts climate change and variability on human health and the health sector are **visible with a variable degree and magnitude.**

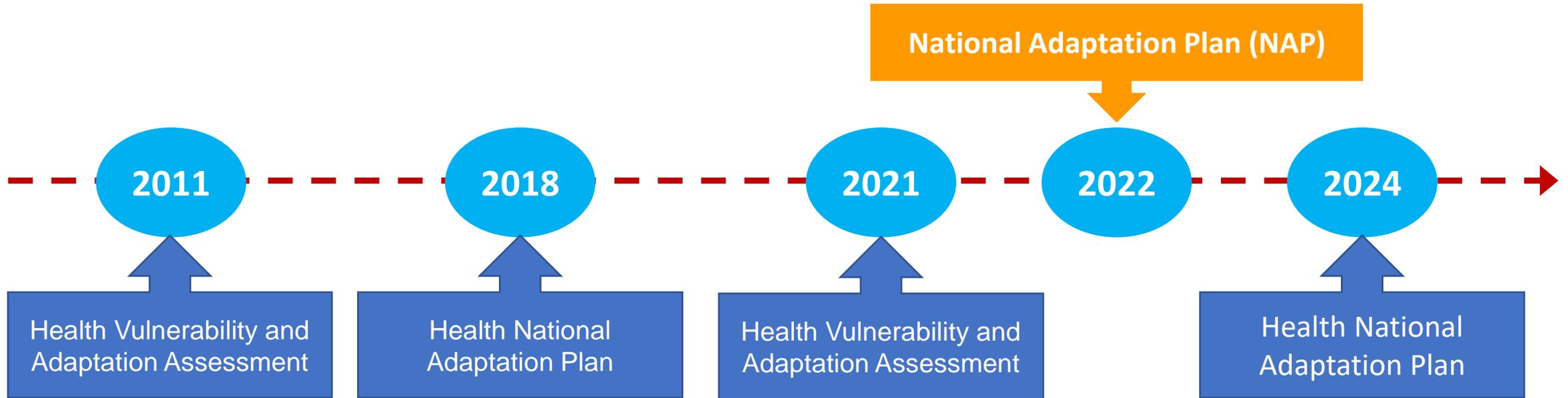
The **cause-effect relations of human health to climate** stimuli yet not properly and adequately understood.

Improve understanding of the health impacts and adaptation to climate change among relevant stakeholders, including health policy makers, professionals, workers, program designers, program implementers, civil servants, civil society members are indispensable

A concrete **adaptation plan for health and the health sector** is necessary

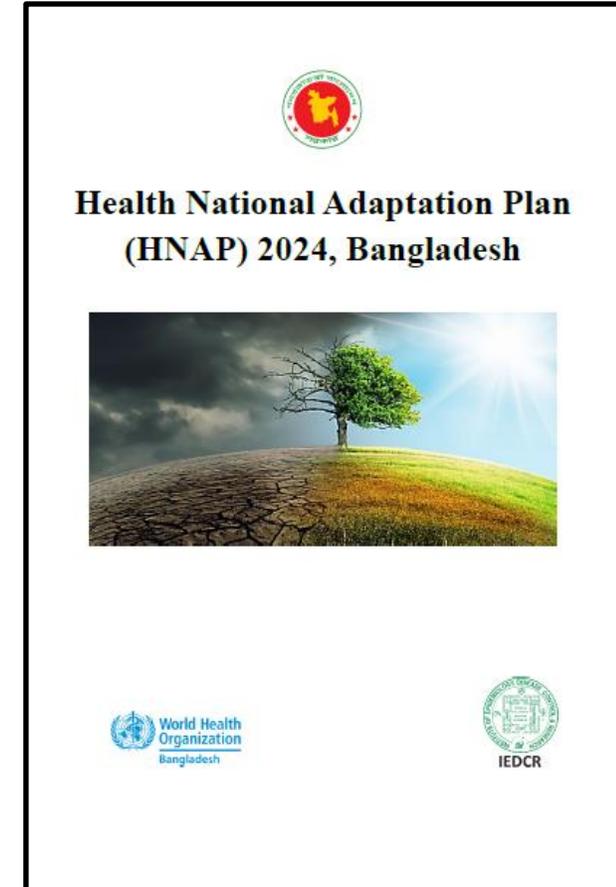
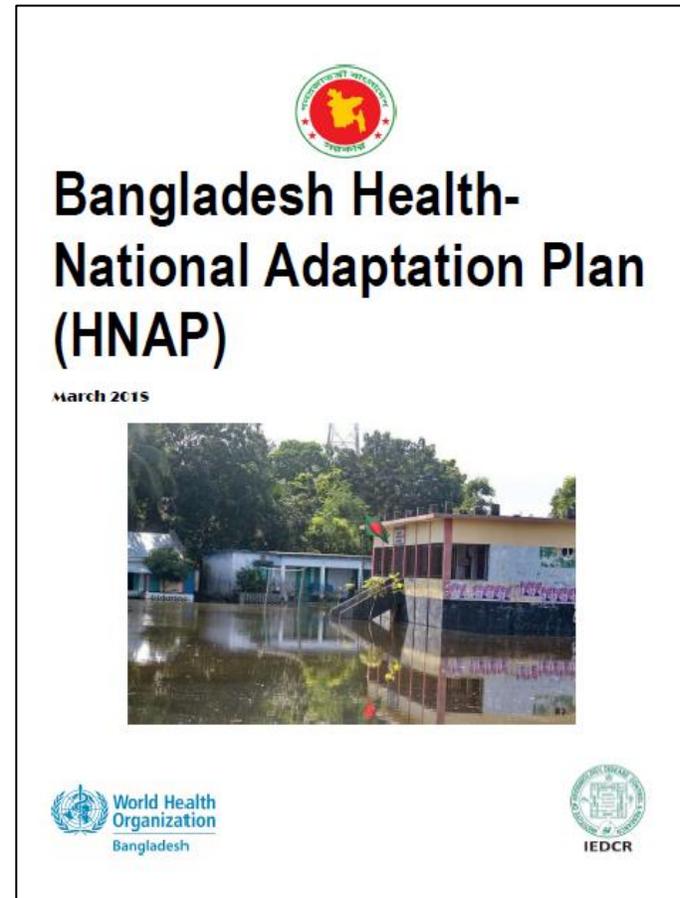
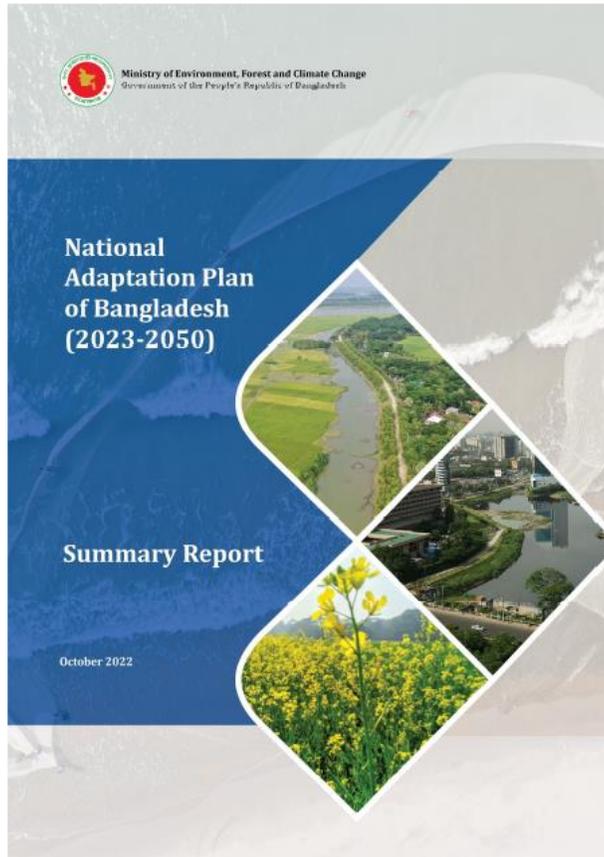


The H-NAP Development



The Bangladesh Health-National Adaptation Plan (H-NAP) is a comprehensive document designed to guide the country toward building resilience to climate change impacts on health by empowering communities and individuals through an adaptive and sustainable health system in Bangladesh. It was developed as part of the National Adaptation Plan (NAP)

The H-NAP



The National Adaptation Plan for Health (H-NAP) is being developed and the Climate Change Gender

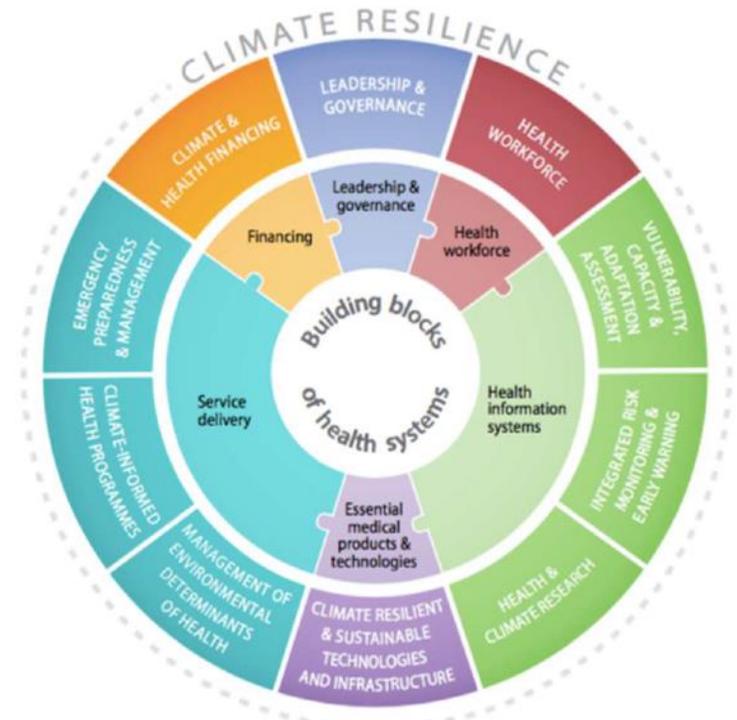
All these plans will be mainstreamed into NAP implementation process through complementing the updating the BCCSAP or ISAP-CC preparation.

Aim (s) of HNAP

HNAP aims to give strategic guidance to the Bangladesh health sector for establishing a climate-resilient health system, including increased capacity

Building Block of H-NAP

1. Leadership and Governance
2. Health workforce
3. Health Information System
4. Essential Medical Products and Technologies
5. Service delivery
6. Financing



- To plan health adaptation measures
- To prevent and/or overcome existing and future risks
- To respond promptly to climate change risks for health and well-being

How H-NAP (2018) Developed?

Guided by

CC&H vulnerability and adaptation assessments (WHO, IEDCR 2011)
Health Adaptation Strategy (WHO-2012)
Health, Population and Nutrition Sector Development Plan HPNSDP 2017-2022)
Bangladesh Climate Change Strategy and Action Plan (2009)
WHO Operational Framework for Building Climate-Resilient Health Systems (2015).

Literature Review

All relevant policies and legislation
Strategies and programmes, Studies on
climate change and health



H-NAP

Collaboration

CCHPU, IEDCR, Health
stakeholders, WHO

Communication and Consultation

National Workshop (Dhaka)
Regional Workshop (Sylhet and Cox
Bazar)



How H-NAP (2024) Developed?



Technical Workgroup

Lead the whole process of H-NAP the development

Guided by

- National Adaptation Plan (NAP)
- National Health Policy
- Health Vulnerability and Adaptation Assessment of Climate Change Impact 2015, 2021
- Health National Adaptation Plan (H-NAP), 2018
- Nationally determined contribution (NDC), 2021
- Health Population Nutrition Sector Development Program (HPNSDP).

Literature Review

All relevant policies and legislation Strategies and programmes, Studies on climate change and health

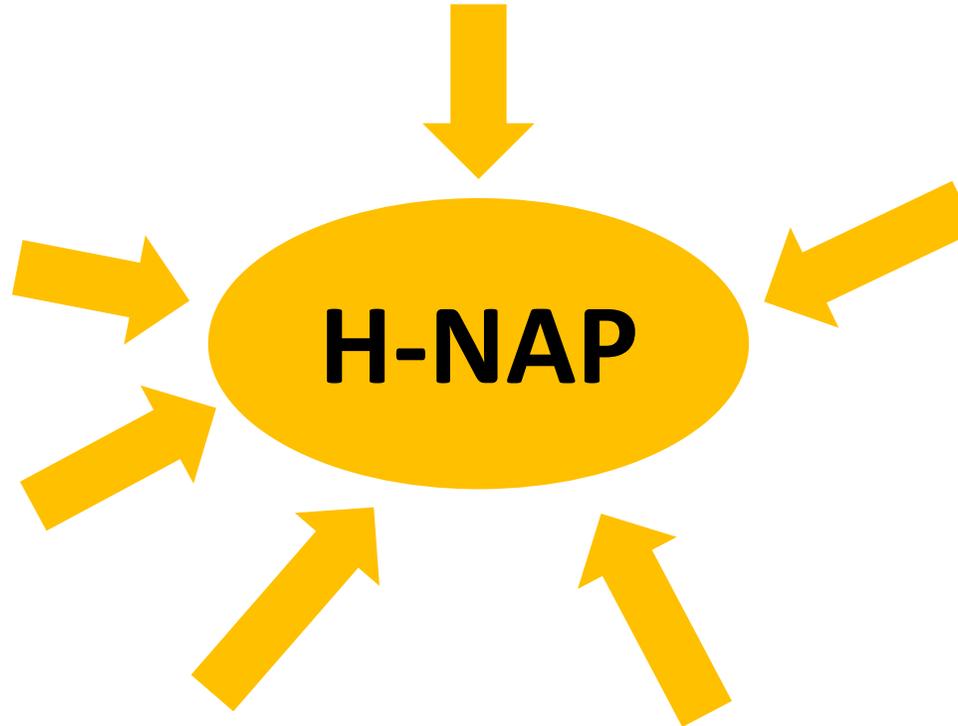
Technical Workshop

Relevant Line Directors of DGHS and NGO working in the field of health and climate change

Collaboration/Communication

Director General, Additional Director General, DGHS, Director NIPSOM, and Director Disease Control, Climate Change focal point MoHFW, CCHPU, WHO

Implementation Roadmap and Costing



Contents of H-NAP

2018

-  Climate change and health issues in Bangladesh, objective and need for a separate **adaptation plan**
-  Climate change and health related risks and **disease outcome**
-  Climate change and health related **Institutional policy framework**
-  Building **climate resilient** health system
-  H-NAP **implementation strategy** (action plan, financing strategy, cost estimates and source of funding)
-  H-NAP **monitoring, evaluation and reporting**
-  **Stakeholder** engagement and monitoring

2024

-  Climate change and health issues in Bangladesh, objective and need for a separate **adaptation plan**
-  Climate-related health risks and **disease outcomes (updated)**
-  **Climate change and health issues, objective and adaptation plan**
-  Climate change and health-related **institutional and policy framework**
-  Building a **climate-resilient health system**
-  HNAP **implementation strategy**
-  Surveillance, **monitoring, evaluation and reporting**
-  HNAP action plan 2024-2029 and **costing with Cost benefit Analysis**
-  **Financing strategies** and potential sources of funding
-  HNAP **review process**

Lessons Learned from Some of the H-NAP Quality Criteria

Quality Main Criteria	Quality Sub Criteria	H-NAP 2018	H-NAP 2024
Leadership and Enabling Environment	• MoH leads the Development	Yes	Yes
	• Government endorsement and approval	Pending	Ongoing
	• Active engagement of health sector in the process to formulate and implement the NAP	To some extent	Yes
	• Climate informed health planning and programing	To some extent	Yes
Comprehensive Coverage of Climate Sensitive Health Risks	• Was a comprehensive V&A assessment done before the H-NAP	Yes	Yes
	• V&A and other evidence used to inform H-NAP	Yes	Yes
	• Prioritization climate sensitive health risk	To some extent	Yes
Resourcing	• Is there any estimation of required resources for H-NAP	To some extent	Yes
	• implementation (HR & Finance)	No	Yes
	• Is there any resource mobilization strategy	No	Yes
Monitoring, Evaluation and Reporting	• Are the actions being implemented?	No	Not Yet
	• Are they contributing to the strategic objective?	Unknown	--
	• Are we increasing resilience on the health system to climate change?	Unknown	--
	• Are we reducing the climate sensitive health risk of the population	Unknown	--

TWG consisted of representatives from

1. *Ministry of Health and Family Welfare*
2. *Addl. Director General (ADG), Planning and Development, Directorate General Health Services (DGHS)*
3. *Director, Planning & Research , DGHS*
4. *NIPSOM (Department of Occupational and Environmental Health),*
5. *Director (Planning and Development), DGME*
6. *Director IEDCR*
7. *Director (Disease Control), DGHS*
8. Representative from **icddr,b** (working on Environment and Health)
9. Representative from **Department of Environment (DoE)**
10. Representative from **Bangladesh Meteorological Department (BMD)**
11. Program Manager **Climate Climate Project**
12. **WHO Technical Professionals**

- Conduct vulnerability and adaptation assessment before starting the H-NAP development and build rapport with health sector government and non-government organization for prioritizing the Climate change impact on health **(Leading/Communication)**
- Involve the Health Ministry, Departments and Major NGOs working the field of Health and the NAP authority (if existed) in the H-NAP development process **(Ownership)**.
- H-NAP Implementation planning need to include the doable activities for building resilience to health system considering the country situation (HR, technical and financial resources) **(Resource availability)**

Thanks

Agenda

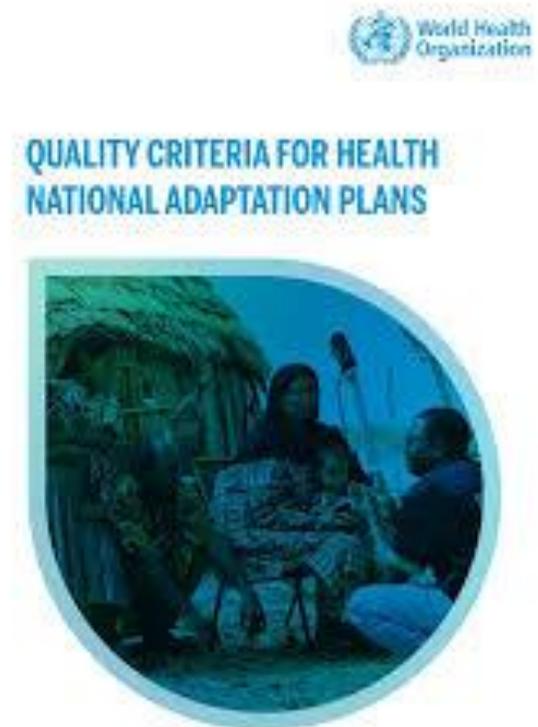
Time	Agenda item	Speaker
15:00 – 15:05 (5 minutes)	Welcome and Housekeeping	Dr Yiqi Pan, Technical Officer, Climate Change and Health Unit, WHO
15:05 – 15:10 (5 minutes)	Opening remarks	Dr Diarmid Campbell Lendrum, Unit Head, Climate Change and Health Unit, WHO
15:10 – 15:40 (30 minutes)	Health National Adaptation Plans (HNAPs): Quality Criteria	Dr Karen Polson, Advisor Climate Change and Health, WHO PAHO
15:40 – 15:50 (10 minutes)	Country experience 1: HNAP Quality Criteria – Saint Lucia	Mrs Lauren Blanchard, Health Planner, Ministry of Health, Wellness and Elderly Affairs Saint Lucia
15:50 – 16:00 (10 Minutes)	Country experience 2: HNAP Quality Criteria - Nigeria	Dr Edwin Edeh, National Technical Officer, Public Health & Environment, WHO Nigeria
16:00 – 16:20 (20 minutes)	Interactive activity	
16:20 – 16:28 (8 minutes)	Group feedback	Breakout group volunteers Moderated by Karen Polson
16:28– 16:30 (2 minutes)	Close webinar	Dr Yiqi Pan, Technical Officer, Climate Change and Health Unit, WHO

Saint Lucia's Health National Adaptation Plan

Fulfillment of Key Quality Criteria



Presented by: Lauren S. Blanchard,
MOHWEA, Saint Lucia



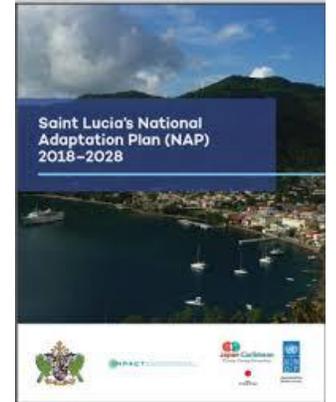
PRESENTATION OVERVIEW

- Background
- Brief Overview of SLU HNAP Key Strategic Priorities
- Focusing on Key Quality Criteria: Leadership and Enabling Environment.
- Potential Areas for Improvement
- Recommendations



BACKGROUND TO THE ST LUCIA HNAP

- National Adaptation Strategy 2018-2028
 - Health -3 outcomes/7 strategic objectives
- HNAP - Part of the broader National Adaptation Plan
- Efforts for development of HNAP date as far back as 2019
 - GCF Readiness Project
 - PAHO/EU-Funded Cariforum Project



SAINT LUCIA HNAP

HEALTH STRATEGIC PRIORITIES



HSP 1

To build the capacity of the MOH to plan effectively in order to successfully manage the impacts of a changing climate on public health .

HSP 2

To improve capacity and create an enabling environment for the health sector to respond and adapt to the impacts of climate variability on public health



HSP 3

To reduce the vulnerability of the health sector to negative impacts of climate variability, extreme weather events and health shocks.

HSP 4

To continually improve the health sector's resilience to thrive under climate variability and extreme weather events.



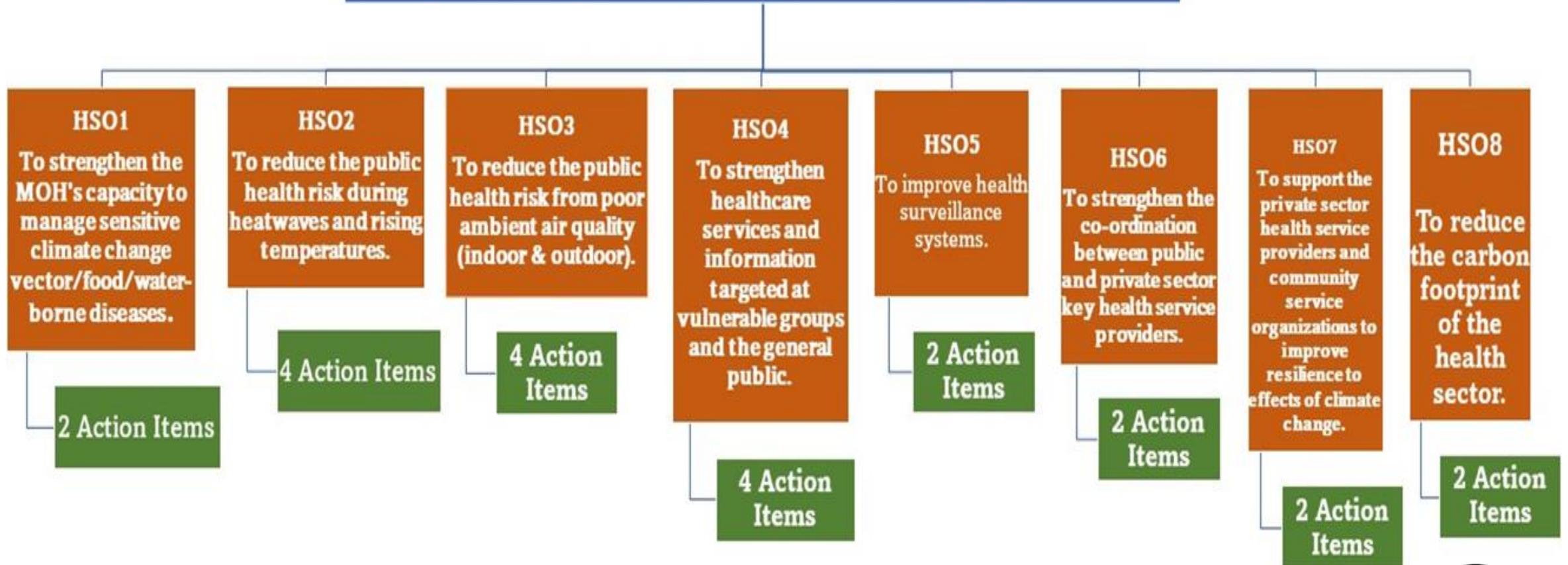
HEALTH STRATEGIC PRIORITY #1 [HSP1]

To build the capacity of the MOH to plan effectively in order to successfully manage the impacts of a changing climate on public health



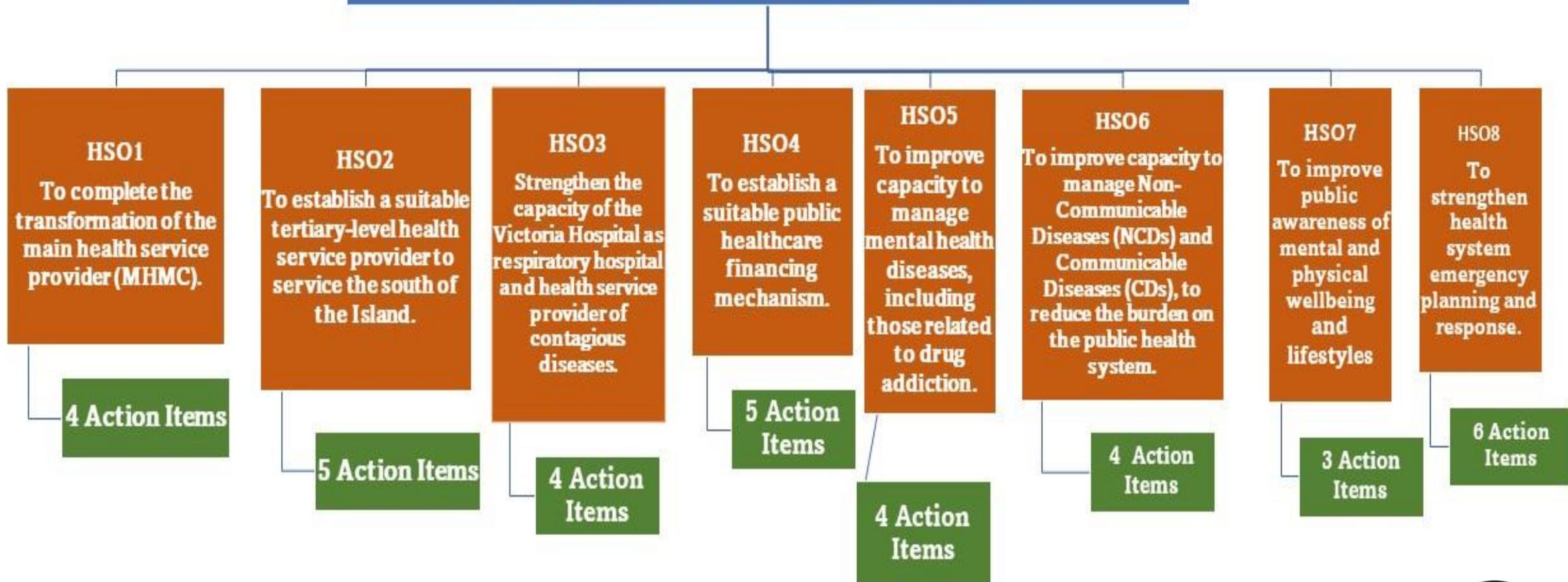
HEALTH STRATEGIC PRIORITY #2 [HSP2]

To improve capacity and create an enabling environment for the health sector to respond and adapt to the impacts of climate variability on public health



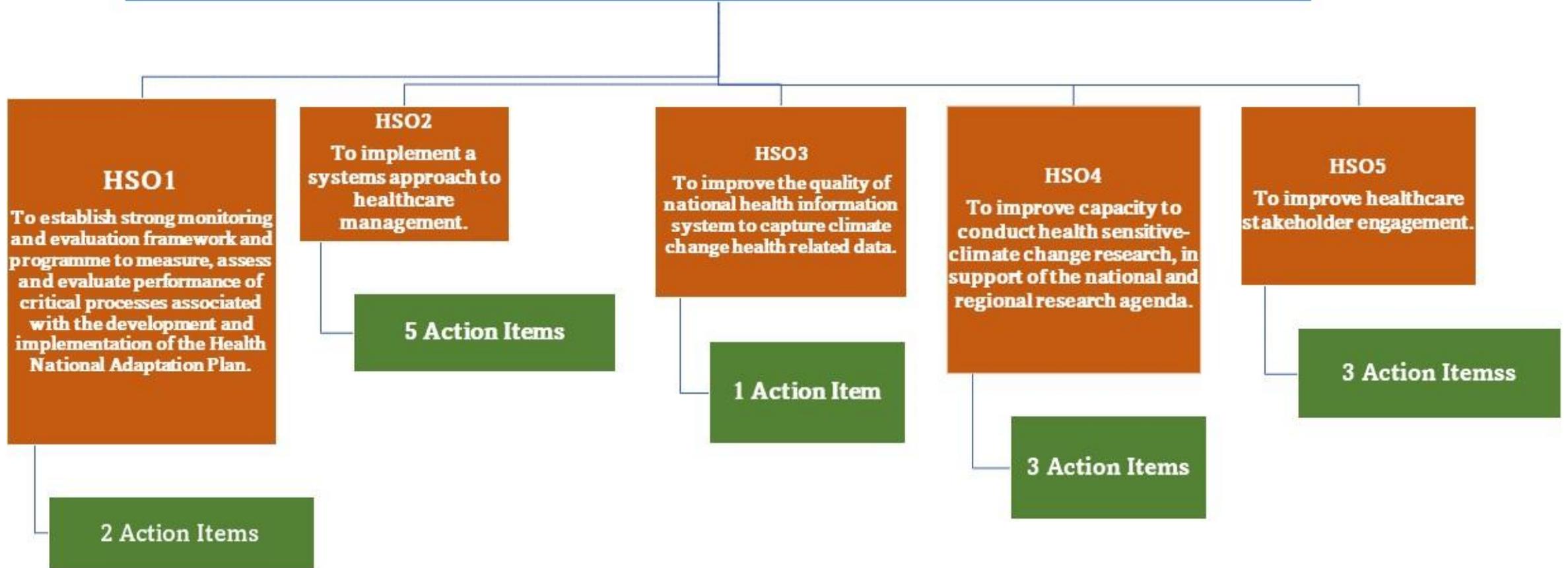
HEALTH STRATEGIC PRIORITY #3 [HSP3]

To reduce the vulnerability of the health sector to negative impacts of climate variability, extreme weather events and health shocks.



HEALTH STRATEGIC PRIORITY #4 [HSP4]

To continually improve the health sector's resilience to thrive under climate variability and extreme weather events.



LEADERSHIP AND ENABLING ENVIRONMENT

- Ministry of Health leads HNAP Development
 - MOH leadership/commitment to predates the NAP and HNAP Development
 - NAP Development, MOH ensured that Health was represented
 - Two focal points for Climate and Health
 - MOH was actively seeking out opportunities for HNAP/SASAP Development.
 - GCF Readiness
 - EU/Cariforum Project ✓
 - Consultant prepared HNAP – with heavy involvement of health stakeholders.



QUALITY CRITERIA FOR HEALTH
NATIONAL ADAPTATION PLANS



LEADERSHIP AND ENABLING ENVIRONMENT

- Government Endorsement/Approval
 - HNAP was presented and endorsed by the Cabinet of Ministers
 - MOF confirmed HNAP was aligned with STL's overall national development goals
- Active Engagement of the Health Sector in the Process to formulate and implement the NAP
 - Health was represented in NAP Development
- Climate-Informed Health Planning and Programming
 - There was always active consultation with programme heads at the MOH during the formulation of the HNAP.
 - Even before the development of HNAP there was a concerted effort to mainstream climate change in programmes.



POTENTIAL AREAS FOR IMPROVEMENT

- Leadership and Enabling Environment
 - Climate-informed Health Planning and Programming
- Cross-Sectoral Coordination and Policy Coherence
 - Coordination and Synergy with Health-Determining Sectors
 - Communities/Public





Recommendations

- Ensure a Multi-sectoral Approach
 - To ensure a comprehensive response
- Foster Public and Stakeholder Engagement
 - Inclusive Consultations: Engage a wide range of stakeholders, including vulnerable groups (e.g., women, children, elderly), community leaders, healthcare workers, and local organizations in developing the plan.
- Ensure Policy Coherence and Alignment
- Capacity Building



Thank You!



QUALITY CRITERIA FOR HNAP: Towards a sustainable & Climate- resilient Health System in Nigeria

GLOBAL WEBINAR | 25 SEPT 2024

Dr. Edwin Isotu Edeh

Tel: 08068727856: Email : edehe@who.int ;

Public Health and Environment (PHE) Programme
UHP Cluster, WHO, Nigeria

Environmental Problems in Nigeria



Climate Change

Chemicals and Pesticides

Open Defaecation

Oil and Gas Pollution

WASH and Vector-Borne Outbreak

Poor Solid Wastes Management

Flooding

Air Pollution

Plastics in Oceans

Electronic Wastes

Country Climate Health Situation



29%

Nigeria's national disease burden is linked to risks factors from the environment



3.37 tCO₂e/ capita.

Nigeria's GHG emissions per capita

442.5 MtCO₂e

2030 Nigeria NDC target



94%

Health Facilities DO NOT have basic Water Sanitation and Hygiene services.

27-53m

People in Nigeria might need to be relocated with a **0.5m** increase in sea levels.



WHO



WASHNORM Report



UN-GLASS

Nigeria NDC

Policy Framework to Address Climate Change in Nigeria

- **National**
 - The Constitution of the Federal Republic of Nigeria
 - Sustainable Energy for All (SE4ALL) Action Agenda
 - **Nigeria Energy Transition Plan (ETP)**
 - One-Health Strategic Plan (2019-2023)
 - COP26 Climate Health Commitment - 2021
- **Regional**
 - Libreville Declaration on Health and Environment in Africa
 - African Union (AU) Climate change strategy in 2022
- **Global**
 - Sustainable Development Goals (SDGs) 2016-2030
 - Paris Agreement on Climate Change
 - WHO Global Strategy on Health, Environment and Climate Change

HNAP+

**LEADERSHIP &
ENABLING
ENVIRONMENT
(IN NIGERIA)**

1

FMOH Leading the Process

Department of Public Health - Climate Change & Environment Health Division

2

Active Engagement of the Health Sector in the Process

36+1 States CCH Desk Offices, Academia, 3-levels of Care, Partners, MDAs

3

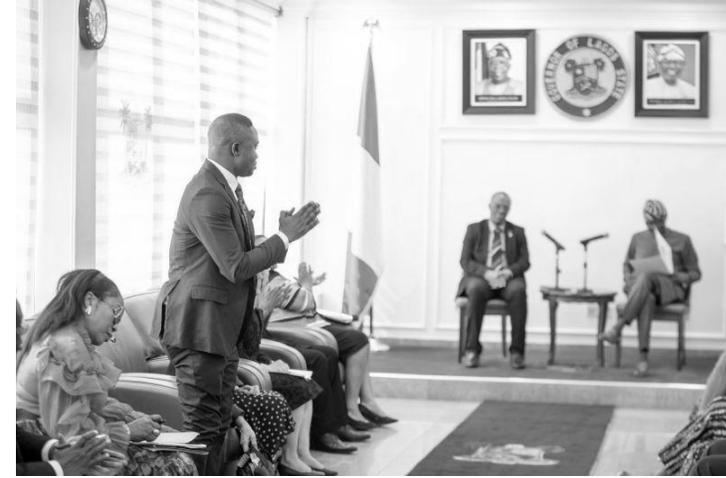
Climate Informed Health Planning and Progress

Alignment with SWAP, Sector Blueprint, CCS4.0 and One-Health Plan

4

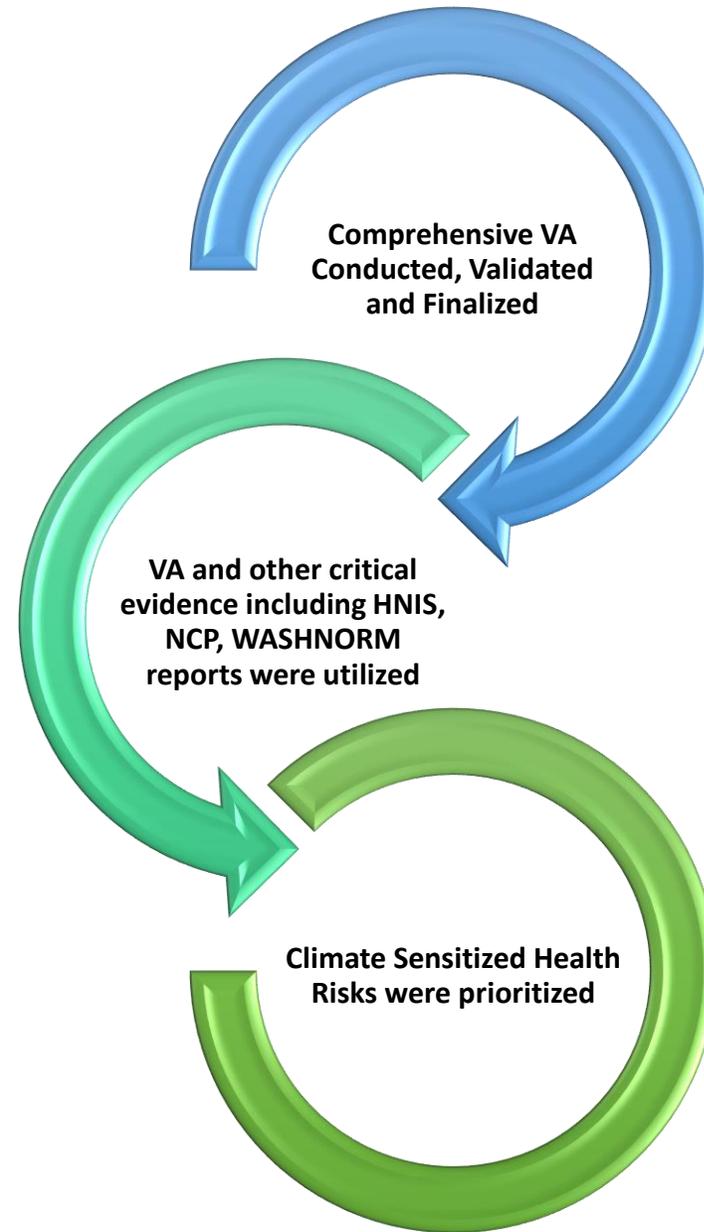
Government Endorsement & Approval

Strong COP26 Commitment backed by Ministerial Support and NCCC (Custodian of the NDC)



HNAP+

**COMPREHENSIVE
COVERAGE OF CLIMATE
CLIMATE –SENSITIVE
HEALTH RISK
(NIGERIA)**



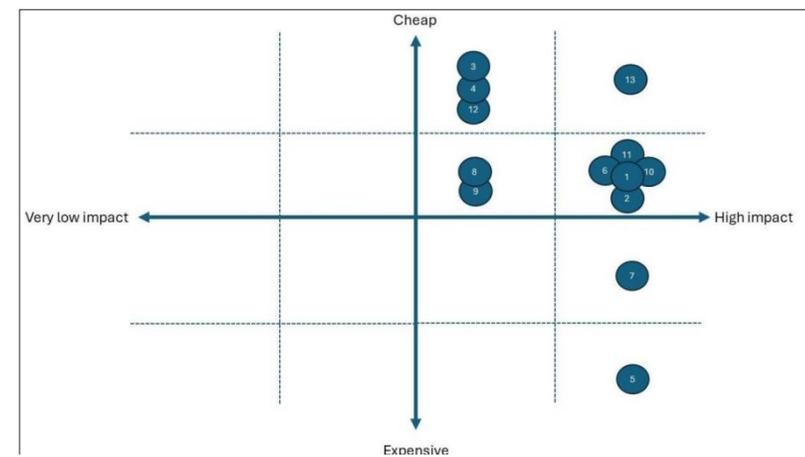
VA: Evidenced based forecast and Prioritization

- Based on only linear forecasts of current disease/impact trends in the VA, there is an anticipated +21% burden of disease in Nigeria due to climate change

Table 15. Nigeria's reported health cases, 1990 - 2030

Health risk	Reported cases			Variance
	1990 – 2019 (average per day)	2020 (estimated)	2030 (forecasted)	
Transport injuries	1,224,095	1,535,373	1,735,675	
Unintentional injuries	2,157,516	2,498,830	2,719,032	
Exposure to forces of nature	4,410	8,611	11,321	
Diarrhoea (watery without blood)	648,868	935,701	1,099,605	
Diarrhoea (with blood)	306,933	408,832	467,665	
Typhoid fever	398,743	1,045,853	1,908,665	
Cholera	13,449	10,960	9,517	
Polio	1,292	2,731	3,509	
NTDs and malaria	17,529,256,	18,770,863	19,571,899	
Dengue	408,249	274,327	68,292	
Buruli ulcer	5,159	11,299	19,486	
Guinea worm	10,879	35,157	50,514	
Filariasis	12,133	11,271	10,805	
Hepatitis B	7,413	10,487	12,471	
Leprosy	4,638	1,578	1,404	
Lymphatic Filariasis	12,133	11,271	10,805	
Measles	82,661	37,353	11,463	
Onchocerciasis spell check	8,677	15,349	19,653	
Pertussis	24,978	18,206	15,838	
Trachoma	6,010	17,434	32,666	
Trypanosomiasis	2,059	2,922	4,072	

Prioritization

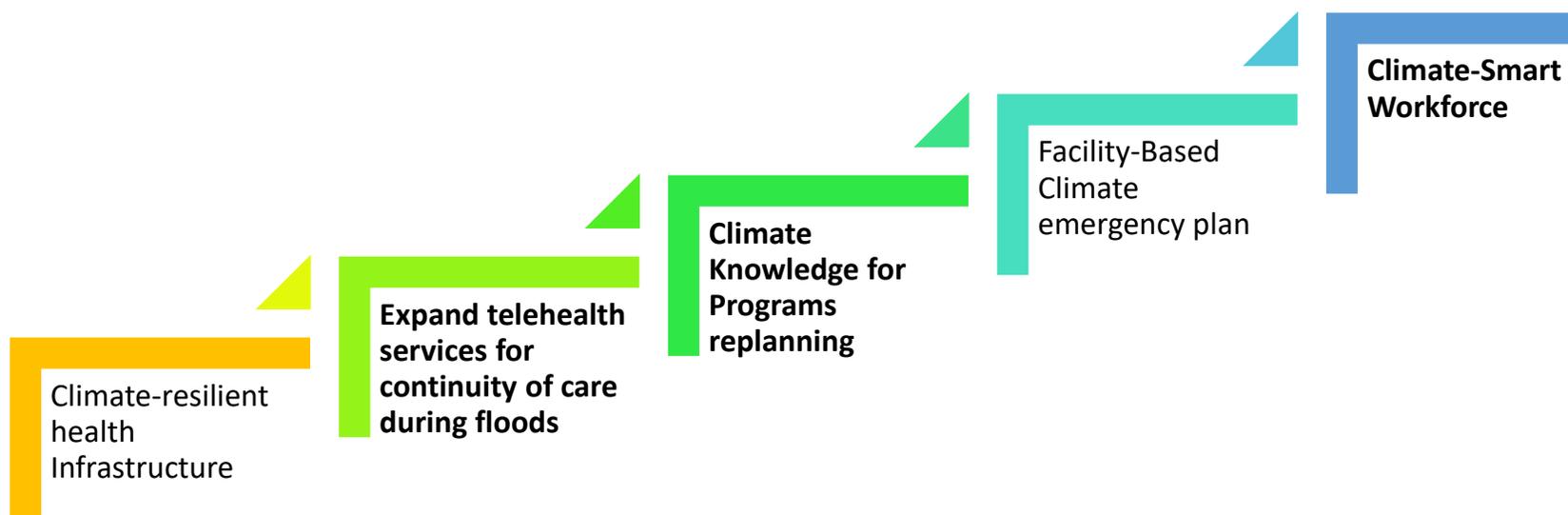


The evaluation was based on the V&A assessment's key findings and the project team's experience. The topline or summarised recommendations are shown in Table 20 below, but the evaluation was undertaken based on the detailed list of proposed actions under each topline heading, assuming that at least 50% of the suggested activities would be implemented.

Table 20. Summarised topline recommendations

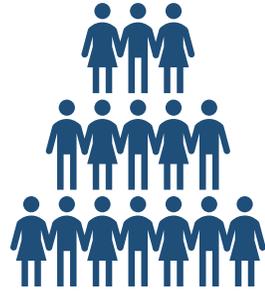
#	Topline recommendation	Impact	Measurability	Complexity	Cost
1	Develop a national public and cross sector workforce climate-health education and awareness raising action plan.	High impact	Measurable	Complex	USD 1 million to 10 million
2	Develop a climate resilient health system funding strategy	High impact	Easily measurable	Somewhat complex	USD 1 million to 10 million
3	Develop a cross sectoral action plan and collaboration plan	Medium impact	Somewhat measurable	Simple	< USD 1 million

Programme Integration: WHO Essential Climate Health Services



- **Coordination**
- **Evidence (Data) generation**
- **Capacity Building**
- **Model projects**
- **Technical Guidance**

Key Progresses



36+1 Climate Desk Officers trained by WHO, TWG Established



Vulnerability and Adaption Assessment Finalized for HNAP Development



COP 26 Health Commitment Signed & 2015 Climate Profile Developed



Climate Resilient Health Facility Initiatives – CRIBs UNICEF; HEALTH CREST (WHO)



2024 Seasonal Climate Prediction (SCP) and Flood Prediction Launched by NIMET & NIHSA



Sustainable Health Management Roadmap Drafted

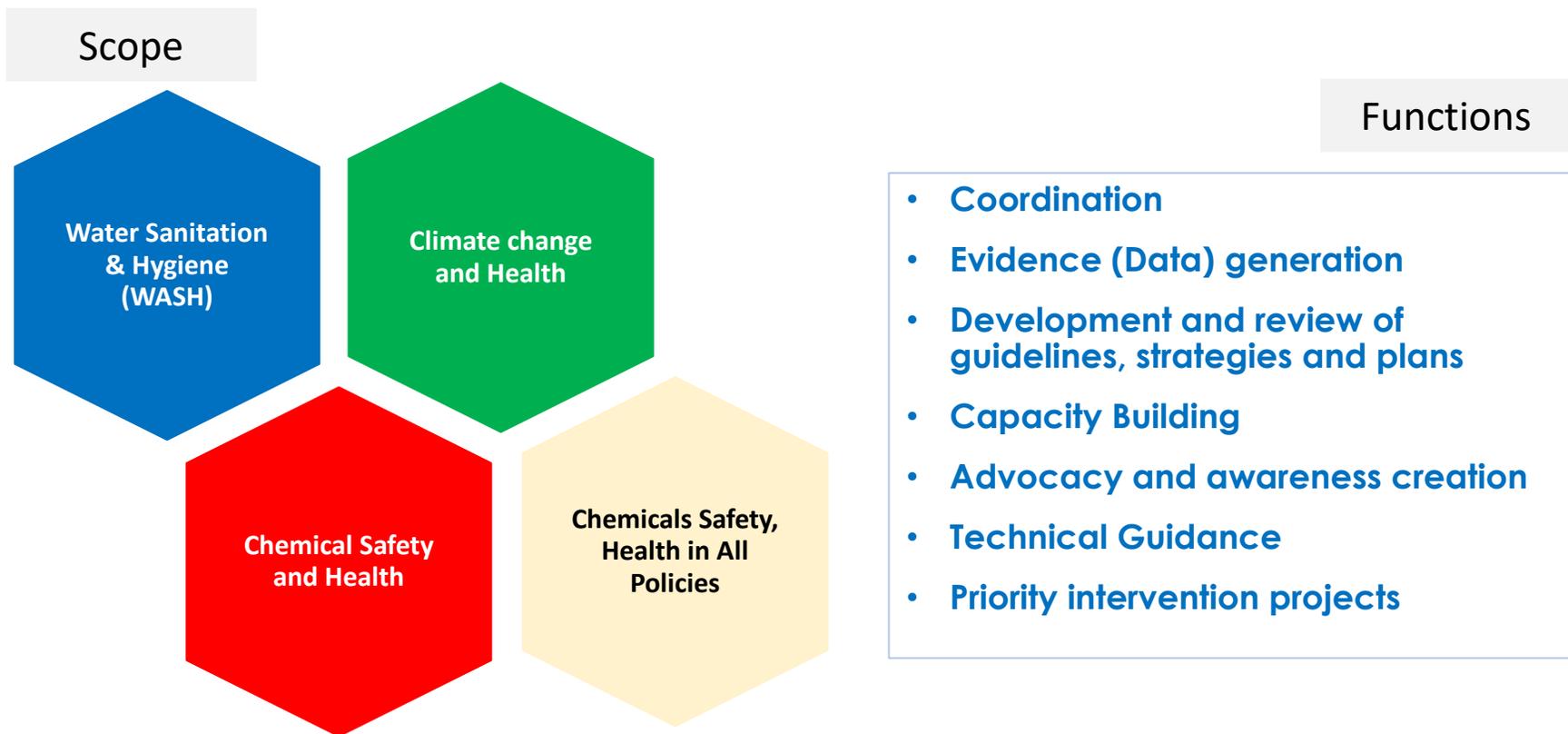
Key Next Steps



WHO Key Areas requiring Strategic Support

1. Building Climate-SMART Health Workforce	1000/18000 health workers (6 states)	Intensive
2. Improving Air Quality through GHG Monitoring Vehicles and Generators	6 states (Clean air for > 40 million pop)	Catalytic
3. HEALTH CREST - Climate-resilient WASH & Energy improvement in PHC	360 PHCs - improve access to 10%	Intensive Pilot

WHO Nigeria Areas of Work on Environmental Health





THANK YOU!

Dr. Edwin Isotu Edeh



www.who.int/nigeria



08068727856



HNAP + Quality criteria



Group work



Leadership and enabling environment

- MoH leads HNAP development
- Govt endorsement/approval
- Active engagement of the health sector in the process to formulate and implement the NAP
- Climate-informed health planning and programming



Cross-sectoral coordination and policy coherence

- Coordination and synergy with health-determining sectors



Comprehensive coverage of climate-sensitive health risks

- Evidence-based HNAP
- Coverage of climate-sensitive health risks
- Prioritization of climate-sensitive health risks



Comprehensive coverage of adaptation options and actions

- Comprehensive adaptation options to address climate-sensitive health risks
- Consideration of vulnerability factors
- Prioritisation of health adaptation actions



Resourcing

- Estimation of the required resources for HNAP implementation – human and financial
- Resource mobilization strategy



Monitoring, evaluation and reporting

- Comprehensive monitoring, evaluation and reporting plan included in HNAP
- Periodic HNAP iterations

Quality criteria for health national adaptation plans. Geneva: World Health Organization; 2021

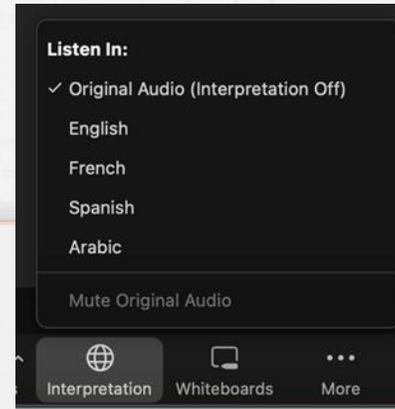


World Health Organization



Interpretation

AM session: English, French and Arabic
PM session: English, French and Spanish



To activate interpretations (in English):

1. Click on the interpretation icon.
2. Select "English"
3. **Optional** : mute original audio

Pour activer les interprétations (en français):

1. Cliquez sur l'icône d'interprétation
2. Sélectionnez "Français"
3. **Facultatif** : couper le son d'origine

Para activar interpretación (en español)

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2. Seleccionar "Español"
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1. اضغط على أيقونة التفسير.
2. اختر "العربية"
3. اختياري: كتم الصوت الأصلي

WHO Technical Webinar Series



<https://www.who.int/teams/environment-climate-change-and-health/climate-change-and-health/country-support/webinars>



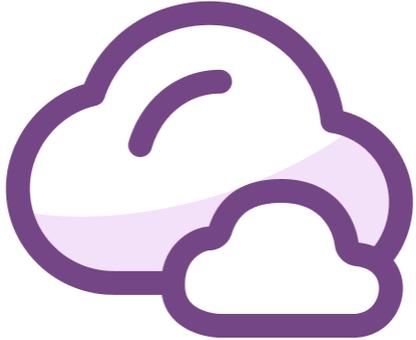
Date & time (CEST)	Topic*
24 th April 2024	Getting started: climate change and health vulnerability & adaptation assessments
30 th April 2024	WHO as an Accredited Implementing Entity of the Adaptation Fund; Accessing AF funding for Climate Change and Health
15 th May 2024	WHO Operational Framework for building climate resilient and low carbon health systems
12 th June 2024	Developing a Health National Adaptation Plan: Introduction
19 th June 2024	GIS and risk mapping in climate change and health vulnerability & adaptation assessments
10 th July 2024	Climate resilient and environmentally sustainable health care facilities
17 th July 2024	Quantitative approaches for Vulnerability & Adaptation assessments: sensitivity analyses and projecting future health risks of climate change
18 th Sept 2024	Integrating health in NDCs and LT-LEDS
25 th Sept 2024	Developing a Health National Adaptation Plan: Quality criteria for HNAPs
16 th Oct 2024	Conducting a gender analysis for climate change and health vulnerability & adaptation assessments

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What is one key action you will take to support your country in HNAP development and implementation?

① Start presenting to display the poll results on this slide.



What is one key action you will take to support your country in HNAP development and implementation?

Wordcloud Poll 14 responses 9 participants



Thank You!

ATACH Community of Practice

<https://www.atachcommunity.com/>

Climate Change

<https://www.who.int/teams/environment-climate-change-and-health/climate-change-and-health>

Email: healthclimate@who.int

