Partnerships for a Healthy Region

**Climate - Guidance Note**

## Overview

#### The intersection between health and climate change

It is increasingly understood that human, animal and environmental health systems are closely linked. Understanding how climate change will directly and indirectly impact health and wellbeing in the Pacific and Southeast Asia will be critical to supporting health systems in our region to protect health in an unstable and changing climate. Changing temperatures are expected to alter the transmission dynamics and geographic distribution of vector-borne diseases. Changing temperatures as well as rising sea levels and more extreme weather events may also result in increased frequency of environmental disasters such as cyclones, droughts, floods and extreme heat, which can influence migration and displacement, reduce access to clean water and sanitation, and increase risks of water-borne and water-related diseases. In some settings, changes in land-use and ecological degradation may bring humans and animals into closer contact, increasing the risk of zoonotic disease. Increased air pollution, high temperatures and threats to food security, among other factors, are also likely to increase the burden of some noncommunicable diseases (NCDs). These are just a few examples of the types of climate-related impacts will increase the strain on health systems and create challenges for policymakers operating in increasingly uncertain environments.

This guidance note outlines programming guidance to support integrating climate change considerations into the design of investment proposals and work plans under DFAT’s Partnerships for a Healthy Region initiative. DFAT’s [Climate Change Action Strategy](https://www.dfat.gov.au/sites/default/files/climate-change-action-strategy.pdf)recommends incorporating climate change at all stages of the aid program management cycle, including planning and design, implementation, monitoring, performance reporting and evaluation. Where relevant, investments should explicitly consider the potential impacts of climate change on their activities, and seek to integrate climate adaptation, disaster risk reduction, preparedness, and resilience-building opportunities.

Not all health activities will be influenced by climate change or will have an impact on climate mitigation[[1]](#footnote-2) and adaptation[[2]](#footnote-3) efforts. However, there are opportunities to consider and address climate-related threats in health programming, and to support the goal of improving the overall climate resilience of health systems in our region.[[3]](#footnote-4)

Examples of these opportunities for illustrative purpose include:

* Strengthening vector and waterborne disease surveillance to improve early warning systems for climate-sensitive diseases such as malaria, and support climate-informed disease mapping in the Pacific.
* Researching how climate-related vulnerability and resilience factors, could inform local and regional health and climate policy priorities and planning.
* Supporting workforce strengthening and surge capacity, including integrating education on the impacts of climate change to improve disease detection and response capabilities.

Key messages  
***Integrate climate change considerations into health investment design***   
Consider how climate change may directly and indirectly impact the public health outcomes that are the primary focus of the investment and identify specific entry points to take action. If relevant, explain how the investment will contribute to promoting a stronger understanding of the relationship between climate change and health.  
***Screen for climate-related risks and measure performance***Take a proactive approach to considering short- and long-term climate and disaster risks associated with the investment by conducting comprehensive climate and disaster risk screening, and if appropriate incorporate measures to strengthen the resilience of investment activities against potential impacts of climate change and disasters. Where appropriate, embed climate-related indicators in performance frameworks.  
***Seek synergies between climate and health programming***Consider how activities under the investment aimed primarily at preventing disease and enhancing health system resilience may also provide co-benefits to climate change mitigation or adaption efforts (including disaster risk reduction, preparedness and resilience building).  
***Look for intersectionality***Identify intersectionality in investment activities between climate change and thematic areas such as One Health, water, sanitation and hygiene (WASH), agriculture, and gender equality, disability and social inclusion (GEDSI), and seek to collaborate in cases where taking an integrated, multi-sectoral approach is expected to enhance the overall health and development outcomes of the investment.   
***Contribute to climate change mitigation***Where feasible, minimise the environmental footprint of the investment and any potential climate impacts that may arise in the process of delivering the investment.

## Checklist

### Key considerations for designing investments which integrate and address climate change-related risks

#### Concept

* Is there an understanding of how climate-related risks interrelate with the investment objectives?
* Is there potential that climate or environmental shocks could undermine the proposed activities and related health outcomes?
* Does this investment promote a greater understanding of the relationship between health and climate change-related impacts and disaster risks?
* Are there synergies between actions that strengthen health systems to manage specific disease threats, and that support health systems to be resilient to climate change, that can be leveraged?
* Some climate-related health risks disproportionately affect specific populations or communities (e.g., women, children, Indigenous Peoples and ethnic minorities, people with disabilities). Are there particular climate-related health vulnerabilities faced by specific groups that should be considered in the investment design?
* Has initial climate and disaster risk screening[[4]](#footnote-5) been conducted to integrate climate and disaster resilience into the investment’s activities as appropriate?

#### Design and workplans

* Have the experiences of relevant technical agencies, multilateral partners or global experts and best-practice guidance been drawn on? Where relevant, do proposed activities align with the [WHO Operational Framework for Building Climate Resilient Health Systems](https://www.who.int/publications/i/item/9789241565073)?
* Are there opportunities for cross-sectoral collaboration including with One Health related sectors (particularly environmental health actors), WASH, infrastructure, and GEDSI?
* In the event of a major climatic event or disaster, what resilience measures are incorporated into the design and workplans to mitigate risks to implementation of the investment and ensure any gains are preserved?

#### Risk and safeguards assessment

* Have climate- and disaster-related risks to the investment been mapped using a risk assessment?
* Could investment activities unintentionally increase climate-related risks? Is there a plan to manage any unintended climate-related risks the investment could create? Have measures been identified to mitigate these risks?
* Are there program management processes and systems in place to support the regular review of risks and safeguards?

#### Performance management - monitoring, evaluation and reporting

* Does the program measure the proportion of activities and/or funding that address climate concerns? Where activities are implemented that relate to addressing climate concerns, are the achievements documented, monitored and reported?
* Climate change will have an increasing impact on the frequency and scale of many disasters including drought, cyclones, intense heat, floods and storm surge. Are there systems to monitor, update and report on the risk of climate change-related events and their implications for investment implementation and outcomes?

Example from DFAT’s Health Security Initiative

Working with a range of Ministries, local authorities, rural communities and the private sector in Fiji, a Health Security Initiative project supported the updating of water sanitation and safety plans across Fiji. This involved installing critical drinking water infrastructure, conducting water sanitation and hygiene audits, upgrading pit latrines and rehabilitating riverbanks through plantings and fencing to prevent damage from livestock.  This has improved sanitation, water and land use to reduce water-related diseases such as typhoid, leptospirosis and dengue in five watersheds in Fiji. From a climate change perspective, these activities also contributed to climate adaptation by working to minimise the impact of floods caused by cyclones and heavy rainfall.

## Additional Resources

* [**DFAT's Climate Change Action Strategy**](https://www.dfat.gov.au/sites/default/files/climate-change-action-strategy.pdf): Outlines the Government’s strategy to addressing the risks of climate change through our aid investments.
* [**DFAT's Climate and Disaster Risk Reduction Guidance Note**](https://www.dfat.gov.au/about-us/publications/Pages/disaster-risk-reduction-and-climate-change-guidance-note)**:**  Provides operational guidance on integrating climate and disaster risk reduction into investment design, implementation and monitoring and evaluation.
* [**DFAT's Development Assistance in the Pacific – Climate Change and Resilience**](https://www.dfat.gov.au/geo/pacific/development-assistance/climate-change-and-resilience)**:** Outlines DFAT’s regional commitments and strategic approach to addressing climate change and disaster risk management.
* [**WHO's Climate Change and Health Toolkit**](https://www.who.int/teams/environment-climate-change-and-health/climate-change-and-health/capacity-building/toolkit-on-climate-change-and-health)**:** Provides guidance and resources on integrating climate into health investments and programs, including the [WHO Operational Framework for Building Climate Resilient Health Systems](https://www.who.int/publications/i/item/9789241565073).
* [**OECD DAC Rio Markers for Climate**](https://www.oecd.org/dac/environment-development/Revised%20climate%20marker%20handbook_FINAL.pdf)**:** Provides guidance on how to classify activities that have climate change adaptation or mitigation objectives.
* [**WHO’s COP26 Special Report on Climate Change and Health**](https://www.who.int/publications/i/item/9789240036727): Provides recommendations on scalable interventions to safeguard health and climate.

1. Mitigation: the reduction of greenhouse gasses released into the atmosphere, including through activities that remove or reduce emissions—either through natural systems such as forests which absorb carbon emissions, or through technologies such as carbon capture usage and storage, where carbon dioxide can be sequestered. The main source of greenhouse emissions is from burning fossil fuels for energy, but emissions also arise from other sources such as land use, transport, waste, building materials and industrial processes. [↑](#footnote-ref-2)
2. Adaptation: the ability to adjust to climate change to minimise potential impacts, take advantage of opportunities or to cope with the consequences. This means anticipating and planning for the impacts across areas affected by climate change (Climate Change Action Strategy, DFAT). [↑](#footnote-ref-3)
3. The World Health Organization defines a ‘climate resilient health system’ as “one that is capable to anticipate, respond to, cope with, recover from and adapt to climate-related shocks and stress, so as to bring sustained improvements in population health, despite an unstable climate”. (WHO [*Operational Framework for Building Climate Resilient Health Systems*](https://www.who.int/publications/i/item/9789241565073) (2015), p.8). [↑](#footnote-ref-4)
4. Screening resources can be found at [Climate and Disaster Risk Screening Tools (worldbank.org)](https://climatescreeningtools.worldbank.org/) [↑](#footnote-ref-5)