

## THE COMMON AFRICAN POSITION ON CLIMATE CHANGE & HEALTH

### 'Exploiting the Potential of One Health Approach for Low-Carbon, Climate Resilient Health Systems in Africa'

Lilongwe, Malawi: August 24, 2023

We, African regional stakeholders on climate change and health, having met in Lilongwe, Malawi, from 22-24 August 2023 for the African Regional Conference on Climate Change and Health;

**Acknowledging** the recognition by the United Nations General Assembly (UNGA) of the right to a clean, healthy, and sustainable environment<sup>1</sup> as a universal human right, and by the Libreville Declaration on Health and Environment in Africa that good environmental management promotes good health;

**Recalling** the acknowledgment by the Intergovernmental Panel on Climate Change (IPCC) in the seventh chapter of its Sixth Assessment Report (AR6) of the high level of confidence and desire in understanding how climate change impacts ecosystems and the health of human beings;

**Disturbed by** the complex interplay between global temperature rise and worsening health indicators, growing episodes of loss and damage and the implications of the same on health ecosystems and health systems, emerging disease geographies and the growing burden of care for people suffering from disease triggered by climate episodes and disasters;

**Taking into account** the urgent need for the global north to cut on their emission levels in order to slow and eventually forestall global temperature rise with implications on future climate catastrophes;

**Fully aware** that response measures in building resilience in the health sector will not yield the much-desired results unless complemented by strong mitigation actions by the global north;

**Recognizing** the One Health concept as a comprehensive and interdisciplinary strategy that acknowledges the interdependence of human health, animal health, and environmental health, and viewing it as the optimal approach to tackle intricate climate-driven health challenges at the junction of humans, animals, and ecosystems and pivotal in achieving planetary health;

**Taking into consideration** the COP26 Health Program which was agreed upon by Parties meeting at the twenty-sixth session of the Conference of the Parties to the United Nations Framework Convention on Climate Change, convened in Glasgow in 2021, under which nations pledged to establish health systems that are both resilient to climate impacts and characterized by low carbon emissions;

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<sup>1</sup>The right to a clean, healthy, and sustainable environment (which includes the right to a safe climate) as a human right, recognized most recently in General Assembly resolution 76/300 of 29 July 2022.

**Recognizing** early evidence that indicates climate change is undermining gains in public health and human wellbeing, including progress towards universal health coverage, increasing loss and damage to human health in numerous developing regions; destruction of ecosystems, and exacerbating the vulnerability of the most disadvantaged and marginalized communities;

**Recognizing** that the effects of climate change are compounded by population dynamics and settlement patterns that are exacerbating environmental degradation, food insecurity, poverty, and poor health outcomes, which in turn undermine resilience to the effects of climate change;

**Aware** that to address these complex synergistic challenges in a holistic manner, there is a need for integrated planning and application of systems thinking at all policy, planning, and programme execution levels.

**Acknowledging** the increased dialogue and conventions concerning climate change and health within Africa and globally, as well as the designation of a Health Day by the UNFCCC to facilitate extended and focused discussions during COP 28;

**Capitalizing** on the opportunities to foster momentum on climate and health in the Africa Climate Summit and Africa Climate Week, scheduled to be held in Nairobi from September 4<sup>th</sup> to 8<sup>th</sup>, 2023, as well as the twenty-eighth Conference of the Parties to the United Nations Framework Convention on Climate Change, set to take place in Dubai between November 30<sup>th</sup> and December 12<sup>th</sup>, 2023.

**Taking into perspective** the growing momentum to develop & pronounce a global goal on health and the need for a well-articulated African position on this goal;

**Desire to advance a position on Health and Climate Change** for African Governments and People premised on five key principle considerations:

1. A position that promotes Africa's ecosystems health and functioning; improves access to preventive and promotive health services to all communities with a bias to underserved communities, and enhances capacity of health infrastructure to meet growing health challenges triggered by climate change;
2. Adopt a holistic approach to health that promotes broad-based response measures to climate change modeled along the One Health Approach and decentralized approaches to its implementation. This approach should be Africa-centric, pro adaptation and enhances the resilience of African health systems;
3. Assert the imperatives of just transition to underpin our collective strive, centering the role of decentralized, people controlled, just clean sources of energy in transforming delivery of health services to underserved populations;
4. Gives priority to our collective call and advocacy actions targeting the developed countries to scale up their mitigation actions, with clear commitments on their targets for emission cuts;
5. Enhances African leadership in partnerships in health response measures including evidence generation and its application towards strengthening climate response in health.

In advancement of these principle elements, we call on parties to UNFCCC and other key stakeholders to demonstrate leadership as detailed:

### **I. United Nations Framework Convention on Climate Change (UNFCCC)**

1. Adopt an overarching goal, targets and metrics, for reporting on matters of health, with the Global Goal on Adaptation that builds the world's resilience and adaptive capacity to safeguard and protect human health and wellbeing being an ideal entry point;
2. Mainstream the tracking of progress on health and related goals, including assessing progress in implementation of programmes within the Global Stock Take Process.
3. Structure and champion a process of accelerated direct access to climate finance to key governments and frontline responders to challenges presented by climate change in the health sector ;
4. Expedite setting up the Loss and Damage Fund to address loss and damage to health infrastructure, and damage of ecosystems, which contribute to the introduction of new pandemics and climate change impacts on human health and lives;
5. Champion a dedicated health work group and funding facility for climate and health under UNFCCC.

### **II. Africa Group of Negotiators (AGN)**

#### **General:**

1. Urge the African Group of Negotiators (AGN), G77 and China, AOSIS, the Least Developed Countries, and other stakeholders to prioritize health within their positions.
2. Recognizing past missed opportunities, prompt the AGN to deeply consider global negotiation strategies for effectively incorporating health and climate change themes leading up to COP28.
3. Rally unwavering support for collaborative efforts with pertinent stakeholders to identify avenues for infusing health considerations across all COP28 agenda items and subsequent processes, integrating crucial health policy recommendations.

#### **Specifically:**

##### **Adaptation:**

1. Identify specific health targets and metrics within the framework of the Global Goal on Adaptation (GGA).
2. Champion the strengthening of health systems, including robust early warning systems to address climate-related health risks, including timely alerts for extreme heat, vector-borne diseases, and other health threats linked to climatic changes.

##### **Mitigation:**

3. Advocate for a worldwide equitable transition from fossil fuels to renewable energy sources in alignment with the Paris Agreement, recognizing the inherent public health benefits.
4. Accelerate the incorporation of health-related aspects into Nationally Determined Contributions (NDCs) and the Global Stocktake process (GST).

**Loss and Damage:**

5. Provide comprehensive technical support to parties through the Santiago Network, aiding in the quantification of health-related losses and advocating for an effective Loss and Damage Fund capable of swift responses to health-related losses and damages.

**Finance:**

6. Pave the way for a stance in climate finance negotiations that emphasizes the integration of finance for adaptation and mitigation across sectors while embracing the principles of One Health.
7. Channel negotiation efforts towards the creation of funding mechanisms that assist developing nations in establishing low-carbon, climate-resilient healthcare systems and tackling climate-induced health challenges.

**III. Africa Union (AU) and Regional Economic Blocks (REBs)**

1. Set-up a Pan African Research organization or mandate an organization under the auspices of the African Union including making funds available to this entity for purposes of playing a leadership role in cross-sectoral research in climate change and related issues.
2. Design capacity-building programs aimed at developing the capacity of African health and climate communities, institutions, practitioners, Governments, and negotiators to understand and integrate climate change and related health challenges into policy, socioeconomics, planning and programming initiatives;
3. Foster research collaborations among neighboring countries and international institutions to gather region-specific data on the intersection between climate change and health for informed policy decisions, resource allocation, and developing targeted interventions to mitigate health impacts.
4. Regional Economic Commissions (RECs) mobilize the uptake of health-related considerations by member states in their departmental strategies and development plans.
5. Urge ICPAC-IGAD and related organizations active in the climate hotspots to establish and enhance early warning systems and surveillance networks for climate-sensitive health risks in the member states. These include monitoring disease outbreaks, vector-borne diseases, and other health impacts related to climate change and using predictive modeling to anticipate and respond to these challenges.
6. Introduce Peer review platforms and organs for strengthening international cooperation and expertise to understand, reduce and compensate for loss and damage associated with the adverse effects of climate change, including impacts on human health related to extreme weather events.
7. Design and introduce peer review mechanisms to demand for more accountability from governments on matters not working well and strengthening implementation of resolutions across board including in the areas of planning, budgeting, coordination, and monitoring & evaluation (M&E).

#### IV. National Governments

1. As a matter of priority, call on Heads of States in Africa and the Ministers, in all build up convenings and in COP28 to mainstream the climate challenge on health in their key note speeches in order to highlight and elevate the importance of this matter in global discourse.
2. Mainstream Health and Climate Change considerations in the Nationally Determined Contributions (NDCs) and programs for their implementation, including building resilience to health infrastructure.
3. Ensure full participation of Ministries of Health in climate decision making processes, including the review and development of NDCs and NAPs, and sectoral policies at national level with implications for climate and health.
4. Invest in capacity building and training programs for healthcare managers and professionals to understand better and manage the health implications of climate change. This includes education on identifying climate-related health risks, treating climate-sensitive diseases, and providing psychosocial support to affected communities.
5. Foster research collaborations to gather region-specific data on the intersection between climate change and health. This information is vital for informed policy decisions, resource allocation, and developing targeted interventions to reduce health impacts.
6. Promote greater access to healthcare services to underserved populations through decentralized albeit people centered renewable energy systems.
7. Recommend enhanced collaboration between the Ministries of Health and other relevant sectors, such as agriculture, environment, water resources, and urban planning in the spirit of implementing the One Health approach to address multiple climate-related challenges.
8. Mobilize alignment between national climate policies, health policies, and development agendas. There is need for the creation of multi-sectoral coordination platforms/commissions / mechanisms for climate change and health, involving relevant ministries and possibly also other nongovernment or related stakeholders.
9. Call for the integration of indigenous knowledge and practices in climate and health strategies. Indigenous communities often have valuable insights into managing local ecosystems and health challenges. Further, we recognize the critical contribution of traditional medicine and nature-based solutions in advancing climate health mitigation and adaptation.

#### V. Developed Countries/ Global North

1. Urgently scale-up their emission cuts through accelerated phase out plans from fossil fuels and adoption of renewables.
2. Call upon developed countries to increase their climate financing to support African climate-resilient health systems and infrastructure. This includes accessing international climate funds to enhance healthcare facilities' preparedness for climate-related health risks for a smooth transition to Climate Justice for all.

The development of the common position was led by **Amref Health Africa** in collaboration with our partners **African Institute for Development Policy (AFIDEP)**, **Panafrican Climate Justice Alliance (PACJA)** and **World Health Organization (WHO)** with the support of **Wellcome Trust**. We appreciate the **Government of Malawi** through the **Ministry of Health** for hosting the workshop and providing strategic leadership to the process.