Climate Vulnerable Forum Regional Workshop for Africa

Health Sector Vulnerability and Urgent Action

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Climate Change and Health

• The world’s most worrisome diseases
  – transmission cycles are profoundly shaped by conditions of heat, humidity patterns of rainfall.

• Tropical diseases distribution & transmission

• Changed distribution of some disease vectors

• 140,000 excess deaths/ year since 1970 & 5 million disability-adjusted life-years (DALY)
  – malnutrition, diarrheal, cardio respiratory, infectious diseases, heat waves, floods & drought
  – The proportion of the undernourished population sub Saharan Africa could increase by 25-90% at warming of 1.2°C - 1.9°C by 2050 population in sub-Saharan Africa

• Climate Change annual direct cost of health impairment $1.5-4 billion by 2030

• Substantial burden on health services
Health Vulnerability understood

- RIO DECLARATION 1: "Human beings are at the centre of concerns for sustainable development...entitled to a healthy and productive life in harmony with nature." (1992)

- UNFCCC Article 1: “Adverse effects of climate change” : have negative impact ........... on the operation of socio-economic systems or on human health & welfare.

- UNFCCC Article 4 (f): All Parties shall employ appropriate methods, eg. EIA/HIA...with a view to minimizing adverse effects on the economy, on public health ...of projects

- WHA in its 61st session resolution WHA61.19 on CC & health ,2008 requesting all member states & others to express commitment to meeting the challenges of CC on human health

- The 61st Session of the WHO Regional Committee for Africa adopted a Resolution AFR/RC61/R2 on a Framework for Public Health Adaptation to CC, Sep 2011
Though Vulnerability of Health is well understood
We are not adequately managing these risks

- 95% (39/41) of LDC NAP included health as priority sector.

- Only 25% had adequate health assessments & intervention planning.

- WHO, UNFCCC & WB estimate climate change to increase health costs by $4-12 billion in 2030, only <0.5% of this figure
WHO work with Government & Partners: Programmatic approach: "Minimum package" for health resilience to climate change

**Baseline Capacity and Risk Assessments:**
- Climate and health vulnerability and adaptation assessments
- Assessments of programme capacity
- Definition of monitoring and evaluation frameworks

**Integrated Environment and Health Surveillance:**
- Risk mapping and establishment of early warning systems for climate sensitive risks:
- Integration of environment and health monitoring, and response plans

**Environmental Management:**
- Health impact assessment for decisions in other sectors
- Management of ecosystem services, and risk factors to health

**Scale-up and climate proofing of interventions for climate-sensitive health impacts:**
- Integrated vector management for vector-borne disease
- Water treatment and safe storage
- Legislation and enforcement for air quality

**Strengthening of health capacities in disaster management:**
- Inclusion of health in DRR and response plans
- Resilient and sustainable provision of energy and water to health facilities
The Work in Ethiopia & other countries : Climate and Health

• Building adaptation to climate change in health in least developed countries through resilient WASH, WHO/DFID supported 4 countries including Ethiopia

• Used in 3 workshops to prepare national action plans, which involved representatives from MoE & MoH from 43 Countries in Africa;

• Online H-NAP repository under development;

• Pilot projects on CCH in Ethiopia, Kenya, Malawi and Tanzania;

• Support for countries to conduct vulnerability & adaptation assessments (V&A). The of case Ethiopia:
  – Established CCH Technical Working Group, Nov 2013
  – V&A assessment using 25 years climate info and climate sensitive disease; draft report expected by next week to be followed by H-NAP
  – Effectiveness of Climate resilient community based WASH intervention 18 months longitudinal study on climate sensitive disease
  – Implementation of Climate Resilient pilot Water Safety Plan urban & rural water supply (7 started & expected to add more 15 water supplies)
CC exacerbate Risks to Health
Thus, we need to think systematically

- Example: Climate Change Adaptation & Disaster Risk Reduction Strategies
Conclusion

• If don’t act on CC inequitable health effects continue