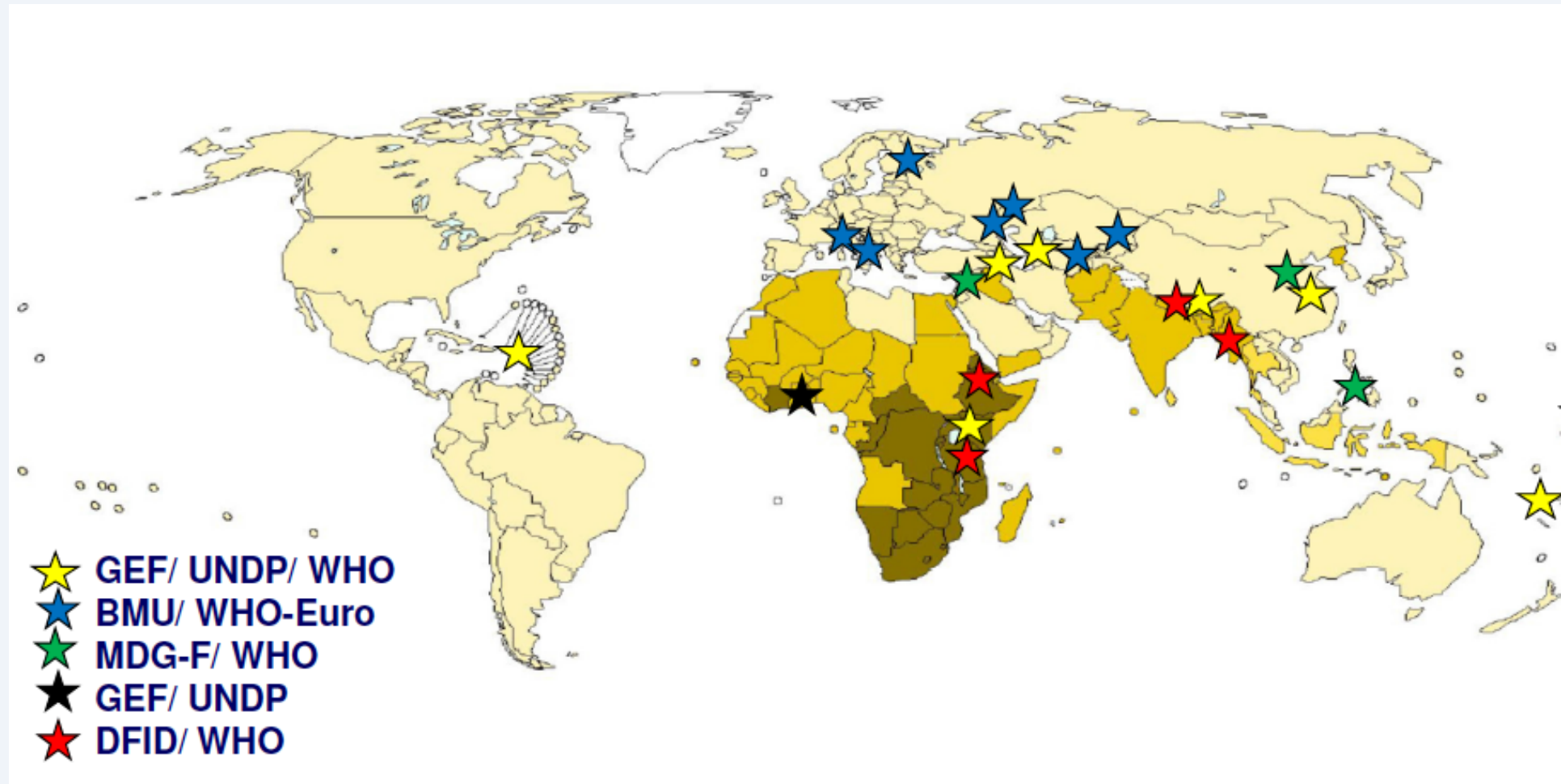


Lessons learned on health adaptation

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- Barbados, Bhutan, China, Fiji, Jordan, Kenya, and Uzbekistan
- China, Jordan, and the Philippines
- Albania, Kazakhstan, Kyrgyzstan, Macedonia, Russia, Tajikistan, and Uzbekistan

WHO guidance to protect health from climate change through health adaptation planning



Lessons learned

on health adaptation
to climate variability
and change

Experiences across low- and
middle-income countries



Documents were evaluated for evidence of the extent to which the projects achieved their stated objectives for

- **Health adaptation interventions;**
- **Sustainability;**
- **Stakeholder participation and community engagement;**
- **Country ownership and socio-political constraints;**
- **Human resources and capabilities;**
- **Replicability and scalability; and m**
- **Monitoring and evaluation**

Qualitative data collection

- In-depth semi-structured interviews with purposively selected key informants
 - 19 key informants selected based on their current and previous leadership roles at institutions and organizations that implement initiatives on climate variability and change, public health, and health adaptation programs and interventions
- Focus group consultation

Information was collected on

- **Successfulness of the projects**
 - Whether the projects themselves were successful; and
 - Whether the project activities facilitated climate resilience
- **Good practice examples**
- **Opportunities to enhance the effectiveness of adaptation**
- **Barriers and challenges**

Frame and scope assessment

Assess

Manage and monitor risks

Defining the geographical region and health outcomes of interest;
Identifying the questions to be addressed and steps to be used;
Identifying the policy context for the assessment;
Establishing a project team and a management plan;
Establishing a stakeholder process;
Developing a communications plan.

Vulnerability:

Current burden of disease
Current health protection programmes

Future impacts:

Changing burden without climate change
Projected health impacts of climate change

Adaptation:

Identify and prioritize additional interventions
Identify resources and barriers to implementation

Health harms and benefits in other sectors

Communicate plan and implement

Monitor and evaluate



MINISTRY OF HEALTH

Climate Change Strategic Plan for Public Health

Towards Increased Climate Resilience for Better Health and Well Being of All Cambodian

Health Working Group for Climate Change, September 2012

[illegible]





More effective projects ensured targeted communities fully participated in project implementation

- An example is a home-based malaria case management program in 113 hard-to-reach villages in Kenya. Trained, supervised, and incentivized volunteer community health workers provided malaria treatment to young children with fevers, decreasing malaria prevalence over time, increasing health care access, and reducing pressure on health care facilities



Using adaptation to facilitate mitigation: Kyrgyzstan

- To address intermittent power to health care facilities:
 - Five pilot hospitals conducted energy efficiency assessments
 - One hospital installed a solar water heater
 - Four installed solar photovoltaic power plants
 - This was the first large-scale implementation of renewable energy sources in the health sector

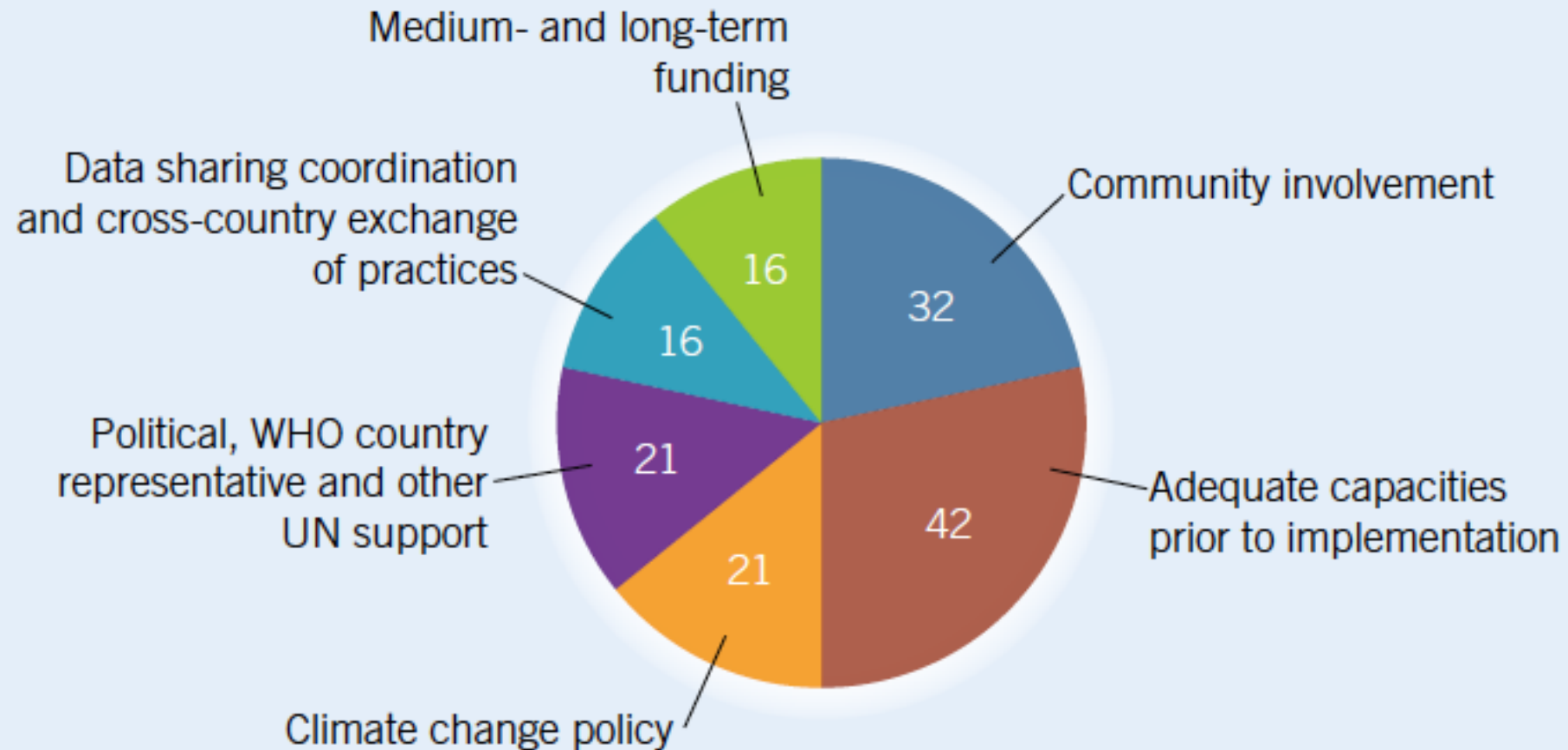
Challenges and barriers

- Limited political will and leadership
- Data access, availability, length of record
- Limited projections of the health risks of climate change
- Lack of technical consensus on implementation standards
- Limited financial and human resources
- Insufficient attention to monitoring and evaluation
 - Indicators
- National evaluations needed of capacities that need to be strengthened for adaptation implementation

Key themes for successful interventions

- More effective projects had a clear vision of how the adaptation projects fit within country development goals and had strong country ownership
- Greater impact was achieved when projects focused on achieving objectives and not just accomplishing outcomes
- Multisectoral approaches promoted effective adaptation and increased the potential for scaling up
- More effective projects had or took time to build capacity and stakeholder engagement
- Success was promoted by establishing and reinforcing enabling conditions across scales
- Institutionalizing risk management a basis for climate-resilient health systems
- Indicators were needed for monitoring, evaluation, and learning
- Knowledge building and supplementation of country expertise will be necessary for some time
- Mitigation and adaptation should be addressed jointly whenever possible
- More effective projects had good design and clear management arrangements and coordination

Support required to ensure success (% responses)





Overall, irrespective of resource constraints, low- and middle-income countries need to continue to prepare themselves for the health risks of climate change through public education and awareness programs, including disaster preparedness measures, resilient infrastructure for effective resettlement of displaced people, and better understanding of health impacts on specific human settlements

http://www.searo.who.int/entity/climate_change/documents/CCH_Training_Modules/en/