



# CHAC 2024

Climate and Health  
Africa Conference



**Phylis Munyama**  
**UNFPA Zimbabwe Country Office**

**Lessons learnt and next steps: Intersectionality of Climate change and SRHR, GBV and HP - engagement towards NDC 3.0**

# Introduction

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Africa is at the epicentre of the global climate crisis and poor and vulnerable women and girls are at high risk

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The new abnormal is causing mass displacement, destroy livelihoods, collapse of health, education and agricultural systems.

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Consequences of extreme heat, flooding, and droughts include:

Increasing risk of stillbirth due to heat exposure.

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Mounting food insecurity, which impacts maternal and newborn health.

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Increasing gender-based violence and child marriage.

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Africa contribute 2-3% of global greenhouse gas emissions YET it is one of the most vulnerable regions in the world.

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Africa is warming faster than the rest of the world, leading to the spread of vector-borne diseases, the collapse of crop yields, and posing a danger to health.

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While there is progress too many countries are not committing to SRHR in their plans. In a global first UNFPA and Queen Mary University London examined the **climate plans of 119 countries** to see how well they have integrated SRHR in their NDCs

# Nationally Determined Contributions

Heart of the Paris Agreement and achievement of its long-term goals

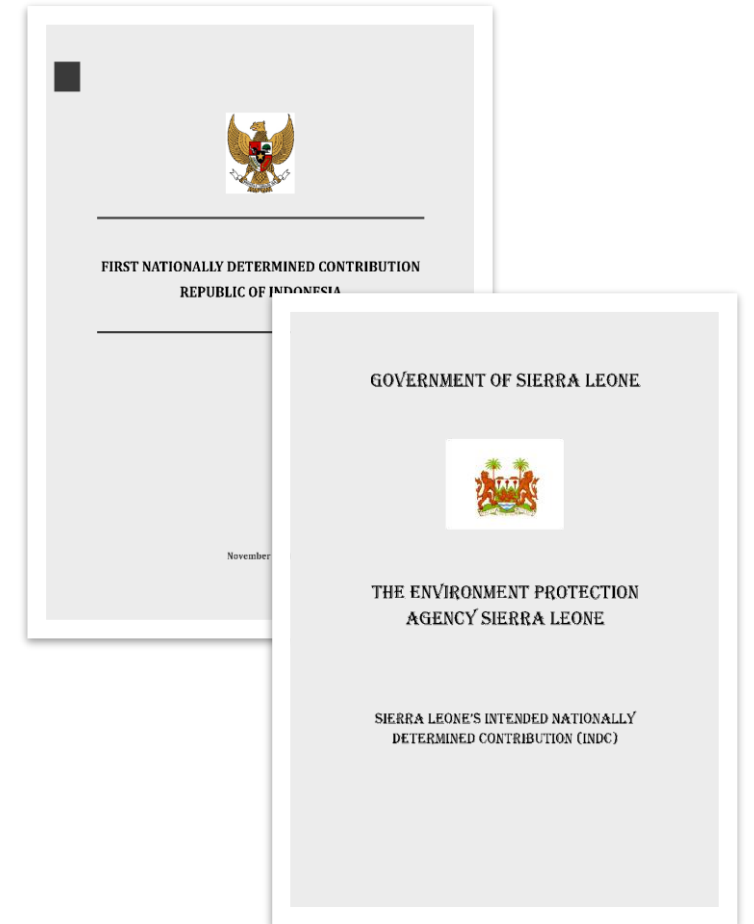
- **To reduce greenhouse gas emissions** to pre-industrial levels (below 2 degrees – ideally 1.5 degrees) and adapt to the impacts of climate change.

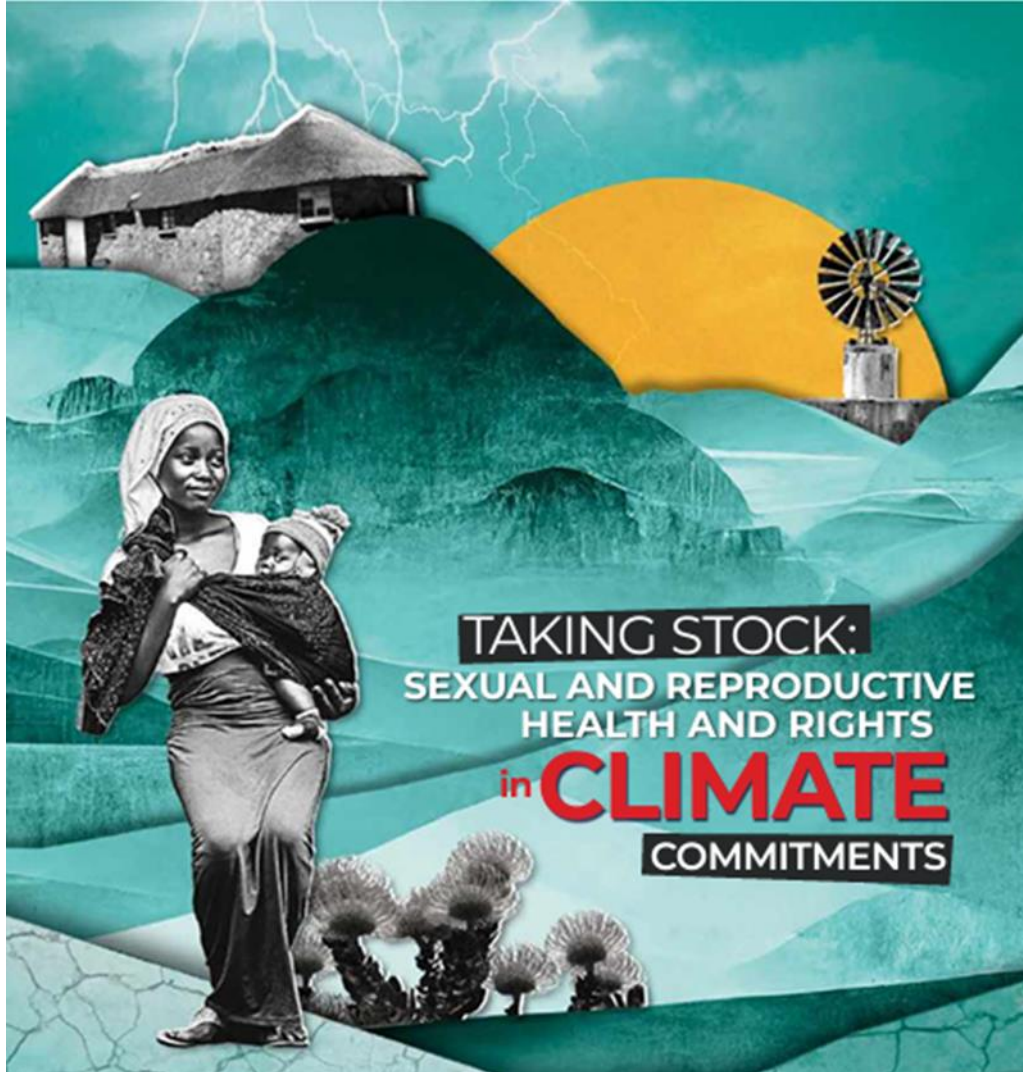
Outlines

- National emissions profile
- Planned actions for emissions reductions (mitigation)
- Planned actions for adaptation and building resilience
- Institutional and Financial Framework

Submission every 5 years as required by the Paris Agreement

- Original NDCs in 2015, 2<sup>nd</sup> round in 2020/2021, next round “NDCs 3.0” – due in 2025.





UNFPA in collaboration with Queen Mary University commissioned an analysis of the inclusion of SRHR and related thematic areas in NDCs published from 2020 to August 2022.

### Findings:

Provide an opening for dialogue on the intersection of climate change, SRHR, GBV and harmful practices

Support identification of entry points for climate policy and action

Highlight gaps and opportunities and promising practices which allow for greater and more meaningful integration

# Methodology

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Review of **46 NDC documents (NDCs)** from 2020 onwards on their inclusion of SRHR and ICPD related themes;

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Broad definition of SRHR - Guttmacher Lancet 2018 Report which describes SRHR as **a set of rights and essential services** that meet public health and human rights standards;

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Explored **any reference to SRHR - and GBV and HPs and also other 5 related areas including: 1) health; 2) gender; 3) human rights, participation and vulnerable groups 4) youth and 5) population dynamics including migration and urbanisation;**

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We undertook analysis of UNFPA regions (**Eastern and Southern Africa, West and Central Africa and African Arab States**).



# Findings

## Sexual Reproductive Health and Rights (SRHR)

17/46

Across NDCs, the most frequent references to aspects of SRHR are to maternal and newborn health and to GBV.

<b>Maternal and newborn health</b>	9
<b>Gender-based violence</b>	6
<b>Integration of SRHR in climate info and awareness</b>	2
<b>Family planning and contraception</b>	3
<b>SOGIESC – Sexual orientation, gender identity, expression and sex characteristics</b>	1
<b>HIV/AIDS</b>	4
<b>Adolescent SRHR</b>	1
<b>Menstruation and menstrual hygiene</b>	0
<b>Early forced and child marriage</b>	0

# Findings - SRHR

Maternal and Neonatal Health	Groups vulnerable to climate change in relation to SRHR	GBV
<p><b>South Sudan:</b> climate change will further <b>increase infant and maternal mortality and birth complications and exacerbate poor reproductive health.</b> The effect of <b>malnutrition and heat exposure will lead to serious health risks</b> for mothers and children</p>	<p><b>Cote d'Ivoire:</b> “The negative repercussions of climate change are perceptible in many sectors, the main ones being the following: (ii) <b>increase in waves extreme heat with intense effects on pregnant women and women in the process of menopause</b>”</p>	<p><b>Guinea:</b> “Reducing fuelwood consumption results either in saving time on collection, or for those who buy the fuel, in saving money on the fraction of the daily budget managed by women. <b>Reducing wood collection time also reduces exposure to the risk of violence against women.</b> ....improved stoves, better combustion <b>reduces exposure to toxic fumes and the incidence of respiratory diseases for women and infants</b>”</p>

# Findings – Health

# 46/46

<b>Disasters and / extreme weather events</b>	40
<b>Health and waste and sanitation</b>	23
<b>Health as vulnerable sector</b>	21
<b>Health and food/hunger/malnutrition</b>	26
<b>Diseases</b>	35
<b>Health system strengthening</b>	35
<b>Air Pollution</b>	20

<b>Increase in mortality</b>	20
<b>Access to health services and supplies</b>	18
<b>Health linked to a budget line</b>	18
<b>Climate – related health research</b>	12
<b>Health information and campaigns</b>	19
<b>Health &amp; water related illness/challenge</b>	43



# Findings - SRHR

## Impact of climate change on human health - Togo

*'Human settlements are becoming increasingly vulnerable in Togo. In 2020 and 2021, the overflow of rivers in the Oti and Mono basin caused enormous material damage with loss of human life. We are witnessing the **weakening and collapse of human facilities and infrastructure** (roads, markets, health centers, homes, schools, electricity and telecommunications, etc.) which will increase in the future. In terms of health, the high **temperatures and flooding lead to the outbreak and proliferation of certain diseases such as malaria, meningitis, typhoid fever, cholera and respiratory diseases**, which were previously localised and controlled. So far, the northern regions (Savanes and Kara) are the most vulnerable. However, the simulation shows that in the future, the risk of these diseases could spread southwards with an aggravation in the northern regions.'*

# WHO 2023 Review of health in NDCs and long-term strategies

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30% identify health co-benefits of climate mitigation while 10% quantify and / monitor these benefits

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11% include an emissions reduction commitment for the health sector

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16% include standalone targets, measures or policies for the reduction of air pollution and / short-lived climate pollutants.

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29% allocate climate finance to health actions and / plans

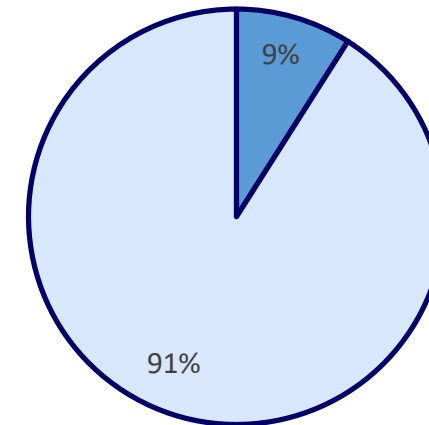
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11% include unconditional finance target of domestic finance

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NDCs which include health considerations



■ Does not include ■ Includes

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# Lessons learnt / recommendations – towards NDC 3.0

## Data and evidence that articulate impacts of climate change on women, girls and marginalised groups.

- Strengthen national level evidence on impact of CC on SRHR; GBV and HPs. Key to designing context specific policies .
- Scale up efforts to collect and use disaggregated data and account for differentiated impact of climate crisis (mobilises more sensitive and accurate climate action)
- Integrate climate impact on SRHR and GBV in vulnerability assessments / undertake risk and vulnerability assessments - NDCs can be an entry point for such an assessment.
- Quantification of health co-benefits of mitigation and adaptation across all sectors
- Health costs of inaction

## Financing and accountability: While adaption sections are increasing in NDCs, greater support, financing and evaluation is required. NDCs reviewed showed limited investment in SRHR and gender-related policy interventions.

- Assessment / evaluation of NDCs and adaptation and resilience efforts
- Articulation of policy and intervention responses to impacts to climate change on women that are costed
- Dedicate climate finance directed towards women and girls impacted by climate change
- Use NDC as an investment plan. Integrate costed SRHR and GBV interventions across sectors in climate policy and action; make use of sections on gender and health to begin to incorporate SRHR and GBV
- Strengthen health systems resilience to climate change by ensuring inclusion of SRHR
- Wealthy countries need to support countries most vulnerable to climate change with financial and technical help and we need to empower our women and girls

# Lessons learnt / recommendations – towards NDC 3.0

**Inclusive representation and engagement:** Increasing representation of women, girls and other vulnerable groups within all dimensions of climate policy and action. This will go a long way in ensuring diverse voices and experiences are reflected in climate policy and action.

- Put in place accountability measures to make sure that what is gained from the consultation is translated into action and not tokenism

**Human rights and leaving no one behind** – ensure climate policies are based on human rights and reflect the principles of the ICPD POA including protection of rights of women, children, refugees, displaced people and people living with disabilities.

**Gender** – Scale up and strengthen gender-transformative climate action through the inclusion of SRHR and GBV and HPs.

- The reviewed NDCs highlight the need to expand adoption of gender mainstreaming in national climate policy and support good practices such as establishment of National Gender and Climate Change Focal Point

# Taking Action – Engagement on climate policies and climate action

## CREATE

- CREATE a platform for stakeholder involvement at all levels and work across sectors to ensure integration of SRHR, GBV and harmful practices in relevant policies and programming.
  - Organize discussion forums
  - Conduct comprehensive mapping of climate policies going beyond NDCs
  - Collaborate with like minded organizations

## CONTRIBUTE

- CONTRIBUTE to the national dialogue and strengthen NAPs and specific interventions to include delivery of SRHR and GBV services for women and girls as well as prevention of harmful practices.
  - Actively engage in national consultations on climate policy including updating of NDC.
  - Advocate for meaningful inclusion and active engagement of a diverse range of stakeholders

## STRENGTHEN

- STRENGTHEN the evidence base for the interlinkages between climate change and health including SRHR; and GBV and harmful practices in your country and region.
  - Gather information and evidence



# CONCLUSION

Since climate change is already happening and is likely to worsen, it is imperative that we act and adapt, including through upholding sexual and reproductive health and rights as a foundation of resilience and of the sustainable well-being of societies overall.

DR. NATALIA KANEM,  
UNFPA EXECUTIVE DIRECTOR

