



Federal Ministry of Health

National Health Adaptation Plan to Climate Change

(2018-2020)

January, 2018
Addis Ababa, Ethiopia

Ethiopian Health National Adaptation Plan

- **NAP GSP SOUTH-SOUTH KNOWLEDGE EXCHANGE FORUM**
- **28 June – 1 July 2021**

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- **PHE/NPO**

How the H-NAP Developed

- By establishing National Technical Working Group from various directorates and agencies of the ministry, relevant ministries and development partners
 - FMOH
 - FMOLSA
 - FMOWIE
 - PHE-Ethiopia
 - FMOUDHC
 - FMOANR
 - FMOI
 - AAU
 - WHO
 - FMOEFCC
 - FMOYS

Introduction

Ethiopia has been identified as one of the most vulnerable countries to climate variability and change

It is frequently faced with climate-related hazards, commonly drought, floods and disease outbreaks

The national health vulnerability and adaptation assessment findings revealed that temperature has increased, and rainfall has decreased over time in the country.

Situational Analysis

- Climate

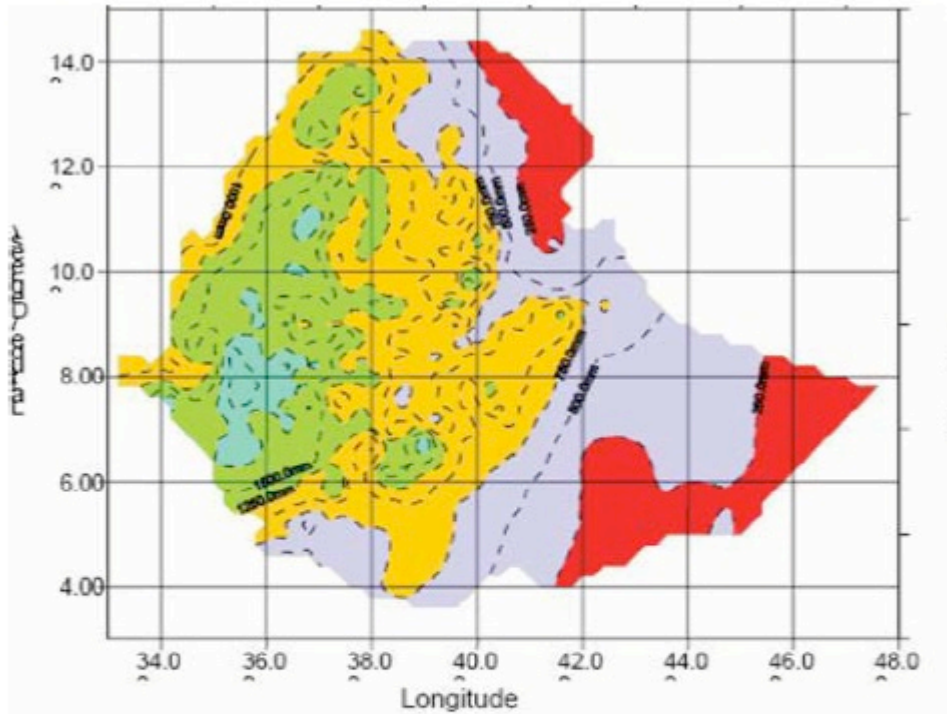
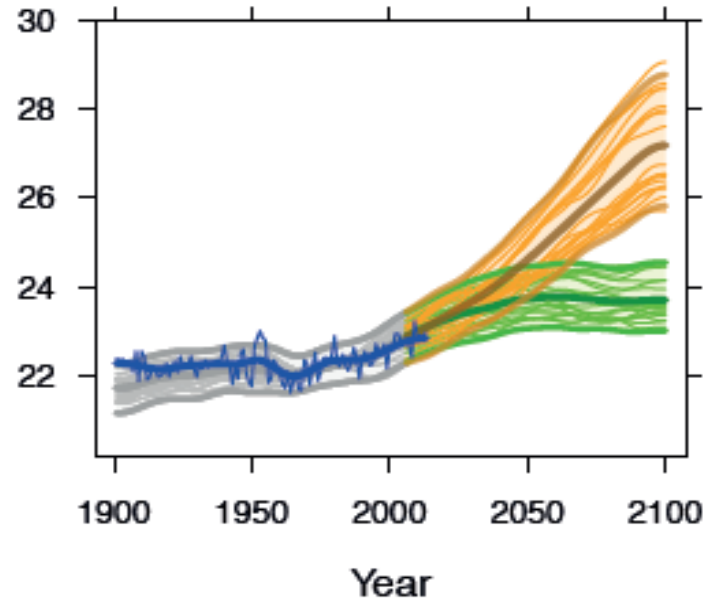
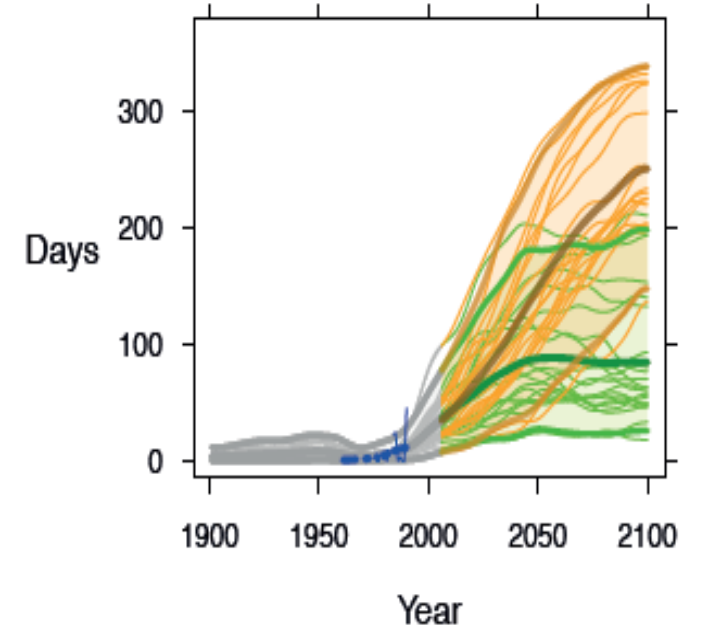


Figure ? Cumulative Mean Annual Rainfall (mm)



Mean Annual Temperature



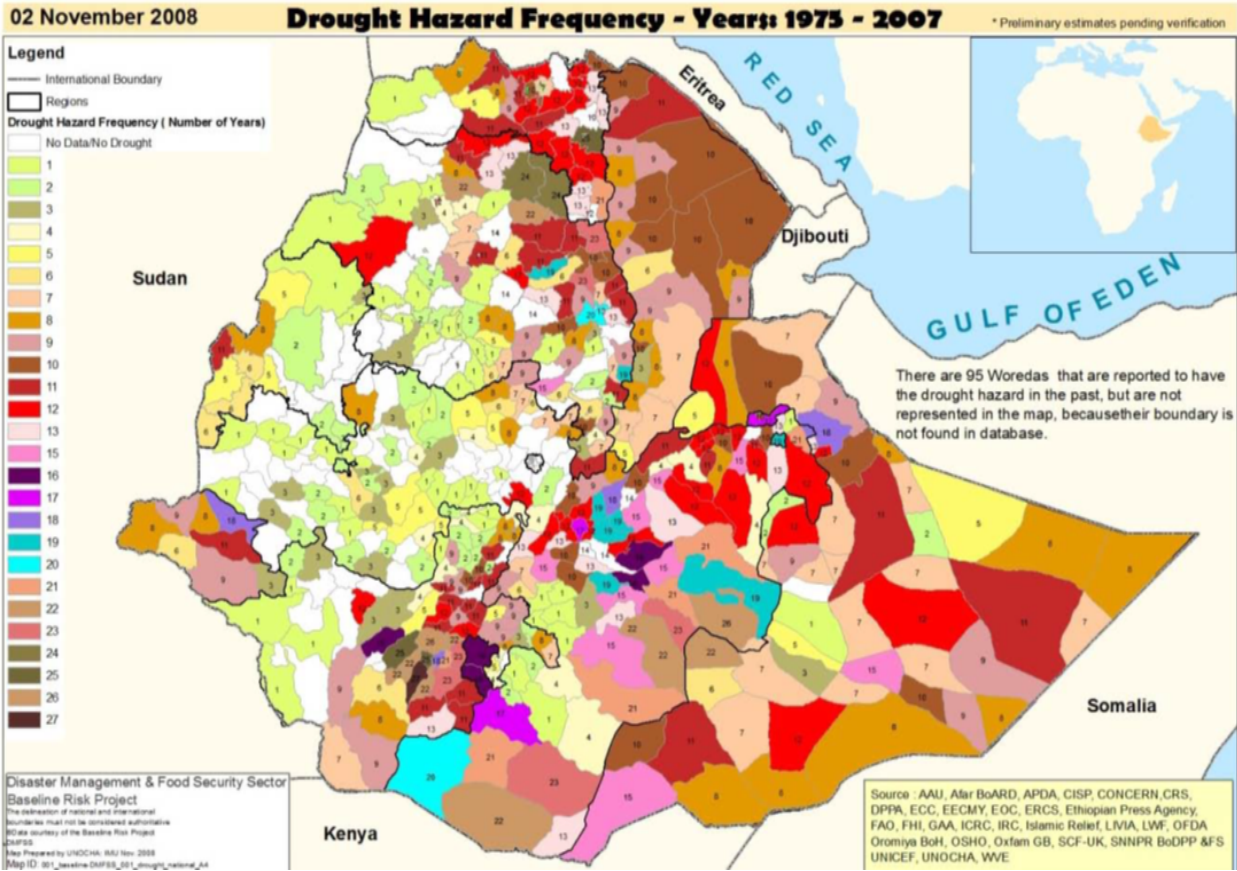
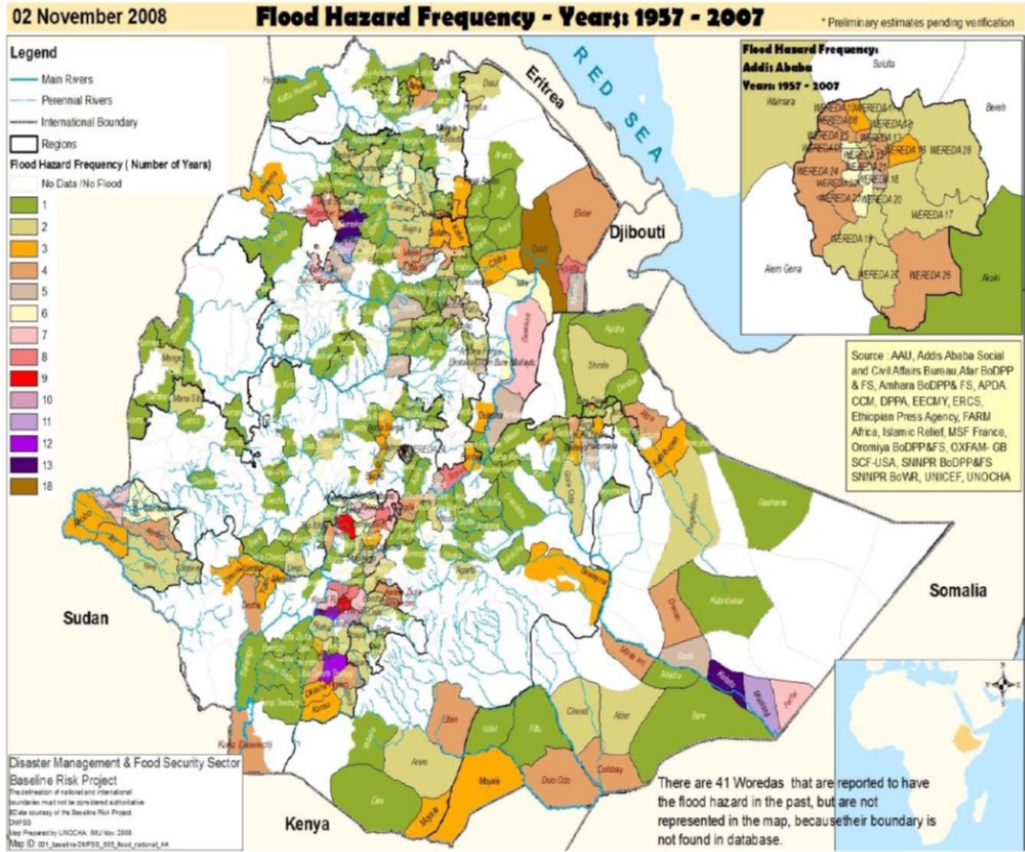
Days of Warm Spell ('Heat Waves')

Situational Analysis

- **Socio-Economic Situation**
 - **Population Pressure**
 - Education
 - **Economy**

Situational Analysis

- Disasters related to climate change



Impacts of Climate Change

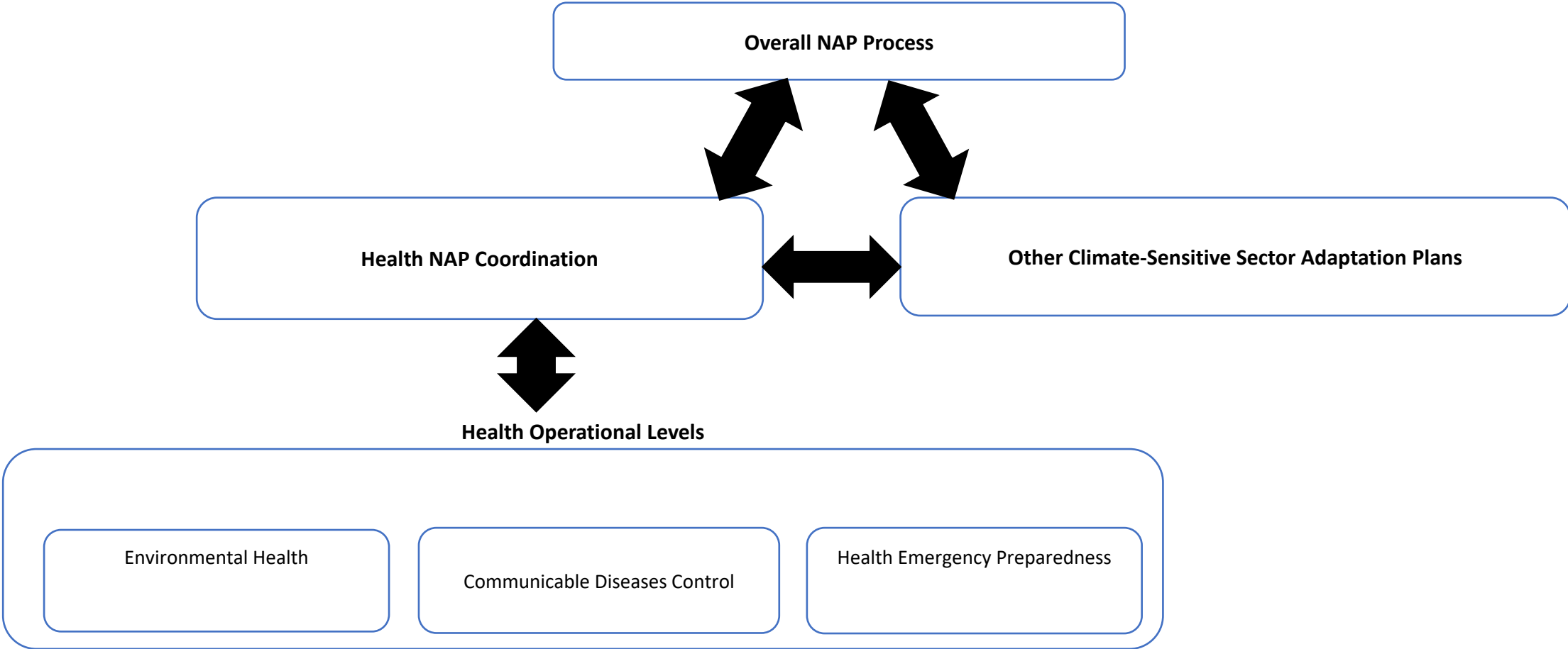
Health Impacts of Climate Change

- Malnutrition
- **Climate sensitive Diseases**
 - *Vector Borne Diseases*
 - *Waterborne Diseases*
- **Respiratory Tract Infections**
- **Heat stress**

Physical Infrastructures

- Sanitation facilities
- Health facilities

Integrating the HNAP within the overall NAP Process



Health National Adaptation Plan

The goal of H-NAP

- Contributes to main goal of HSTP with the focus on to make sure the health system is climate resilient

Strategic Objectives of the plan

- Enhance the early warning and surveillance in the context of health emergency risk management
- Building the capacity of health sector for realization of climate resilient health system
- Enhance the resilience of health system in provision universal health coverage
- Create enabling environment for health adaption to climate change implementation

Key Intervention Areas of the H-NAP

- **Strengthening and Expanding Health Infrastructure**
- **Strengthening existing Integrated Disease Surveillance and Response**
- **Promoting climate resilient Sanitation facilities**
- **Promoting climate resilient water safety plan**
- **Promoting Family planning**
- **Revising building codes of health facilities**
- **Promoting climate change mitigation initiatives**
- **Promoting community health insurance scheme**
- **Advocating and creating awareness on climate change and health**
- **Encouraging operational research on health and climate change**

Strategic Approaches of H- NAP

- Mainstreaming climate change adaptation to Health Programmes
- Community Mobilization
- Strengthening partnership
- Strengthening the existing health system
- Strengthen health care delivery
- Strengthen IDSR
- Improve HMIS

Mainstreaming climate change adaptation

- **Developing and adopting climate proof latrine design and technology guidelines**
- Preparing required logistics for disaster
- Strengthening Early Warning and Integrated Diseases Surveillance
- Capacity building on utilization of climate data to climate sensitive diseases
- Promoting , Monitoring and Surveillance of Drinking Water Quality for realization of Safe Drinking Water

Mainstreaming climate change adaptation

- **Sensitizing people on the health impacts of climate change and adaptation options**
- Advocating and promoting walking and using bicycle as means of transportation to mitigate climate change
- Issuing new health facilities' building codes
- Conducting active surveillance with special emphasis to drought and/or flood prone areas
- Promoting family planning with special emphasis to people who live at degraded land and drought prone areas

Strengthening partnership

S.N	Intervention	Partner	Tasks to be implemented
1	Awareness creation on climate change posed health effects and adaptation options	Community Dev't partners OGCA & MoE	-identifying health effects and adaptation options -sensitization -preparing documentaries & spots
2	Capacity building on VA	Universities	Providing training on VA for regional TWG
3	Strengthening surveillance system	DRMFSS/MoANR	-Organizing nutri. survey -Improving Nutr. Surveillance
4	Promoting climate resilient water safety plan	MoWIE	-Establishing CRWSP Teams -Conducting Joint Supervision -Strengthening Water Quality control -promoting self-supplied water for health facilities
5	Revising building codes of HFs	MoUDHC	-Revising HF' building codes

Strengthening partnership

S. N	Intervention	Partner	Tasks to be implemented
6	Promoting climate change mitigation initiatives	MoANR/MoWIE/MoT/MoYS/Dev't Partners/Private Company	<ul style="list-style-type: none"> -Promoting gardening and planting trees -Introducing solar/wind energy -promoting bicycle ride -Promoting clean energy stoves
7	Encouraging operational research on health and climate change	MoEFCC/MoST/Universities	-conducting local operational research on climate change and health
8	Providing training on integrated health and environment surveillance to health workforces	MoEFCC	-conducting training on integrated health and environment surveillance
9	Providing training on utilization of climate data	NMA	-Conducting training on how to use climate data to climate sensitive diseases
10	Capacity building of health sector to be resilient to climate change	Development Partners	-Supporting health facilities to have self-water supply, renewable energy and green environment

Targets

- All regional states will have functional CCH-TWG
- All regional states will have their own VA assessment Report
- 65.5 million people will be sensitized about CC & Health
- 754 HFs infrastructure will be re-innovated
- 1,126 HPs and 90 HCs will have self-supply of Water
- 3,789 HPs and 343 HCs will have self-generated renewable energy

Targets...

- 7, 703, 040 HHs will plant trees in their compound
- 526 drought prone kebele will assure community insurance
- The contraceptive prevalence rate in drought prone areas will be 75%

Budget

- The budget required to achieve the targets and objectives is minimal as most activities will be carried out by mainstreaming
- **Total Budget = 1,704,796,316.00 Birr**
- Budget to be covered by **FMOH = 809,623,200.00 Birr (cost of community mobilization)**

Challenges

- No climate change and health structure at sub-regional level
- Limited financial resource for climate change and health activities
- Limited knowledge on climate change and health

Next activities

- Revising/ updating V&A assessment by district level
- Revising the H-NAP
- Establishing CCH coordinating unit at sub-national level
- Financial resource mobilization
- Capacity Boulding/ training to health professionals on CCH
- Advocacy on climate change and health for decision makers