

Shaping COP27 around African climate and health priorities

This statement is the outcome of an online HCN facilitated workshop on 30th June 2022 with 22 African experts from across the sectors of climate, energy, food and health.

Underlying principles for climate and health priorities for Africa at COP27

For climate action to be effective, impactful, and healthy for African countries and people there must be a coming together of the climate framing of the north and the development framing of the south. There is an urgent need to deliver the 2030 Sustainable Development Goals (SDGs) while addressing the climate injustices experienced in Africa, the most vulnerable continent that did least to cause the climate crisis. Ultimately “net zero” should mean zero poverty.

Achieving this goal requires enhanced global partnership that recognises the global commons of climate and the need to see the world through the lens of others. Global problems need international solutions that meet national and local needs. The alternative is mutually assured destruction; Covid-19 vaccine nationalism showed it does not work. The world does not lack money (the Covid-19 response and recovery mobilised \$20 trillion). Nonetheless the £100 billion climate finance per year is illusive (especially for Africa). The resources that reach the continent need to be justly distributed and practically focused on human wellbeing.

Importantly, Africa has a very young population and youth must be at the heart of the solutions, providing healthy environments to grow up in, creating jobs, sharing wealth, and protecting resources for future generations.

In policy terms, for COP27 to prioritise African health and climate means:

1. African voice and inclusion

- African voices must be heard on the international stage to ensure that the demands and needs of African countries and communities break through to the negotiations.
- This includes deeper involvement of civil society for viable partnerships. It is essential to involve communities, women, and young people in this process to overcome the challenges and create solutions.

2. Joined-up action on adaptation, mitigation, pollution, and health

- For African country development, mitigation and adaptation should go hand in hand to ensure that long term sustainable and regenerative development needs are met for both health and wellbeing.
- Ensuring initiatives ‘piggyback’ on each other to ensure climate-health-development opportunity is maximised, and that individual initiatives aim to deliver outcomes across the three agendas. For example, the C40 Clean Air Cities Declaration² holds potential to benefit health, climate, and development for cities across the continent.
- Bring health professionals, including those working on air pollution and non-communicable diseases (NCDs) such as heart disease, cancer, and diabetes, into climate mitigation and adaptation decision making to maximise health outcomes.

3. Trust building to overcome instabilities

- Many African countries have political instability, living with continual change and risk. Overcoming this needs building trust within nations and between nations, building coalition with strong civil society engagement.
- At a national level, African countries which have stronger levels of trust between citizens and government should have greater success delivering the Covid-19 response, as shown by analysis by Foresight Africa². Robust and free media is a critical component of trust building, with the ability to expose corruption. Swift climate action will need a similar national level of cooperation between civil society, media and state.
- The Just Energy Transition Partnership between G7 countries and South Africa³ has set high expectations for international collaboration and financing for sustainable energy transition but will require effective and impactful delivery of funding and objectives to provide confidence for the ongoing phase out of coal.

4. Targeted finance where it is needed most

- Flow of money must be targeted to where it is needed most, ensuring it gets to all countries (including lower income countries), and to the communities, local enterprises and public services that need it most. Funds should be used to create jobs and income for young people and women.
- Public finance will be needed to remove the risk from investment for less stable countries and for new innovative technologies and developments, and to raise capacity to help recipient countries manage and spend finances effectively.
- Ensure that investments and financing of all new infrastructure development projects, particularly in cities, embrace planetary health principles⁴ to optimise climate and health co-benefits. For example, organisations that finance transport infrastructure can integrate air quality improvements, increased access to green space, and streets that are accessible and safe for walkers and cyclists.

5. Appropriate technology, including indigenous technology and knowledge

- In order to support technology transfer, it is critical to remove intellectual property blockages and integrate indigenous technology and knowledge to ensure local appropriateness.
- Avoid inappropriate false solutions which damage nature or economies, or technology solutions at the expense of employment which is critical for young people to thrive.

6 Evidence for action on climate and health

- Measuring, recording and disseminating evidence on the change that is needed is essential through monitoring of air, water, land pollution and climate impacts across the continent, at local level, for cities, for agriculture and communities.
- Using evidence to build scenarios that can inform decision making on the different health impacts of climate and emission, such as the *African integrated assessment on air pollution and climate change*⁵.

The three thematic issues considered here, energy, food, and health resilience, are all essential for climate and health action, and all have very specific climate and development priorities for Africa.

Africa's energy comes with a health warning

Health must be a fundamental component of energy planning and decision making. Lack of access to modern energy across the African continent is associated with deprivation in health, education and productive use, plus residential cooking, gathering fuelwood and using it brings major health implications from indoor air pollution. Polluting transport, low-productivity agriculture and food insecurity are part of the energy, health, and climate dilemma for Africa. The burdens associated with energy fall more heavily on women.

Energy access is a key part of building resilience of African communities, creating a mitigation/adaptation nexus, communities with energy access have a higher capacity to respond to the impacts of climate change due to improved health from clean air and increased income opportunities⁶. Energy is an enabler, boosting the outcomes across development sectors. Integration of energy with other sectors will enhance the delivery of the SDGs, recognising the co-benefits including for healthy cities and transport, energy efficient health services and gender inclusion. In each country the route to deliver these goals will be different.

Governments should provide affordable renewable energy to low-income earners, particularly young people, and instigate collective actions especially at the grassroot level. For a just transition to cleaner energy in Africa, affordability is key for residential and small businesses, with the cost of purchasing and running appliances often high (dollar price is a critical issue). Promoting community ownership of decentralised clean energy systems is also important to support energy access. The transition must address health impacts for at-risk groups across the energy supply chain and related sectors, including social protection measures; and avoid false solutions which create new environmental or social risks, or undermine employment opportunities.

Long- term climate timescales do not prioritise immediate benefits from decreasing air pollution. It is critical to deal with air quality now; we should not live with an unhealthy environment while we wait for future solutions. African governments must recognise that energy problems are public health problems. Energy ministries must make rapid and continued improvements in energy access and towards cleaner energy. Delivering this energy transition for Africa requires emissions regulatory measures and monitoring for air and water quality. Delivering clean household energy solutions for cooking and heating should involve the health sector in monitoring emissions and impacts on health.

African countries are at a crossroads, with new energy infrastructure still to be built to meet the growing demand. Africa needs more energy, but this requires finance and investment, and this investment must target urgent development needs first, while also being climate compatible. Development partners including both multilateral and bilateral partners need to urgently increase their level of investment in the African energy sector, ensuring available and realistic financing is provided to all countries to transition to cleaner fuels and more access.

African countries need an honest discussion on fossil fuels and the transition pathways to develop a strategy to wean themselves from fossil revenues and develop supported transition pathways, especially for natural gas. A clear-cut blueprint should be developed to transition African economies which is inclusive of all people. This will include ending of fossil fuel subsidies, an end to allocation of new coal mining and oil, gas drilling, and fracking rights, and decommissioning of oil and gas fields.

At the same time, governments must develop policies and regulations with the aim of building confidence of investors for renewable energy, both in decentralised systems and those at utility scale. This includes de-risking investments for energy access and renewables such as providing subsidies and incentives for the diffusion of renewable energy technology. African governments need to strengthen legal, regulatory, and institutional frameworks on renewable energy technologies.

African Food: Western-style diets and obesity sit alongside food insecurity, malnutrition, and hunger

The food, climate and health nexus in Africa sees the very existential risk of food insecurity for many millions of people, while there is an ever-growing problem of obesity and related illness for many others with the rise of the Western-style diet, which are non-traditional, often highly processed food, and produced through industrialised food systems.

The industrialised food system is the major driver of these food system health issues, and a leading greenhouse gas emitter. The growing prevalence of the Western style diet, which is high in sugars, salt, and fat and protein from red meat, presents multiple challenges; it inflates food prices, jeopardises food sovereignty, and drives loss of indigenous foods, system fragility and resilience. Processed foods are being dumped on African countries, and this contributes towards health problems including rises in obesity, including in children and young people, leading to non-communicable diseases such as cancer, diabetes, and heart conditions.

At the same time undernutrition is rising as changing precipitation and temperature patterns affect crop yields and crop nutritional quality leading to famine and chronic hunger, as has been the case in East Africa⁷.

Food systems affect health and climate through multiple, interconnected pathways, notably:

- Availability, pricing, and marketing of ultra-processed foods.
- Environmental contamination, pollution, and degradation.
- Contribution to climate change from industrialised food production.

To overcome this nexus, and provide access for all to nutritious diets, there is an urgent need to promote production and consumption of nutritious, whole-food diets underpinned by resilient, diversified food production adapted to local ecosystems. It is essential to prioritise drought resilient traditional African crops and food systems, moving away from processed foods and monocrop Western grains and connecting to past food traditions for the continent.

Strategies to deliver this change must include supporting farmers to be ready to respond to climate, and building connections between farmers, health professionals and communities. Investment in African food crops that are resistant to drought and other impacts of climate change, and supporting funding for farmer training on agroecology, are required.

Food systems adaptation and mitigation measures should be integrated into the Nationally Determined Contributions (NDCs) towards the goals of the Paris climate agreement, along with estimated domestic and international finance requirements to deliver these measures.

Shaping African food systems around climate and health priorities will require redirecting public sector finance and subsidies away from harmful food and industrialised farming practices. Caution must be exercised with regard to false food technologies coming to Africa, the influence of the agri-sector on governments, and high input pesticides and other agrochemicals. In particular, genetically modified organisms (GMOs) may not have been properly tested or adapted to local needs. And governments should be formally informed about and legislate against use of biocides such as glyphosate.

African health response to climate change: equipping, resourcing, and locally tailoring responses

At COP26, fifty-nine countries committed to the COP26 Health Programme to build climate resilient health systems⁸. The Programme requires countries to undertake climate change and health vulnerability and adaptation assessments (V&As) at population level and health care facility level, and to develop a health National Adaptation Plan (HNAP) informed by the assessment. Together the V&As and HNAPs should facilitate increased access to climate change funding for health responses to climate change. More African countries need to take this proactive approach and ensure that the HNAPs deliver for the country and local context.

There are many challenges faced in delivering this in the African context, where many lack access to basic health services, resourcing is constrained, and data and evidence for health risks and response is extremely limited, and often absent at a local level.

Therefore, delivering African health responses to climate change will require connecting with communities on health impacts, underpinning decisions with evidence of health impacts and co-benefits, and involving community health concerns in decision-making. Climate and health research needs to be carried out at community level, and lead to building health workers capacity for treating affected patients, and requiring simple, appropriate messaging. This means translating findings from research to local responses. Access to basic services protects communities against poverty and makes them less vulnerable and more resilient to the health impacts of climate change.

Climate finance for health adaptation and resilience measures is needed to raise the capacity and resilience of health systems and facilities, including equipment, human resources, and locally tailored needs, in particular for healthcare needs in most affected or polluted areas.

Increased evidence based and early warning systems are urgently needed for health impacts to make informed and effective decisions. A key point is that this response must be international in nature, including universities and research institutions across Africa. This should include documented evidence of real-world health impacts of environment exposures across Africa, involving multidisciplinary research, monitoring and leading to stricter regulation, including Africa-specific concentration and dose-response functions for more.

The health system itself can be part of the solution, through the decarbonisation of the healthcare systems. With emissions inventories from the health system, health providers can identify 'carbon hotspots' in its system and integrate sustainable management into specific activities such as waste and streamlining sustainability in procurement processes.

Climate change to be included in health worker training curricula⁹, equipping health professionals to be agents of change for climate resilient and low-carbon health systems, and protecting the public and their patients from climate-health impacts.

Ultimately, to shape COP27 around African climate and health priorities will need the involvement of African health ministries and authorities in climate decision making and advocacy, building synergies between the Ministries of Environment and Health Ministries.

References

¹ African cities commit to improving air quality, Smart Cities World, 26 May 2022, <https://www.smartcitiesworld.net/air-quality/air-quality/african-cities-commit-to-improving-air-quality-7734>

² Foresight Africa 2021, chapter 6, <https://www.africaportal.org/publications/foresight-africa-2021/>

³ At COP26 in November 2021 France, Germany, UK, US and EU launch ground-breaking International Just Energy Transition Partnership (JETP) with South Africa, <https://www.gov.uk/government/news/joint-statement-international-just-energy-transition-partnership> And the 2022 G7 leaders summit affirmed the intention to extend JETPs to other countries <https://www.msn.com/en-in/news/other/focus-on-energy-transition-tie-ups-in-attempt-to-combat-climate-crisis-at-g7-summit-in-germany/ar-AAAYRMbD>

⁴ Conversations on Planetary Health, Planetary health 101, Panorama 2017, <https://www.rockefellerfoundation.org/wp-content/uploads/Planetary-Health-101-Information-and-Resources.pdf>

⁵ Africa integrated assessment on air pollution and climate change, <https://www.sei.org/projects-and-tools/projects/africa-assessment/>

⁶ Murph, By and Corbyn, D., 2020, Energy and Adaptation: Exploring how Energy Access can Enable Climate Change Adaptation, Wathi, <https://www.wathi.org/energy-and-adaptation-exploring-how-energy-access-can-enable-climate-change-adaptation-africaportal>

⁷ Drought in East Africa: Is the worst yet to come?, The Star, 1 July 2022, <https://www.the-star.co.ke/news/2022-07-01-drought-in-east-africa-is-the-worst-yet-to-come/>

⁸ World Health Organisation, 9 November 2022, Countries commit to develop climate-smart health care at COP26 UN climate conference, <https://www.who.int/news/item/09-11-2021-countries-commit-to-develop-climate-smart-health-care-at-cop26-un-climate-conference> and Building climate-resilient health systems <https://www.who.int/teams/environment-climate-change-and-health/climate-change-and-health/country-support/building-climate-resilient-health-systems>

⁹ A call for strengthening climate change education for all health professionals. An open letter to universities and all education stakeholders (9 June 2022). <https://climateandhealthalliance.org/wp-content/uploads/2022/06/Curriculum-letter.pdf>

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