

Module 2d: Health and Climate Finance

Fact sheet

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Photo: IFRC

Fact sheet on climate finance and health

What is climate finance?

Climate finance is any funding that supports climate adaptation and mitigation. The Green Environment Facility (GEF) and the creation of international funding pathways like the Green Climate Fund distribute international funding to local projects. Through the Paris Agreement in 2015, high income countries committed to allocating USD 100 billion a year to global mitigation and adaptation by 2020, 50% to adaptation and 50% to mitigation (UNFCCC, n.d.). This goal has yet to be achieved and the vast majority of funding is directed towards mitigation efforts. However, in the Glasgow Climate Pact, donor countries reaffirmed their commitment and aim to increase adaptation funding. Increased climate funding will be integral in reducing climate impacts and increasing the ability of communities to adapt to changing environments and hazards.

What are the gaps in climate finance?

Estimates agree that less than 0.5% of climate adaptation funding goes to the health sector with only a fraction going to local projects (WHO, 2021b; RCCC, 2021). It is necessary to address this gap in funding in order to ensure that health systems have the capacity to take on increased burdens from climate impacts. Most adaptation projects fall into agriculture, general environment, multi-sectoral or water and sanitation sectors. Though there may be indirect health benefits from many of these

projects, the projected impacts of climate change on public health merits targeted adaptation funding to underserved health systems. Scaling-up of local health action is urgently needed.

Why do we need more funding for climate adaptation in the health sector?

Climate change threatens [health and wellbeing](#). If health systems and health consequences are not widely considered in climate adaptation initiatives, health systems will be ill-equipped to manage the adverse impacts of climate change. Health outcomes include risk of heat stroke and exacerbating non-communicable disease due to extreme heat, food insecurity and malnutrition from changes in ecosystems and the nutritional content of staple crops, respiratory and diarrheal disease linked to air and water pollution, increased risk of infectious disease due to shifts in vector ranges and precipitation patterns, physical trauma from natural hazards, and increased mental health burden from disasters, reduced livelihoods, and uncertainty. This will be amplified in countries that have the least ability to adapt.

Why should national societies be involved in climate adaptation in the health sector?

National societies are well positioned to implement climate adaptation in the health sector and to partner in proposals for multilateral climate adaptation financing. This is particularly true for early warning systems that build off existing disaster response infrastructure. Investing in climate adaptation is in the best interest of national societies as it will reduce the humanitarian burden of future disasters and crises.

How can national societies access climate finance funding?

National Societies should develop climate finance strategies by mapping out opportunities from national climate funds, bilateral donors, and, where appropriate, investigate whether it may be possible to partner as an executing agency for an entity that is accredited with a major climate fund, such as the Green Climate Fund or the Adaptation Fund. This mapping exercise should be accompanied with a sustained effort to work alongside Government counterparts for national adaptation planning, especially through NAP and NDC development (see [IFRC NAP Guidance](#) for more details). Developing partnerships with Government, donors, and Accredited Entities is vital to demonstrate the value of national society work in adaptation, and eventually securing climate finance to do so.

How can national societies leverage climate finance discussions in their countries to support local health initiatives?

National societies should encourage donors to address the gap in climate finance for health by supporting locally-led initiatives. The lack of funding and action in this area will shift spending later, as

costs mount and health systems are forced to grapple with new disease burdens. The health burdens of climate change are extremely costly, estimated at USD 2-4 billion a year by 2030 (WHO, 2021 a). Many national societies are already auxiliary to and/or an integral part of the health system and emergency preparedness in their countries and therefore can play to their strengths to be an important player in health-focused climate adaptation. National societies can advocate to include health in national adaptation planning and encourage the IFRC to increase engagement in climate finance pathways. Strong partnerships and co-lead proposals between NS, IFRC, accredited organizations, and like-minded national, regional and global stakeholders will be important to increasing the involvement of national societies in climate finance.

More information can be found in the [IFRC Climate Finance FAQ](#).

References:

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