

Making a case for

Planetary Health

in sub-Saharan Africa

POLICY BRIEF

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Key Messages

- Existing climate change policies and legislation are relatively weak and inadequate to deal with climate change issues in the health sector. Very few sections of policy frameworks directly address the cross-cutting health impacts of climate change despite their significance.
- Health vulnerability to climate change is often overlooked with limited epidemiological data and climate scenarios available since 2015 when the last climate change and health vulnerability assessment was done in Kenya.
- Mainstreaming climate change responses into development planning as stipulated by the Kenya Climate Change Act, 2016 is a challenge due to lack of reviewed vulnerability and adaptation assessments. Establishing health impact, vulnerability and adaptation baselines allows health authorities to monitor progress made, or adaptation failures, in efforts to protect the health of populations from climate change impacts.
- Climate change adaptation and mitigation programs and projects in Kenya are often implemented as standalone activities, which render them less effective largely due to unstructured and weak linkages between ministries, departments and agencies (MDAs) and other actors at both national and sub-national levels.

Integration of Health in Kenya's Climate Change Policies

Introduction to health impacts of climate change

Climate change threatens human health and wellbeing through effects on weather, ecosystems, and social systems¹. These effects increase exposure to extreme events, change the environmental suitability for infectious disease transmission, alter population movements, and undermine people's livelihoods and mental health². Direct and indirect health impacts associated with climate change are caused by rising temperatures, altered precipitation patterns as well as increasingly severe and frequent extreme weather events³. A range of social factors can act to either exacerbate the health impacts of the environmental effects of climate change or to help mitigate them with public health interventions. These interventions are well articulated in policies which provide collective interventions affecting transformation in social welfare, social institutions and social relations⁴.

The Climate change policy framework in Kenya

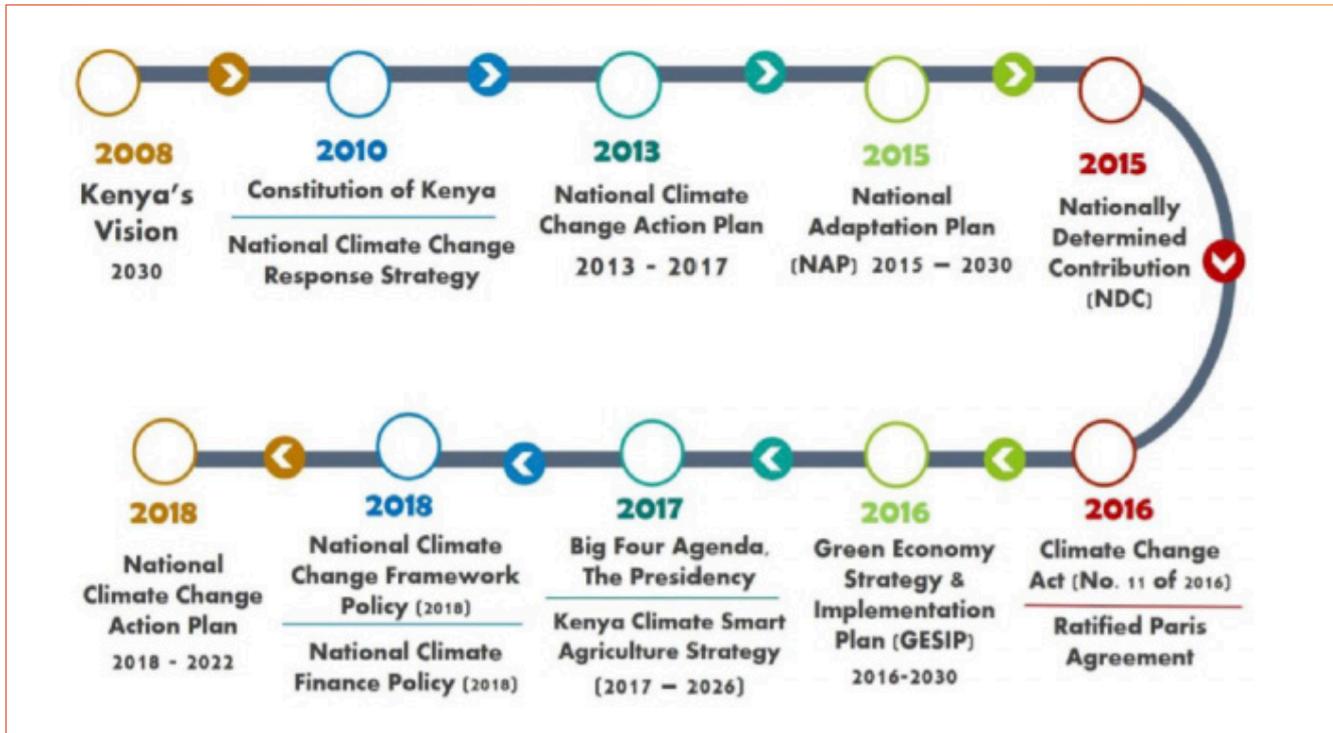
Kenya has an advanced legal framework and a suite of policies, strategies, plans in place to address climate change. The Climate change policy framework integrates disaster risk reduction, climate change adaptation, and sustainable development so that they are pursued as mutually supportive rather than stand-alone goals. Almost all the climate change policies recognize that climate change is expected to exacerbate the occurrence and intensity of disease outbreaks and may increase their spread in some areas. Reducing climate-related health risks, particularly among poor households, will therefore require that the underlying causes of vulnerability, including poverty and poor water and sanitation services, and the capacity of the health-care system to manage climate influenced diseases are both addressed.

¹Workman, A.; Blashki, G.; Bowen, K.J.; Karoly, D.J.; Wiseman, J. The Political Economy of Health Co-Benefits: Embedding Health in the Climate Change Agenda. *Int. J. Environ. Res. Public Health* 2018, 15, 674

²World Health Organization 2015. Climate Change and Health Country Profile for Kenya.

³World Health Organization 2014. Quantitative Risk Assessment of the Effects of Climate Change on Selected Causes of Death, 2030s and 2050s

⁴Watts, et al. 2017. The Lancet Countdown: Tracking progress on health and climate change. *Lancet* 2017, 389, 1151–1164



Source: GoK, 2020⁵

Integration of health in climate change policies

A review of the existing climate related policies in Kenya, shows that public planning and policy-making for climate change has appropriately focused on reducing greenhouse gas emissions generated by energy, transport, industry and agriculture, yet, often leaving public health somewhat on the margins of climate action planning.

Climate change and health adaptation and vulnerability assessment

One thing clear from the review of the policy documents is that they all propose updated analysis of the vulnerability and adaptation of key sectors of the economy on climate change including the health impacts. In the health sector, the policy documents call for the assessment of the risks of populations to climate change impacts including short and long-term public

health effects of extreme weather events. However, in Kenya, vulnerability is often overlooked and epidemiological data and climate scenarios are limited. The last climate change and health vulnerability assessment in Kenya was done in 2015 with the support of the World Health Organization (WHO). Climate change and health vulnerability and adaptation assessments are an important instrument for taking stock of current conditions and vulnerabilities, and should be considered as part of an iterative process to be reviewed and returned to over time⁶. Establishing health impact, vulnerability and adaptation baselines allows health authorities to monitor progress made, or adaptation failures, in efforts to protect the health of populations from climate change impacts. Without the vulnerability and adaptation assessments, it is difficult to mainstream climate change responses into development planning as stipulated by the Kenya Climate Change Act 2016. The primary role for the Kenya Climate Change Act 2016 was to mainstream climate change responses into development planning, decision making and implementation. This however, may be a challenge as Kenya does not have updated climate change and health adaptation and vulnerability baseline indicators since 2015 that can provide the evidence-based information to help public health officials and partners in other sectors navigate these challenges and respond effectively to increasing risks.

⁵GoK, 2020. Report on National Climate Change Priorities and Relevant Capacity Development Goals and Initiatives in Kenya

⁶Berry et al 2018. Assessing Health Vulnerabilities and Adaptation to Climate Change: A Review of International Progress. Int. J. Environ. Res. Public Health 2018, 15, 2626



Implementation of climate change and health action plans

Kenya has always updated its national climate change action plan (NCCAPs) detailing vulnerability to the impacts of climate change and the actions planned to ameliorate these impacts besides the National Climate Change Response Strategy (NCCRS). Despite this, adaptation preparedness remains inadequate. NCCAP has not been easy to implement because it only lists the priority adaptation needs (in the form of programs/projects) and does not consider the overarching policy framework, such as mainstreaming of adaptation into national and county plans. As a result, adaptation programs and projects are often implemented in Kenya as standalone activities, which render them less effective. The existing guidelines on climate change adaptation for Kenya are contained in the climate change action plans. The current NCCAP 2017-2022 does not have strong provisions on climate change adaptation and mitigation in the health sector, which can be attributed to the time when they were made. For instance, the action plan under the strategic objective five, merely states that it will aim to mainstream climate change adaptation into the health sector but it does not give specific activities that can be done towards that, or how it can be done. Although having an action plan is a positive step towards addressing climate change, Kenya needs strong policy action for the health sector that address both mitigation and adaptation, giving guidance on how to integrate and mainstream these into all national and county sectors.

Technical capacity for climate change and health policy implementation

The responsibility for implementing national climate change policy largely rests with county governments as most of the functions of the health sector are devolved to the county governments. As such, most climate actions in the health sector prioritized in the NCCAP are supposed to be implemented at the county level where counties are required to mobilize most of the resources to undertake climate change actions as they don't get sufficient allocations from the national government. This notwithstanding

the fact that county governments in Kenya still struggle to increase capacity necessary to assume their devolved responsibilities of implementing the climate change action plan.

Related to limited technical capacity is inadequate staff numbers, a constraint at all policy implementation levels. Most of the departments in the ministries at both national and county level do not have sufficient skills to enable long term planning in climate change adaptation and mitigation. An example is the department of climate change and health at the ministry of health which only exists at the national level with very few staff and not at the county level despite health being a devolved function. This means that the few staff at the national level in the ministry of health are required to support all the 47 counties in Kenya on matters of climate change and health. This inadequate technical capacity coupled with low integration of research evidence leads to poor strategic planning and ineffective policies and policy implementation. As a result, at county level, there is inadequate planning for climate adaptation, limited access to available climate change funding and underutilization of available participatory approaches that would have ensured inclusion of and ownership by relevant stakeholders.

Coordination of actors for climate change and health policy implementation

In terms of the coordination of actors for policy implementation, policy documents stipulate key actors and their roles, however, coordinating these roles practically play out differently. The linkages between ministries, departments and agencies (MDAs) and other actors are largely unstructured and weak. This, in part stems from structural issues inherent in the ministries making the implementation more complex. Furthermore, these roles are expected to be replicated at county level yet the MDAs and committees are not necessarily replicated at that level, creating an implementation gap. Thus, Kenya needs to strengthen the coordination, networks and information flows between ministries, different levels of government, civil society, academia and the private sector to have a more efficient integration of climate change variables into poverty reduction and development strategies.



County governments in Kenya still struggle to increase capacity necessary to assume their devolved responsibilities of implementing the climate change action plan.





Conclusion

This analysis has shown that existing policies and legislation are relatively weak and inadequate to deal with climate change issues in the health sector. Very few sections address health impacts of climate change and their mitigation. There is a need for an exclusive and comprehensive climate change strategic policy and legislative framework for the health sector that creates, or sets out the mandate for, addressing the health impacts of climate change. In addition, the strategic policy should have a clear and comprehensive implementation framework, to ensure that funds are channelled into projects that address the most vulnerable health sectors. Effective delivery of the climate change commitments for the health sector both nationally and at the county level requires both institutional and technical capacity.

Counties need to have the capacity to coordinate actors from government and non-government agencies and mobilize public participation. In addition, county governments need to be able to integrate their priorities and policies in all relevant sectors. This consultative process requires a multi-sectoral technical team that is able to advocate the Nationally Determined commitments (NDC) priorities in the health sector to all relevant actors, as well as increase buy-in from all stakeholders. Counties also need the ability to collect data on the health vulnerabilities of Climate change, to monitor, re-evaluate and strengthen frameworks that have been put in place by the national government to achieve national commitments.

Key recommendations

While the causes of climate change are global, health impacts are inherently local due to geography, exposure, and sensitivity to health effects. Some local populations are substantially more vulnerable than others. Therefore:

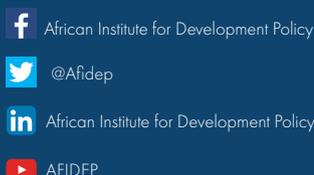
- Climate change and health vulnerability assessments should be iteratively reviewed and returned to over time to take stock of current health conditions and vulnerabilities to climate change in the country.
- The ministry of health should have an exclusive and comprehensive climate change strategic policy and legislative framework for the health sector. It should address the health impacts of climate change with a clear and comprehensive implementation framework to ensure that funds are channelled into projects addressing the most vulnerable populations.

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