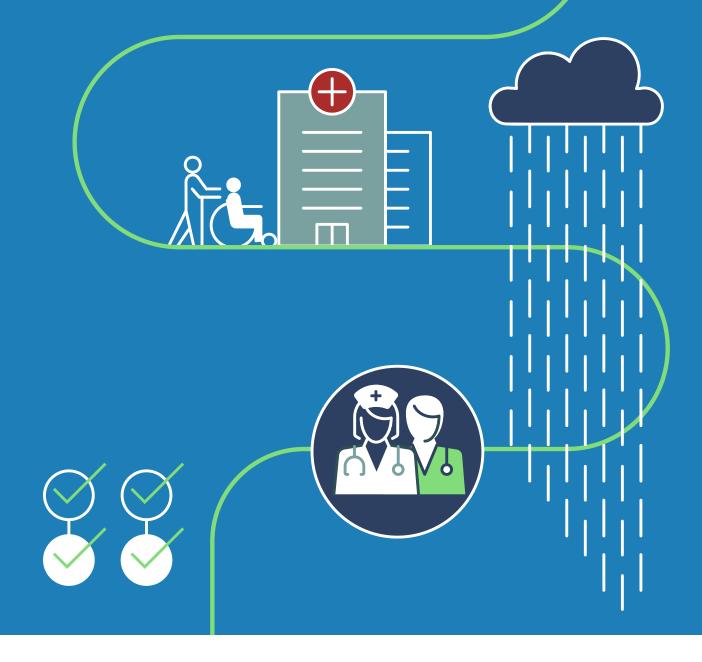
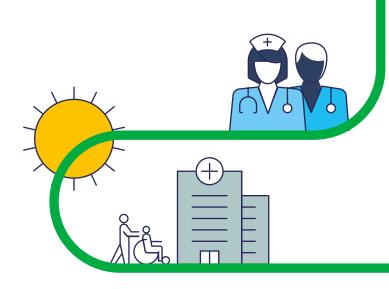
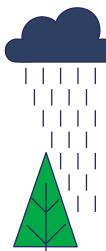
Health at the heart of national adaptation planning.

A global review of national adaptation plans and health national adaptation plans: **Executive summary**









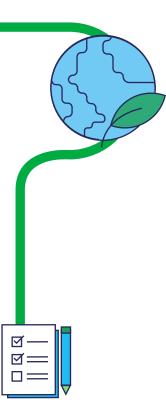
Introduction

The climate crisis is a health crisis. Climate change is affecting health – directly and also through changes in key health-determining sectors (e.g. water and food). It is also affecting the capacity of health systems to protect health. To address the health risks of climate change and protect population health, it is critical that climate change is integrated into national health planning and that health is integrated into national climate change planning.

The process to formulate and implement national adaptation plans (NAPs), established as part of the United Nations Framework Convention on Climate Change (UNFCCC) processes, is a key opportunity to integrate health into national climate change planning. Ministries of health are therefore encouraged to develop a standalone health-specific component – the health national adaptation plan (HNAP) – while ensuring integration of health within the overall NAP.

The World Health Organization (WHO) has conducted a global assessment of NAPs (59 NAPs¹) and a sample of HNAPs (27 HNAPs²). The aim was to analyse the extent to which health is considered in national adaptation planning processes, to highlight best practices and to provide recommendations for promoting comprehensive integration of health in these processes.

This summary outlines the key results. The full report, *Health at the heart of national adaptation planning*. A global review of national adaptation plans and health national adaptation plans, which will include best practices, case studies, topical deep dives and recommendations, is in preparation.



¹ NAPs submitted to the UNFCCC NAP Central Portal (https://napcentral.org/ submitted-naps) by 1 October 2024.

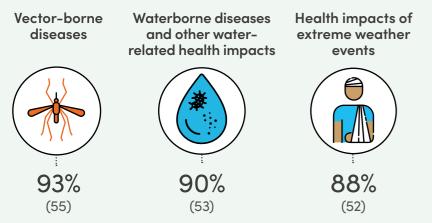
² HNAPs submitted to the Alliance for Transformative Action on Climate and Health secretariat (www.atachcommunity.com/our-impact/commitment-tracker/atach-baselines/) by 28 February 2025.

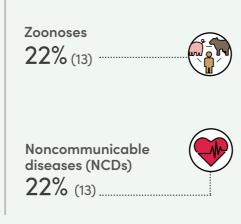
Key findings: assessment of health in NAPs

All 59 NAPs identified health as a sector vulnerable to climate change.

100% of NAPs (59) considered a range of climate-sensitive health risks.

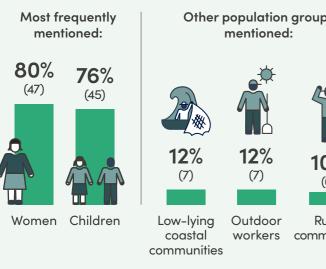
Most frequently mentioned risks:





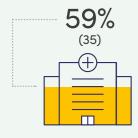
Least mentioned risks:

93% of NAPS (55) identified at least one specific most-at-risk population group.





42% of NAPS (25) identified the Ministry of Health (MoH) (or country equivalent) as the lead agency in the development of the health section / chapter. 17% (10) specified a climate change focal point \square Π in their MoH. Π



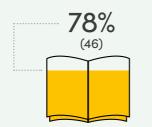
specified an ongoing role for the health sector in in NAP coordination



estimated the cost for implementation of health measures



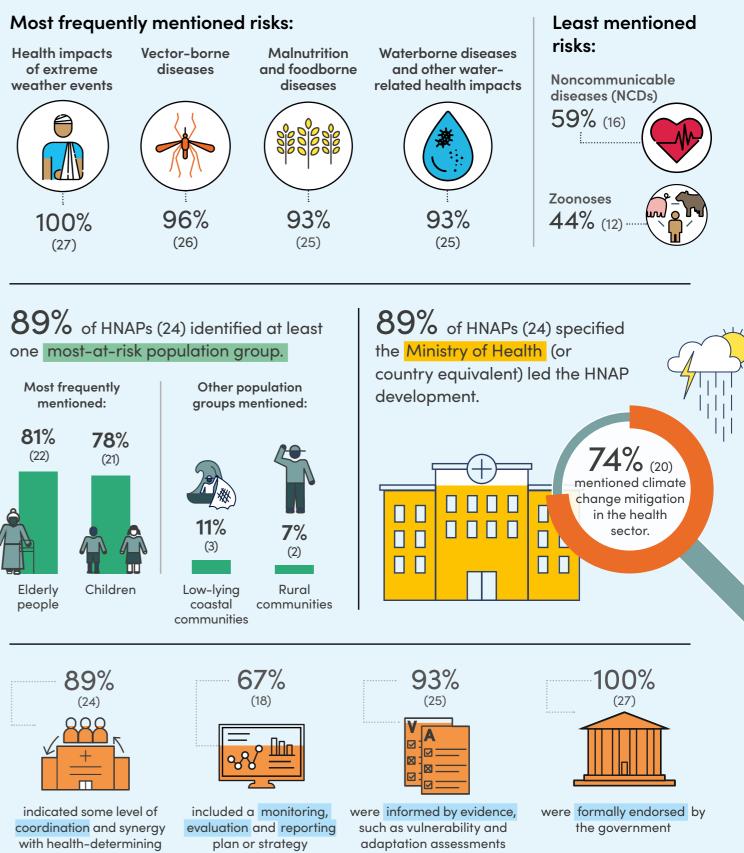
referenced a separate HNAP or a climate change and health strategy

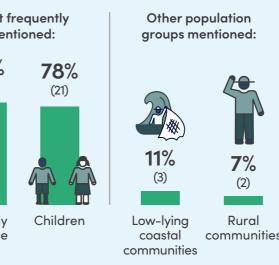


that used a sectoral structure included a specific section or chapter dedicated to health

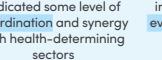
Key findings: assessment of HNAPs

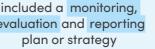
100% of HNAPs (27) considered a range of climate-sensitive health risks.





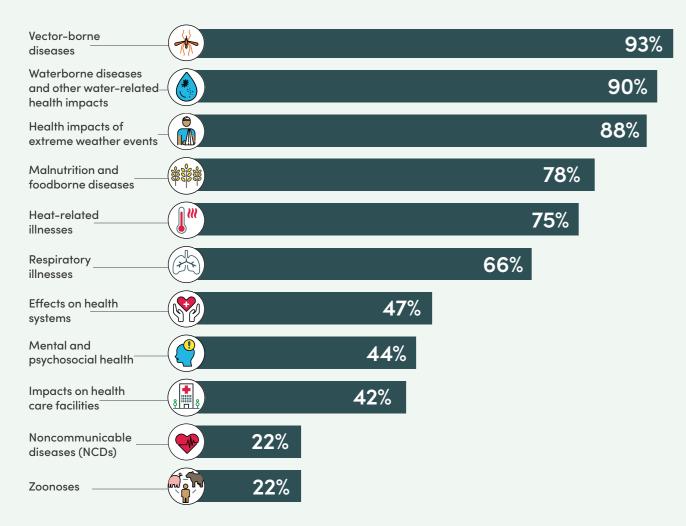






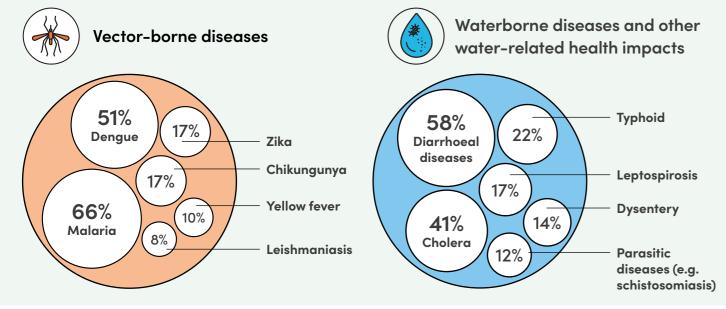
Most commonly identified climate-sensitive health risks in NAPs

Vector-borne diseases and waterborne diseases and other water-related health impacts are the most frequently mentioned, while NCDs and zoonoses are the least frequently mentioned.



Percentage of NAPs that mention vector-borne and waterborne diseases

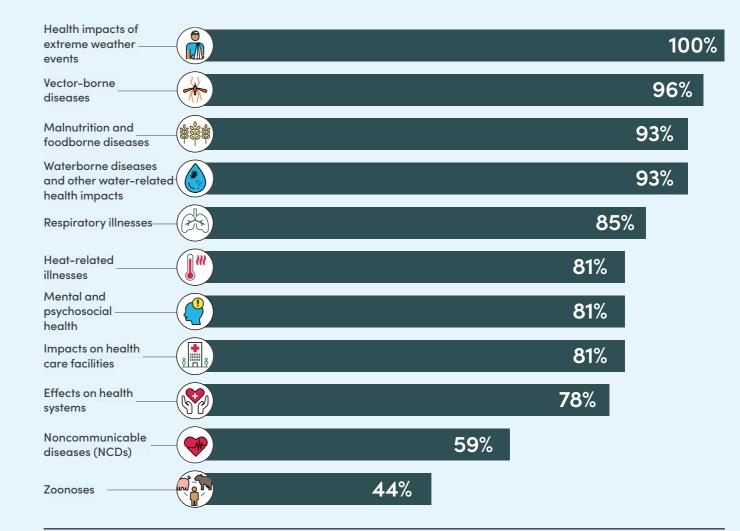
Malaria is the most frequently mentioned vector-borne disease in NAPs and diarrhoeal diseases are the most frequently mentioned water-related health impacts.



HNAPs results

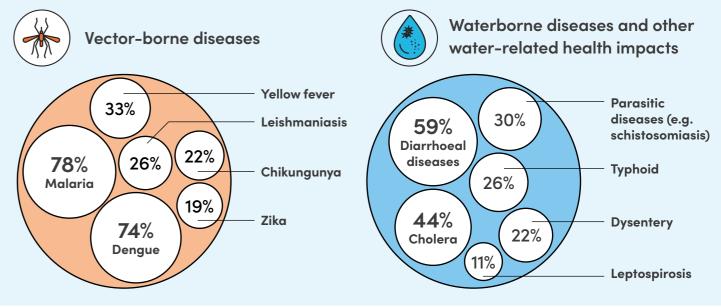
Most commonly identified climate-sensitive health risks in HNAPs

Health impacts of extreme weather events and vector-borne diseases are the most frequently mentioned, while NCDs and zoonoses are the least frequently mentioned.



Percentage of HNAPs that mention vector-borne and waterborne diseases

Malaria is the most frequently mentioned vector-borne disease in HNAPs, and diarrhoeal diseases are the most frequently mentioned water-related health impacts.

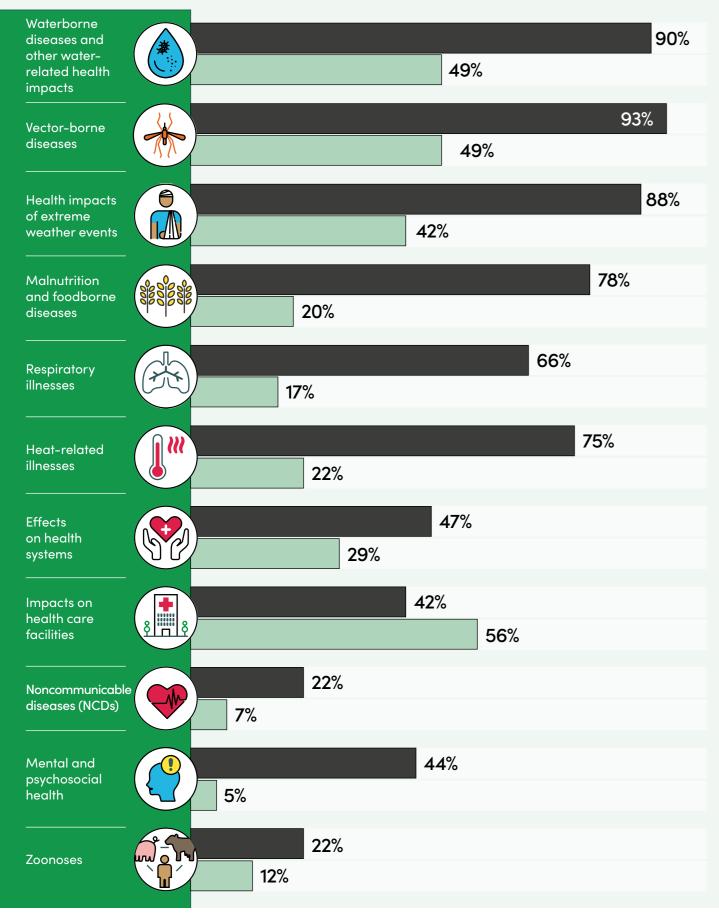


NAPs results

Gaps between health risks identified and the inclusion of specific actions to address them

% of NAPs that mention this climate-sensitive health risk

% of NAPs with at least one adaptation action specifically targeted at this climate-sensitive health risk

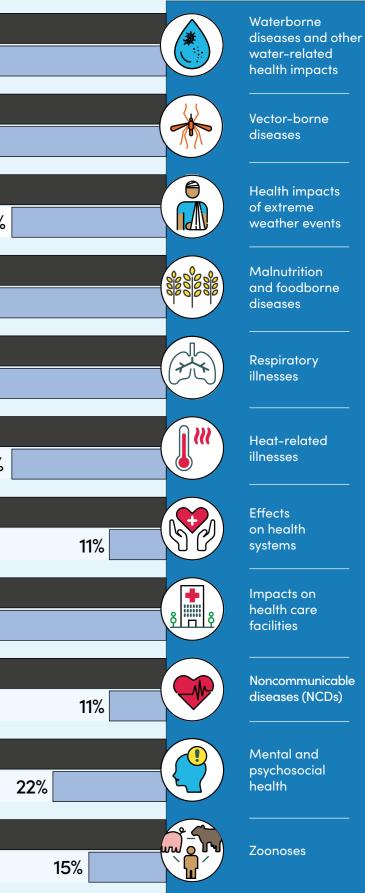


HNAPs results

actions to address them % of HNAPs that mention this climate-sensitive health risk 93% 56% 96% 59% 100% 30% 93% 52% 85% 48% 81% 30% 78% 81% 41% 59% 81% 44%

Gaps between health risks identified and the inclusion of specific

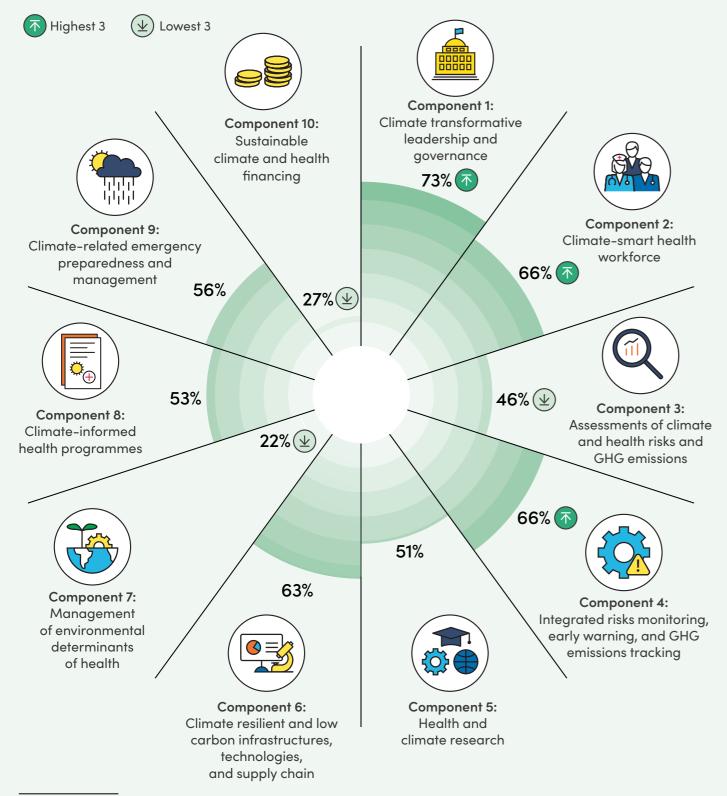
% of HNAPs with at least one adaptation action specifically targeted at this climate-sensitive health risk



NAPs results

The WHO operational framework for building climate resilient and low carbon health systems outlines 10 components for action to comprehensively strengthen climate resilience and reduce greenhouse gas emissions in health systems³.

Percentage of NAPs that include adaptation actions aligned with the 10 components for building climate resilient and low carbon health systems

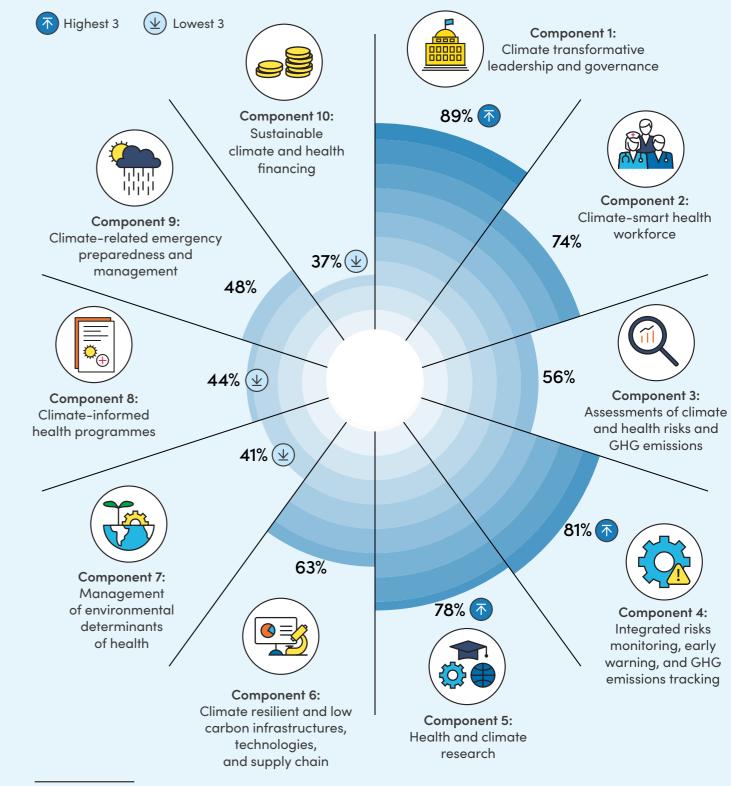


3 World Health Organization Operational framework for building climate resilient and low carbon health systems. Geneva: World Health Organization; 2023 (https://iris.who.int/bitstream/handle/10665/373837/9789240081888-eng. pdf?sequence=1, accessed 2 February 2025). Licence: CC BY-NC-SA 3.0 IGO.

HNAPs results

HNAPs demonstrate a more comprehensive coverage of actions across the 10 components of the operational framework than NAPs.

Percentage of HNAPs that include adaptation actions aligned with the 10 components for building climate resilient and low carbon health systems

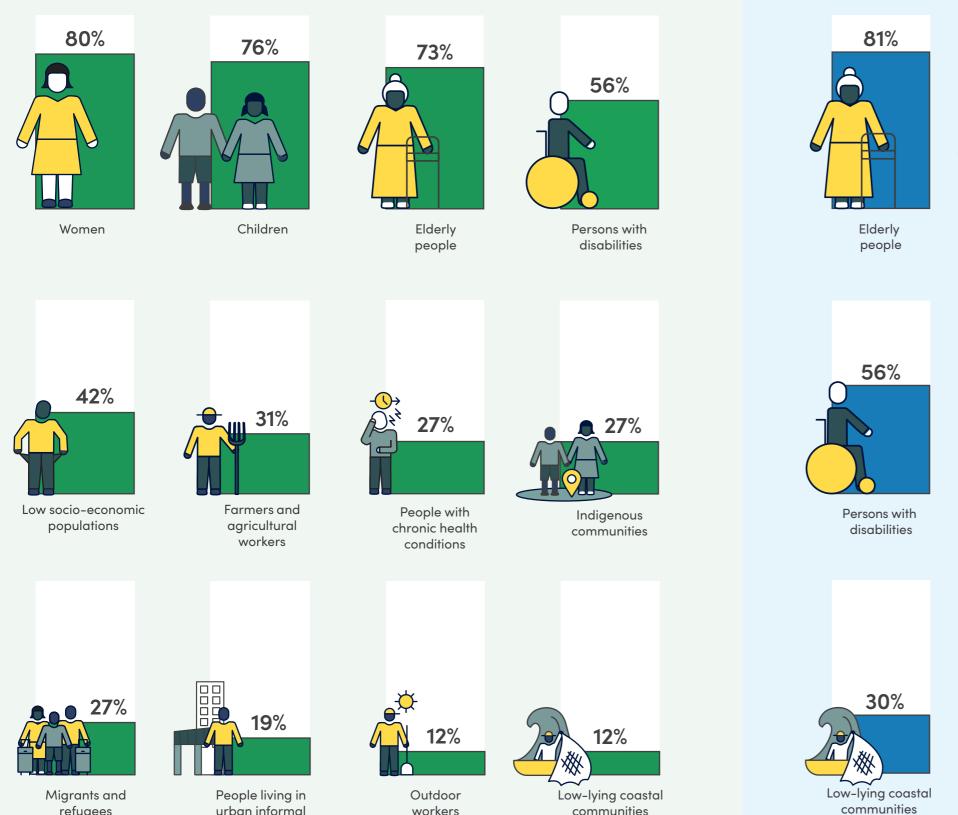


4 World Health Organization Operational framework for building climate resilient and low carbon health systems. Geneva: World Health Organization; 2023 (https://iris.who.int/bitstream/handle/10665/373837/9789240081888-eng pdf?sequence=1, accessed 2 February 2025). Licence: CC BY-NC-SA 3.0 IGO.

Most commonly mentioned most-at-risk populations highlighted in NAPs

Women, children and elderly people are frequently mentioned in NAPs as most-at-risk population groups. Other commonly identified groups include those people with existing chronic health conditions, low socio-economic populations, persons with disabilities, and low-lying coastal communities, amongst others.

Percentage of NAPs mentioning these most-at-risk groups:



workers

communities

urban informal

settlements



10

Most commonly mentioned most-at-risk populations highlighted in HNAPs

HNAPs results

Elderly people, children and low socio-economic populations are frequently mentioned in HNAPs as most-at-risk population groups. Other commonly identified groups include people with existing chronic health conditions, persons with disabilities and low-lying coastal communities.

Percentage of HNAPs mentioning these most-at-risk groups:

78%

Children

Women

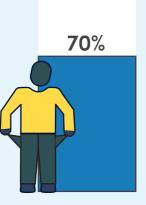
26%

People living in

urban informal

settlements

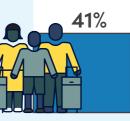
44%



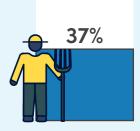
Low socio-economic populations



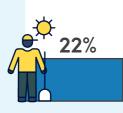
People with chronic health conditions



Migrants and refugees



Farmers and agricultural workers



Outdoor workers



Indigenous communities

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Suggested citation. Health at the heart of national adaptation planning. A global review of national adaptation plans and health national adaptation plans: executive summary. Geneva: World Health Organization; 2025. https://doi.org/10.2471/B09395

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