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From Commitment to Action: Africa's Climate and Health Playbook for COP30

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Development of the Playbook

This Playbook was co-created through a two-part Digital Dialogue Series convened by Amref Health Africa in October 2025 under the theme 'Momentum to Movement: Uniting for Climate and Health Action in Africa Towards COP30'. Over 50 participants—including the Africa Group of Negotiators (AGN), Ministries of Health, Environment and Finance, WHO-AFRO, Africa CDC, civil-society, youth, and academic representative.

This Playbook aligns Africa's climate-health agenda with the Belém Health Action Plan (BHAP) pillars:

- P1 – Surveillance & Early Warning: climate-informed, integrated, real-time health intelligence.
- P2 – Policy & Capacity: coherent governance and trained, equity-centred workforce.
- P3 – Innovation & Resilient Systems: low-carbon, climate-resilient health systems and technologies.

The Playbook translates this shared vision into a practical guide linking advocacy, negotiation, and implementation across the continent.

How to Use This Playbook

This is a living reference tool—not a policy paper.

- **Negotiators:** embed health in UNFCCC streams (Adaptation/GGA, Finance, L&D, Mitigation).
- **Policymakers:** integrate health into NDCs, NAPs, and HNAPs.
- **Partners & Donors:** align funding and technical support with BHAP priorities.
- **Civil Society & Academia:** use the shared evidence base for advocacy and accountability.

Each section converts BHAP pillars and Dialogue outcomes into actionable recommendations and COP 30 entry points.



Background & Context

Why Health in Climate: Africa's Imperative

Africa stands on the frontline of the climate crisis, where environmental shocks translate directly into worsening health outcomes and deepening inequities. Rising temperatures, droughts, floods, and shifting disease patterns threaten decades of progress in public health and development.

- Over half (56%) of Africa's public-health emergencies in the past two decades were climate-linked, with women, children, and low-income communities disproportionately affected.
- Seven of the ten most climate-vulnerable countries are in Africa, despite contributing less than 4 percent of global emissions.
- IPCC AR6 (2022) highlights that without strong adaptation, climate-related mortality in Africa could rise sharply from heat stress, vector-borne diseases, food insecurity, and mental-health impacts.

Yet, health remains peripheral in major climate processes—particularly in adaptation, finance, and data systems. The Africa Climate Summit II (ACS2) in 2025 was a turning point: for the first time, health was recognized as integral to the continent's climate agenda, but commitments still lack operational detail and measurable indicators.

This Playbook responds to that gap. It translates political recognition into practical steps for negotiators, governments, civil society, and partners to embed health within Africa's climate action, aligned with the Belém Health Action Plan (BHAP) and continental frameworks of the WHO Regional Office for Africa and Africa CDC.

1.1. Brief Overview: ACS2 and BHAP — How They Connect

ACS2 Outcomes (2025)

The Second Africa Climate Summit (ACS2) positioned health as a central pillar of Africa's climate agenda. The Declaration acknowledged the intertwined crises of climate change and public health and called for:

- Climate-resilient health systems, anchored in primary healthcare;
- Dedicated financing for climate–health priorities, particularly for adaptation and early warning;
- Integration of health in NDCs, NAPs, and GGA indicators;
- African-led data and evidence systems;
- Enhanced partnerships with WHO, Africa CDC, and other continental bodies.

However, implementation pathways and monitoring mechanisms were left open—creating a gap that the Belém Health Action Plan (BHAP) now addresses.

How ACS2 and BHAP Align

Dimension	ACS2 Declaration (Continental Political Mandate)	Belém Health Action Plan (Global Technical Framework)
Vision	"Health is climate action" — calls for African leadership and investment in climate-resilient health systems.	Operationalizes health as a cross-cutting theme in climate policy and finance, under WHO/ATACH coordination.
Core Pillars / Priorities	Climate-resilient systems, early warning, finance, data, and capacity.	3 Action Lines: (1) Surveillance & Monitoring, (2) Evidence-based policy & capacity, (3) Innovation & resilient systems.
Accountability & Monitoring	Political declaration—no defined reporting framework.	Defines indicators, monitoring cycle (toward COP31), and ATACH coordination for progress tracking.
Finance & Resources	Calls for new, non-debt-inducing climate finance for health adaptation.	Links to COP30 finance negotiations and global GGA indicators; promotes health-specific metrics.
Stakeholders	Heads of State, Ministries, continental institutions (Africa CDC, WHO-AFRO).	Global health and climate community; Parties to UNFCCC.

In essence:

ACS2 sets the "why and what" — Africa's political will to put health at the centre of climate action.
BHAP defines the "how" — the operational mechanisms, indicators, and technical guidance to realize that ambition. The Playbook serves as the bridge between the two, helping countries move from commitment to implementation ahead of COP30.

1.2. Why Health Matters for Africa's Climate Agenda

Africa faces a dual challenge: it bears the greatest health burden from climate impacts while contributing the least to the crisis. Climate hazards—heat stress, floods, droughts, vector-borne diseases, food insecurity, and air pollution—are compounding already fragile health systems and undermining decades of development progress.

The consequences are visible across all dimensions of life and economy. Health is no longer just a casualty of climate inaction—it is a decisive driver of ambition, uniting adaptation, mitigation, and finance goals.

Theme	Indicator / Impact	Key Statistic	Implication for Africa
Health Burden	**Climate-linked health emergencies**	56% of Africa's public-health emergencies in the past two decades were climate-related	Drought, floods, and vector-borne outbreaks repeatedly strain fragile systems
	Climate-sensitive disease burden	~39.5 million deaths and 1.53 billion DALYs in 2019 from climate-sensitive conditions (heat, infections, malnutrition, mental health)	Demonstrates scale of climate-linked morbidity and mortality
	Projected heat-related deaths	Up to 5× increase by 2100 under high-emission scenarios	Extreme heat already drives mortality in Sahel, Horn, and urban belts
Inequity & Exposure	**Emissions vs. vulnerability**	Africa < 4% of global emissions yet 7 of 10 most climate-vulnerable countries	Reinforces moral and political case for climate justice
	Universal Health Coverage stagnation	> 50% of countries report stagnating or worsening UHC since 2015	Limited adaptive capacity of national systems undermines resilience
Economic Loss & Finance Gap	**Cost of inaction**	Air-pollution deaths = US $ 4.95 trillion (2021); heat-related labour losses = US $ 835 billion (2023)	Growing productivity losses threaten economic growth and health budgets
	Climate-health financing gap	Only US $ 321 million pledged to Loss & Damage Fund (< 0.1 % of annual needs); fossil-fuel subsidies = US $ 1.3 trillion + US $ 5.7 trillion implicit costs	Massive misalignment between harm and resources; opportunity for reallocation

Context and Call to Action

Africa's reality underscores an inequity: those least responsible for emissions face the gravest health impacts. Climate change amplifies existing social determinants—poverty, gender inequity, weak governance, and limited infrastructure—making health both a barometer of climate risk and a measure of climate justice.

Integrating health into the Global Goal on Adaptation (GGA), NDCs, and NAPs is essential. Redirecting even a fraction of global fossil-fuel subsidies could finance comprehensive, non-debt-inducing climate and health programmes across Africa.

Framing principle: *Protecting health is the ultimate purpose of climate action — climate security is human security.*

Key Insights: Climate and Health Priorities for Africa

The following priorities emerged from the Africa Climate Summit II (ACS2) and the Africa Climate & Health Digital Dialogues. Each aligns with the Belém Health Action Plan (BHAP) pillars and reflects Africa's equity-driven climate agenda. At COP30, these priorities define Africa's negotiation and advocacy roadmap — turning political recognition into measurable, financed, and monitored outcomes.

2.1. Climate-Informed Surveillance and Early Warning (BHAP Pillar 1)

What to strengthen

- Expand integrated epidemic-intelligence systems linking weather, environmental, and health data.[1] [2]
- Invest in real-time digital surveillance and forecasting tools (AI-enabled decision support). [1] [2] [3]
- Strengthen cross-border early-warning and epidemic-preparedness systems for climate-sensitive threats (cholera, malaria, heat stress). [1] [2]

At COP30 (Belém), Africa should push to:

- Secure recognition of health surveillance systems as part of the *GGA's human-systems indicators* and the Means of Implementation (MoI). [1] [4]
- Mandate alignment of national meteorological, health, and disaster-risk data platforms, supported through ATACH and the WHO-AFRO/Africa CDC frameworks. [1] [2] [4]
- Establish a technical support mechanism for climate-informed health intelligence and interoperable early-warning systems across regions. [1] [4]

Intended outcome:

Health surveillance becomes a measurable component of adaptation progress under the GGA, with Africa leading the data and coordination architecture.

2.2. Policy Coherence and Whole-of-Government Action (BHAP Pillar 2)

What to strengthen

- Legislate coordination platforms linking health, environment, finance, and disaster-management ministries. [1] [2]

[1] Belem Health Action Plan (BHAP)
[2] Amref CxH Digital Dialogue
[3] Health in the UNFCCC Negotiations: Considerations for COP30
[4] UAE–Belém Work Programme on the Global Goal on Adaptation (GGA)

- Embed climate-health priorities in Nationally Determined Contributions (NDCs) and National Adaptation Plans (NAPs), including the implementation and/or development of Health-NAPs (HNAPs) to capture health-specific adaptation goals. [1 2 5]
- Build negotiation and policy capacity for health ministries and sub-national governments to participate in regional and global climate processes. [1 2 4]

At COP30 (Belém), Africa should push to:

- Secure decision text under the GGA work programme calling for integration of health across all national adaptation-reporting frameworks (NAPs, NDCs, and GGA indicators). [1 4]
- Endorse inter-ministerial governance as a required adaptation enabler, linking climate, health, and finance policy. [1 4]
- Ensure Africa's coordination models (e.g., Africa CDC, WHO-AFRO, joint task forces) are formally referenced as templates for continental reporting and cooperation. [1 2 5]

Intended outcome:

Institutionalised multi-sectoral governance — health becomes a standard indicator of adaptation performance and policy coherence.



2.3. Capacity Strengthening and Knowledge Systems

What to strengthen

- Climate-proof health facilities (energy, water, infrastructure, pharmaceutical supply chains). [1 5]
- Develop a standardised Africa-wide climate and health curriculum. [1 2 5]
- Prioritise community-health-worker training and local systems strengthening as the first line of response. [2 5]

At COP30 (Belém), Africa should push to:

- Advocate for a "Climate and Health Capacity Compact for Africa" — a donor-backed initiative to finance workforce training, data integration, and PHC facility resilience. [1 2 3 4]
- Ensure health-system capacity and climate-resilient PHC are recognised in the GGA's Means of Implementation pillar. [1 3 4 5]
- Establish a technical-support facility (under ATACH) for workforce readiness, infrastructure audits, and capacity tracking across African countries. [1 2 6]

Intended outcome:

Global recognition — and resourcing — of Africa's leadership in building climate-resilient PHC and health-workforce capacity.

[5] WHO Framework on Climate Change and Health (2023)
[6] Africa CDC Framework on Climate and Health

2.4. Financing for Health-Centred Adaptation (Cross-pillar) What to strengthen

- Create grant-based, predictable climate-health financing windows, in line with the UNFCCC obligation for developed countries to provide financial, technological, and capacity support to developing nations. [1 3 4]
- Blend public, private, and global-climate funds with clear pro-equity safeguards. [1 2 4]
- Decentralise access — directing funds to sub-national and community-level actors. [1 2]

At COP30 (Belém), Africa should push to:

- Establish dedicated health windows within existing financing mechanisms such as Adaptation Fund, and Loss and Damage Fund. [1 3 4]
- Secure decision text affirming that health adaptation finance must be *new, additional, predictable, and non-debt-inducing*. [1 3 4]
- Integrate health-related indicators into the finance and transparency frameworks of the UNFCCC, linking investments to measurable health outcomes. [1 2 3 4]
- Advocate for redirecting a fraction of fossil-fuel subsidies towards health-centred adaptation programmes. [1 3 4]

Intended outcome:

Scaled, predictable, and accountable financing for climate-health action across Africa, grounded in equity and public-sector leadership.

2.5. Data Equity, Research, and Accountability (BHAP Pillars 1 & 2)

What to strengthen

- Establish shared data-governance frameworks and multi-sector data platforms, particularly across health-determining sectors (agriculture, water, energy, infrastructure). [1 2 3]
- Build regional modelling and analytics capacity to generate Africa-specific climate–health evidence. [1 2 3]
- Track climate–health investments and outcomes transparently across national and regional levels. [1 2]

At COP30 (Belém), Africa should push to:

- Ensure the review and adoption of the GGA Climate–Health indicators, reflecting African contexts and measuring adaptation progress across outcomes, system resilience, and preparedness. [1 3 4]
- Anchor the adopted indicators within the global adaptation monitoring and transparency framework, linking them to Means of Implementation. [1 2 6]
- Establish Africa-led regional data hubs (WHO-AFRO, Africa CDC) to coordinate reporting and peer learning. [1 3 4]

Intended Outcome:

Formal adoption of the GGA Climate–Health indicators at COP30, positioning Africa at the forefront of global adaptation accountability.

Mapping Dialogue Insights to BHAP Pillars and COP30 Entry Points

Priority Area	BHAP Linkage	COP30 Negotiation Focus	Intended Outcome
2.1 Climate-Informed Surveillance & Early Warning	**Pillar 1 – Surveillance & Monitoring**	Recognition of health-surveillance systems under the GGA human-systems indicators and Means of Implementation; alignment of meteorological, health, and disaster-risk data platforms via ATACH and regional frameworks	Health surveillance becomes a measurable component of global adaptation progress, with Africa leading the data and coordination architecture
2.2 Policy Coherence & Whole-of-Government Action	**Pillar 2 – Policy, Capacity & Equity**	COP30 decision text to mandate integration of health across NAPs, NDCs and GGA indicators; endorsement of inter-ministerial governance linking climate, health and finance policies	Institutionalised multi-sectoral governance — health recognised as a core indicator of adaptation performance and policy coherence
2.3 Capacity Strengthening & Knowledge Systems	**Pillar 3 – Innovation & Systems**	Launch of a Climate and Health Capacity Compact for Africa; recognition of climate-resilient PHC under the GGA Means of Implementation; establishment of a technical-support facility under ATACH	Global recognition and financing of Africa's leadership in building a climate-resilient PHC workforce and infrastructure
2.4 Financing for Health-Centred Adaptation	**Cross-pillar**	Creation of dedicated health windows within the Adaptation Fund and Loss & Damage Fund; adoption of non-debt-inducing finance principles; integration of health metrics into UNFCCC finance and transparency frameworks	Scaled, predictable, and accountable financing for climate-health action across Africa
2.5 Data Equity, Research & Accountability	**Pillars 1 & 2 – Monitoring & Policy**	Review and adoption of the GGA Climate–Health indicators; establishment of Africa-led regional data hubs to coordinate reporting and peer learning; anchoring health within the global adaptation monitoring framework	Formal adoption of GGA Climate–Health indicators at COP30, with Africa positioned as the leader in global adaptation accountability

Key Message:

These five priorities translate Africa's technical strengths and political will into actionable negotiation outcomes for COP30. They connect the ACS2 Declaration, BHAP pillars, and the GGA framework—ensuring that, in Belém, health moves from reference to measurement, financing, and implementation.

Synergies Across Sectors — Whole-of-Society Climate Adaptation and Resilience

Climate change impacts health through many channels that go beyond the traditional health sector— health outcomes depend on food systems, water access, mobility, governance, and energy systems. Therefore, a multisectoral approach is imperative to support collaboration and avoid duplication, optimising resource use, strengthening programme effectiveness, and allowing for a more comprehensive and holistic response to the complex and interconnected challenges of climate change and health.

Sector / Theme	Contribution to Health Adaptation & Resilience	BHAP Pillar Link
Agriculture & Food	Ensures food and nutrition security; strengthens zoonotic-disease prevention through One Health approaches	Surveillance (P1), Innovation (P3)
Water & WASH	Reduces diarrhoeal and vector-borne diseases (cholera, malaria, dengue, AMR) through safe water and sanitation infrastructure	Policy & Systems (P2), Resilience (P3)
Energy	Expands clean-energy access for health facilities and cold-chain logistics; reduces air-pollution-related morbidity	Innovation & Resilience (P3)
Urban Planning & Transport	Mitigates heat stress, improves air quality, and supports healthy mobility and emergency access	Surveillance (P1), Policy (P2)
Finance & Planning	Integrates health into national budgeting, insurance, and economic-shock protection; enables climate-smart investment	Governance (P2), Investment (P3)
Cross-Cutting UNFCCC Themes — Adaptation, Mitigation, Finance & Technology	Embeds health across all negotiation pillars: adaptation outcomes (resilient systems), mitigation co-benefits (reduced emissions and pollution), finance (dedicated health windows), and technology (innovation and local manufacturing)	All BHAP Pillars (P1–P3)

Co-benefit principle: Investments that reduce emissions and strengthen public health deliver the highest value for African development.

Core message: Health is both a beneficiary and driver of climate action. Integrating health into adaptation, mitigation, finance, and technology tracks ensures that every outcome under the Belém Health Action Plan contributes to measurable improvements in population resilience, system sustainability, and global equity.

Stakeholder-Specific Guidance

Achieving Africa's vision for health-centred climate adaptation requires coordinated engagement across government, civil society, and global partners. The following table summarises each actor's role in implementing the Belém Health Action Plan (BHAP), its link to COP 30, and expected contributions across levels of engagement.

Actor	Role in BHAP Delivery	Engagement Level	Contribution to COP 30 and Beyond
Africa Group of Negotiators (AGN)	Lead Africa's unified position on climate–health integration within the UNFCCC process	Continental + Global	Advocate for adoption of GGA climate-health indicators and establishment of dedicated health finance windows [1 2 3]
Ministries of Health	Anchor Health-NAPs (HNAPs), align BHAP priorities with national adaptation plans and budgets	National + Regional	Provide evidence and policy leadership; ensure climate-resilient PHC and workforce integration [1 2]
Civil Society and Youth Networks	Drive community accountability and equity-based adaptation advocacy	Local to Global	Amplify citizen voices, monitor climate-health finance flows, and ensure inclusive representation [2 3]
Academia and Think Tanks	Generate evidence, modelling, and policy analysis for health-adaptation planning	National + Continental	Produce Africa-specific data and tools informing negotiations and implementation [1 2 5]
Africa CDC / African Union / WHO-AFRO / PPCH	Coordinate continental frameworks and monitor implementation of BHAP and GGA	Continental	Facilitate peer learning, align frameworks, and publish annual progress reports [1 4]
Multilaterals and Donors	Provide finance, capacity development, and technology transfer	Global	Ensure non-debt, predictable funding for health adaptation; support technology and systems innovation [1 3 5 6]

Next Steps and Follow-Up

This Playbook adds to existing multi-stakeholder efforts and engagements that Amref has been leading at continental (AGN and African Ministerial Conference on the Environment—AMCEN) levels that have led to inclusion of climate and health priorities in continental policy documents such as AMCEN and AU declarations including the ACS2, common negotiating positions, and nomination of Amref to lead the mobilization of health and climate change experts across the continent for the Intergovernmental Panel on Climate Change (IPCC) 7th Assessment cycle reporting processes.

To sustain momentum, the following are needed:

- **Continental Coordination**
  - Maintain PPCH, Amref, and Africa CDC and WHO-Afro convenings
  - Formalize AGN Health Sub-Group and support
- **Accountability and Monitoring**
  - Develop annual Africa Climate & Health Scorecard
  - Develop and adopt HNAP and financing tracker
  - Organize regular ministerial and technical roundtables
- **Living Tools to Develop**
  - Policy brief series and negotiator cards
  - Digital dashboard tracking health in climate finance
  - Repository of Africa climate-health innovations

Conclusion

This Playbook complements the Belém Health Action Plan by contextualizing global priorities into African realities — grounding ambition in equity, resilience, and shared responsibility.