

## **PS 3.6**

### **MULTI-SECTORAL POLICIES AND PRACTICES: ADAPTATION**

## | BACKGROUND

Adaptation action advances climate-resilient communities, ecosystems, and economies, with particular focus on vulnerable populations – the poor, women, and indigenous peoples. These groups are often the most vulnerable to climate change and are at greater health risk of its impacts. A single shock (e.g. a storm) or slow onset impact (such as sea level rise) can exacerbate existing vulnerabilities and increase the likelihood of locking communities already at risk into cycles of poverty. Support to countries to respond to the ongoing impacts of climate change and to prepare for likely impacts, including uncertainty, in the future, is imperative.

Climate change puts the healthcare system at risk by threatening infrastructure through extreme weather and in meeting the growing demand for treating climate-induced illness. The integration of climate risks and health into national planning and budgeting processes and strategies through Health National Adaptation Plans (H-NAPs), Vulnerability and Adaptation Assessments (V&A's), and National Adaptation Programmes of Action (NAPAs) is also a way of drawing attention to the issue. This enables countries to align their adaptation planning processes with their national development plans and other existing planning efforts while ensuring whole-of-society and multi-stakeholder engagement with key institutions, academia, civil society, NGOs, and the private sector.

## | OBJECTIVES

The objective of this session is to share examples and ideas for multisectoral practices and policies to improve understanding of and action on climate change adaptation and health across regions and to discuss challenges and opportunities. We will focus on strategies and interventions to promote health and adapt healthcare systems for climate change conditions through policy reform, innovation and modeling, national adaptation plans, and early warning detection systems. Through support to countries on adaptation policy and programming, the intention is to leverage and catalyze financing – domestic public finance and private finance – to scale up adaptation action in the context of supporting health.



Chair / Chair

## Douglas Webb

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Douglas Webb is a social scientist with UNDP, as a Manager in the HIV and Health Group in UNDP New York. He was UNDP's Senior Response Coordinator for COVID-19 (March-May 2020). In 2014-2015 he was seconded to be a Deputy Director in the UN Mission for the Ebola Emergency Response (UNMEER) in West Africa. In UNDP his work focuses on the health and environment nexus, infectious and chronic epidemic response governance and the social determinants of health. From 2008-2011 he was with UNICEF in Ethiopia managing UNICEF's child focused social protection, HIV prevention and AIDS impact mitigation. He was the Chief of the Children and AIDS Section in the UNICEF Regional Office in Kenya (2004-8) and focused on HIV impact mitigation in UNICEF Zambia (1995-7). He served as Global HIV/AIDS Adviser for Save the Children UK (2000-4) in London. His doctoral thesis examined the social epidemiology of HIV and AIDS in Southern Africa (University of London, 1995). He has over 50 published articles and book chapters and is the author of HIV and AIDS in Africa and co-editor of Social Protection for Africa's Children. He is an adjunct professor at the School of Global Public Health at New York University.