

## WHO submission on the Global Goal on Adaptation

The World Health Organization emphasizes that the protection of human health and wellbeing must be at the centre of the Global Goal on Adaptation efforts. It is therefore imperative to include metrics on health adaptation and resilience within the health sector (including by scaling up investments in climate-resilient health systems) and health-relevant sectors (including the water and sanitation, agriculture, and transport sectors). In addition, since healthy populations are more able to recover from climate shocks and stresses, the incorporation of public health metrics for measuring progress on adaptation is highly relevant.

This submission builds on previous relevant submissions and specifically:

1. Health Community Submission on the UAE – Belém work programme on indicators for measuring progress achieved towards the targets of the framework and modalities including organization of work, timelines, inputs, outputs, and involvement of stakeholders: <https://www4.unfccc.int/sites/submissionsstaging/Pages/Home.aspx>
2. UN Joint co-submission on the UAE-Belem Work programme on indicators for the UAE framework for Global Climate Resilience: <http://www4.unfccc.int/sites/SubmissionPortal>

With emphasis on paragraph “(c) *Attaining resilience against climate change related health impacts, promoting climate-resilient health services, and significantly reducing climate-related morbidity and mortality, particularly in the most vulnerable communities:*” of Paragraphs 9–10 of decision 2/CMA.5, the specific indicators aim to: support and urge Parties to promptly and substantially enhance healthcare system resilience, guided by vulnerability and adaptation assessments; Emphasize the need to preempt and safeguard populations vulnerable to climate change, urging deeper integration of health in adaptation efforts; Prioritize the health sector in climate action, allocating resources for capacity building, research, and infrastructure development; Advocate for adaptation measures and early warning systems; Encourage international cooperation and technology transfer for healthcare resilience; Call for funding and support for research on local health impacts and the integration of climate-resilient infrastructure.

Indicators should be *Evidence-based*, by adopting an evidence-based approach guided by the best available science and the worldviews and values of Indigenous Peoples, in alignment with paragraph 8 of FCCC/PA/CMA/2023/L.18. Transdisciplinary research that draws on knowledge from across various disciplines and engages affected communities ensures the relevance of indicators to local settings and across sectors. Indicators should reflect priorities identified in national vulnerability assessments. Additionally, there is evidence of successful climate change adaptation in health systems being generated at the local level by Indigenous Peoples that is not traditionally recognized as science. It is crucial to incorporate this evidence to track progress on climate change adaptation in health systems effectively.

Some indicators should be *Regionally Representative and Globally Relevant*: While it is not essential that all indicators are monitored by all parties, as climate-induced threats to health vary significantly between countries and regions, indicators should track issues that are relevant to a substantial number of countries within all Regions. This approach ensures that reporting coverage is sufficient for regional trends to be identified and addressed, recognizing distinct national circumstances. Indicators should reflect common challenges faced by countries (e.g. vector-borne diseases, water scarcity, and food insecurity in African nations) while also capturing specific regional variations. By ensuring geographical representativeness, regional indicators can provide a comprehensive

understanding of climate and health impacts, facilitate coordinated responses, and guide effective policy-making and resource allocation.

This submission was prepared in response to two tasks in UNFCCC/SB/2024/L.6:

1. Information on existing indicators for measuring progress towards the targets referred to in paragraphs 9–10 of decision 2/CMA.5 in use at the local, national, regional and global level, including, if available, information on associated methodologies and data readiness for such indicators, as well as identified gaps and areas for which the development of new indicators may be needed;
2. A compilation and mapping of existing indicators relevant to measuring progress towards the targets referred to in paragraphs 9–10 of decision 2/CMA.5, including information on areas potentially not covered by existing indicators

### **Global Goal on Adaptation (GGA) Targets and Indicators**

**Para. 9 – 2/CMA.5** Urges Parties and *invites* non-Party stakeholders to pursue the objectives outlined in paragraph 8 above and to increase ambition and enhance adaptation action and support, in order to accelerate swift action at scale and at all levels, from local to global, in alignment with other global frameworks, towards the achievement of, inter alia, the following targets by 2030 and progressively beyond.

**Target (a)** Significantly reducing climate-induced water scarcity and enhancing climate resilience to water-related hazards towards a climate-resilient water supply, climate-resilient sanitation and access to safe and affordable potable water for all

#### **WHO indicators work:**

The link between climate change, water, sanitation, hygiene (WASH) and health is vital. WASH services enhance health resilience against climate challenges, aiding communities in recovery from extreme events, adapting to long-term changes and promoting WASH-related mitigation. WASH infrastructure and behaviours are at risk from floods that harm infrastructure, droughts reducing water supply, rising temperatures influencing water usage and disease vectors.

#### *Indicators:*

WHO is a custodian for the Sustainable Development Goal (SDG) indicators on monitoring of WASH services (targets 6.1, 6.2 and 6.3) and the WASH Means of Implementation (targets 6.a. and 6.b). WHO and partners regularly compile national data and collect primary data on WASH services and key elements of WASH systems including policy frameworks, institutional arrangements, monitoring systems, regulation, human resources and finance.

A) The UN-Water Global Analysis and Assessment of Sanitation and Drinking-Water (GLAAS), responsible for global monitoring of SDG targets 6.a and 6.b, collects data through a government-led country survey every two to three years which includes several climate-relevant indicators, such as whether climate risk assessments have been made which could

inform WASH planning, and the extent to which current sector plans (including but not limited to WASH plans) consider climate resilience.

The GLAAS 2022 report compiled national responses from over 100 countries. The GLAAS 2024/2025 data collection is underway, with responses expected by October 2024. Measures in the GLAAS 2024/2025 country survey related to climate-resilient water and sanitation include:

- A4. Are climate risk assessments undertaken for national WASH planning?
  - a) If yes, which year did the most recent climate risk assessment for WASH take place
  - b) Please describe the climate risk assessment
  - c) Please describe how the climate risk assessment has been used in national planning
  - d) Please describe the specific climate risks that were considered in the assessment.
- A6. Content of WASH policies and plans/strategies (disaggregated by sub sector: urban sanitation, rural sanitation, urban water, rural water, WASH in schools, WASH in HCFs, other)
  - a) Risk of climate variability and climate change to WASH services
  - b) Climate resilience of WASH technologies and management systems (e.g. adaptation)
  - c) Climate change mitigation
- A7. Is WASH addressed in other sector policies/plans (including Climate (e.g. NAP and NDCs))
  - a) If yes, does the policy address WASH?
  - b) How is WASH addressed in the policy/plan
- A9II. To what extent are there measures to improve and extend services to the following populations in national WASH policies and plans
  - a) Populations disproportionately affected by climate change (disaggregated by water, sanitation and hygiene and providing level or implementation)
- B1. Is the lead ministry responsible for climate resilience involved in Joint Sector Reviews (JSR)?
- B1. Is climate resilience covered in JSR?
- B4. To what extent have indicators been set and used to monitor climate resilient WASH (disaggregated by sub sector: urban sanitation, rural sanitation, urban water, rural water, WASH in schools, WASH in HCFs, other; and providing level of adoption)
- B4. Is there a definition of climate resilient WASH?
- B4. Please share any best practices and lessons learned from monitoring climate resilient WASH
- B7II. Tracking progress among vulnerable groups (including information on population disproportionately affected by climate change, disaggregated by water, sanitation and hygiene)
- D4II. Equity of vulnerable populations (including information on population disproportionately affected by climate change, disaggregated by water, sanitation and hygiene; and level of implementation)
- D8. Has the national government received climate finance for WASH activities.
  - a) If yes, has the government applied for climate finance for WASH activities from an external source (e.g. GCF, AF, etc)
  - b) If yes, was the application for climate finance for WASH successful
  - c) If yes, total amount, currently, time period, source

- d) If climate finance for WASH has been received, please provide details on the WASH programmes/activities funded by the climate finance.
- e) If climate finance for WASH has not been received from an external source, please describe the main challenges and barriers to accessing these funds
- f) If the national government has mobilized domestic resources for climate resilient WASH, please describe (i.e. the amount, what activities were funded, how the resources were mobilized, etc).

B) The WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP), responsible for global monitoring of SDG targets 6.1 and 6.2, maintains a database of over 8000 national data sources with pertinent statistics on WASH services, some of which also describe climate resilience. The JMP's 2023 report presents data on 'the proportion of the population using safely managed drinking water services' for 142 countries, representing 51% of the global population. The report also presents global and regional aggregates and time series (including for six SDG regions, and other regional groupings such as Small Island Developing States). Safely managed drinking water is the global indicator used to track progress towards SDG target 6.1 "By 2030, achieve universal and equitable access to safe and affordable drinking water for all." and as such matches directly part of the GGA target of "access to safe and affordable potable water for all."

C) Together, the JMP and GLAAS provide globally comparable time series data to track overall progress and trends towards achieving global ambitions for WASH as laid out in the SDG framework. At the same time, they support countries and provide frameworks for national and local monitoring which engages more directly with implementation and policy-making.

The JMP and GLAAS teams are currently implementing a two-year project to review and develop indicators, measures and methods for global monitoring of climate resilience of WASH services (<https://www.who.int/teams/environment-climate-change-and-health/water-sanitation-and-health/monitoring-and-evidence/monitoring-of-climate-resilience>). The review is being conducted in collaboration with the University of Leeds, University of Technology Sydney, University of Bristol and Oxford University. Over the course of 2024, the project will:

- compile and compare different definitions of resilience and related terms; conduct a public call for contributions of indicators, measures and methods currently in use at the local, national, regional and global level;
- establish a framework to organize potential indicators;
- conduct a scoping review about how climate resilience is defined, developed, and assessed within diverse sectors such as in network infrastructure (roads, energy, telecommunications), non-network infrastructure (housing, urban planning and development, coastal infrastructure, cyclone shelter systems, waste management) and systems and service delivery (health systems, education);
- conduct two systematic reviews about attributes that impact climate resilience in water, sanitation and hygiene systems (drawing on both published peer-reviewed literature and grey literature) and
- conduct a third systematic review about tools and methods used to collect data for climate-resilient WASH services; and
- develop a long list of indicators that could potentially be used for global monitoring of climate-resilient WASH services.

In 2025, building on this long list, a short list of recommended priority indicators will be developed for progressive integration into national monitoring systems. At all stages, the project will be guided by a technical working group, with multiple opportunities for public stakeholder engagement.

**D) Indicator activities – Global Monitoring Programme on Health and Climate Change:**

- Review and revise WHO health and climate change global survey for coverage of climate-resilient WASH indicators and consider case study or special focus on WASH in future reports.
- Review and strengthen climate-resilient WASH content in country profiles, particularly through collaboration with GLAAS and JMP programmes and other partners.
- Collect additional data on WASH commitments and monitoring in Nationally Determined Contributions (NDCs) through our health in NDCs assessments or by collaboration with partners conducting WASH related analysis in NDCs. Progressively integrate into The Alliance for Transformative Action on Climate and Health (ATACH) monitoring function in future.
- Ensure the ATACH monitoring function includes relevant data on WASH integration within relevant policies (e.g. HNAP, healthy NDCs) and implementation mechanisms (e.g. climate-resilient and low carbon health systems and facilities).

(See: *Addressing climate change: supplement to the WHO water, sanitation and hygiene strategy 2018-2025*), <https://www.who.int/publications/i/item/9789240071995>

**Target (b)** Attaining climate-resilient food and agricultural production and supply and distribution of food, as well as increasing sustainable and regenerative production and equitable access to adequate food and nutrition for all

**WHO indicators work:**

The Alliance for Transformative Action on Climate and Health (ATACH), through the Climate and Nutrition Working Group, is developing indicators to measure progress. Indicators include:

- Number of NDCs that include nutrition-related actions increased
- Number of climate NAPs that include nutrition-related actions increased
- Number of climate- informed nutrition interventions and programs increased
- Number of nutrition National Nutrition Plans (NNPs) that refer to climate increased
- Number of significant multilateral partnerships in the climate-nutrition area increased and strengthened
- Value of public R&D funding programs that bridge climate and nutrition increased
- Number of countries that have conducted a climate change and health vulnerability assessment (V&A) which included nutrition increased
- Number of references to nutrition science articles in IPCC reports increased
- Global Nutrition Report tracks nutrition- promoting climate adaptation actions
- Number of countries which are promoting climate smart nutritious foods such as neglected underutilized species (NUS) and fortified/biofortified crops and staple foods increased
- Number of country food based dietary guidelines that include climate considerations increased

- Number of countries that factor climate into food procurement decisions for food in public settings (e.g., school meals and school feeding, health and care facilities), as well as safety nets and emergency programmes increased
- Number of healthy diet campaigns that also refer to sustainability, especially for children increased
- Number of countries with food control systems adapted to the increased food safety risks associated with climate change increased
- Value of Green Climate Fund initiatives that include nutrition considerations increased
- Value of World Bank loans that are nutrition AND climate supporting increased
- Value of food impact investing funds that build in climate considerations increased
- Number of companies in World Benchmark Alliance that score well on nutrition AND sustainability increased
- Value of ODA to climate that is linked to nutrition increased

See ATACH ICAN,

[https://www.atachcommunity.com/fileadmin/uploads/atach/Documents/ICAN\\_WG\\_Workplan\\_11.8.23.pdf](https://www.atachcommunity.com/fileadmin/uploads/atach/Documents/ICAN_WG_Workplan_11.8.23.pdf)

In alignment with the World Health Assembly nutrition targets, outcome and impact indicators to measure the nutritional status of vulnerable groups due to inadequate access to nutritious foods include:

- Stunting among children under 5
- Anaemia in women of reproductive age
- Low birth weight
- Wasting in children under 5 years of age
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<https://www.who.int/data/nutrition/tracking-tool>

**Target (c )** Attaining resilience against climate change related health impacts, promoting climate-resilient health services and significantly reducing climate-related morbidity and mortality, particularly in the most vulnerable communities

#### **WHO indicators work:**

In May 2024 the World Health Assembly approved the 14<sup>th</sup> General Programme of Work. One of six strategic objectives is to “respond to climate change, an escalating health threat in the 21st century”. The GPW-14 proposes two outcomes to be monitored: Outcome 1.1. More climate-resilient health systems are addressing health risks and impacts. Outcome 1.2. Lower-carbon health systems and societies are contributing to health and well-being.

WHO is developing indicators for adaptation for the ATACH and for measuring health system resilience. In addition, WHO climate and health country survey collect several indicators at national level in all aspects of climate and health, including adaptation. The current iteration of the survey will be launched later in 2024. Relevant indicators are also available in WHO’s Health and climate country profiles. The above work includes Regional but globally relevant initiatives and frameworks such as the Libreville declaration on health and environment (2008) in Africa through which, all Africa Member States Ministers of Health and Environment have committed themselves to implement certain action points that streamline and boost the health and environment agenda in Africa and fully aligned to health system resilience indicators.

Four [health outcomes](#) are also included as part of the [Sharm el-Sheikh Adaptation Agenda](#), spanning health system resilience, action plans for heat, health surveillance and early warning systems, and financing flows to support resilient health systems. Measurable targets and indicators are currently being defined for these outcomes.

Climate resilience indicators for health systems are under discussion and will be finalized following a workshop planned for October 2024. A sample of indicators being reviewed and based on the WHO operational framework for climate resilient and low carbon health systems is listed below:

<b>Operational Framework components</b>	<b>Indicators on climate resilience for health systems</b>
Component 1 <i>Climate-transformative leadership and governance</i>	<b>Component indicator for resilience</b> Policies and mechanisms for climate change and health established and implemented
	<b>Sub-indicator on objective 1: Governance</b> A climate change and health unit designated by the Ministry of Health
	<b>Sub-indicator on objective 2: Policy development</b> Health component of National Adaptation Plan developed
	<b>Sub-indicator on objective 3: Cross-sectoral collaboration</b> Cross-sectoral coordination established to support climate resilience in the health system
Component 2 <i>Climate-smart health workforce</i>	<b>Component indicator for resilience</b> The Ministry of Health workforce has core competences and full capacity to implement climate resilience measures
	<b>Sub-indicator on objective 1: Health workforce capacity</b> The Ministry of Health workforce has received training on climate change and health in the last two years
	<b>Sub-indicator on objective 2: Organizational capacity development</b> Percentage of the Ministry of Health workforce participating in process of policy formulation on climate change and health
	<b>Sub-indicator on objective 3: Information, awareness, and communication</b> A climate change and health communication plan developed
Component 3 <i>Assessments of climate and health risks and GHG emissions</i>	<b>Component indicator for resilience</b> Climate change and health risks in the health sector assessed
	<b>Sub-indicator on objective 1: Health risks</b> Climate change and health vulnerability and adaptation assessment conducted in the past 5 years
	<b>Sub-indicator on objective 2: GHG emissions</b> (this one is included on the GHG emissions indicator)
	<b>Sub-indicator on objective 3: Progress tracking</b> A progress tracking mechanism for climate and health decision makers to visualize progress of their actions for climate resilience developed
Component 4 <i>Integrated risk monitoring, early warning,</i>	<b>Component indicator for resilience</b> Climate-sensitive health risks and outcomes monitored to inform action
	<b>Sub-indicator on objective 1: Integrated disease surveillance and early warning</b>

<i>and GHG emissions tracking</i>	Climate-informed health early warning system for the prediction of risk of climate-sensitive health outcomes developed
	<b>Sub-indicator on objective 2: Monitoring and progress tracking</b> An integrated climate and health monitoring system for country specific climate-related health risks implemented by health programmes
	<b>Sub-indicator on objective 3: Communication</b> Warnings on climate-related risks communicated to the population in a timely manner
Component 5 <i>Health and climate research</i>	<b>Component indicator for resilience</b> Multidisciplinary research partnerships established to support the development and implementation of a climate change and health research plan
	<b>Sub-indicator on objective 1: Research agenda development and implementation</b> National research plan on climate change and health developed
	<b>Sub-indicator on objective 2: Research capacity</b> Multidisciplinary research networks established to support research capacity development
	<b>Sub-indicator on objective 3: Research into policy</b> Research on climate change and health translated into policies
Component 6 <i>Climate resilient and low carbon infrastructures, technologies, and supply chain</i>	<b>Component indicator for resilience</b> Climate resilience and low carbon sustainability practices implemented in the health system
	<b>Sub-indicator on objective 1: Adaptation of current infrastructure, technologies, and supply chain</b> Percentage of health facilities built or retrofitted to be climate resilient based on national, regional or global guidance
	<b>Sub-indicator on objective 2: Promotion of new technologies</b> New technologies supporting climate change resilience adopted
	<b>Sub-indicator on objective 3: Environmental sustainability of health operations</b> Environmental sustainability practices implemented in health facilities operations
Component 7 <i>Management of environmental determinants of health</i>	<b>Component indicator for resilience</b> Monitoring system in place for early detection and control of risks from climate-related environmental determinants of health
	<b>Sub-indicator on objective 1: Monitoring</b> Mechanism established for collection and analysis of data to inform the management of climate-related environmental determinants of health within the health system
	<b>Sub-indicator on objective 2: Regulatory mechanisms</b> Policies, standards or guidelines on relevant environmental determinants of health implemented to reflect broader ranges of expected climate-sensitive environmental risks
	<b>Sub-indicator on objective 3: Coordinated cross-sectoral management</b> Cross-sectoral climate-related environmental determinants of health management approaches implemented
Component 8	<b>Component indicator for resilience</b>



<i>Climate-informed health programmes</i>	Climate resilience actions integrated in the operations of health programmes
	<b>Sub-indicator on objective 1: Health programming</b> Information on climatic conditions for climate-sensitive health risks integrated into the implementation of health programmes
	<b>Sub-indicator on objective 2: Delivery of interventions</b> Health sector standard operating procedures that integrate climate change and health risks available
Component 9 <i>Climate-related emergency preparedness and management</i>	<b>Component indicator for resilience</b> Climate and health resilience actions integrated in emergency and disaster preparedness and management programmes
	<b>Sub-indicator on objective 1: Policies and protocols</b> Policies, protocols, plans, or strategies for health emergency and disaster risk management improved through the integration of climate-related health risks and weather and climate information
	<b>Sub-indicator on objective 2: Risk management</b> Climate-related health emergency and disaster preparedness and management actions integrated into disaster risk reduction plans
	<b>Sub-indicator on objective 3: Community empowerment</b> Community groups and leaders empowered to proactively respond to health risks from extreme weather events
Component 10 <i>Sustainable climate and health financing</i>	<b>Component indicator for resilience</b> Financing for climate change and health adaptation interventions accessed
	<b>Sub-indicator on objective 1: Health specific funding and financing mechanisms</b> Funding to implement climate change and health interventions available
	<b>Sub-indicator on objective 2: Climate change funding streams</b> Percentage of the national health budget allocated to respond to risks posed by climate change
	<b>Sub-indicator on objective 3: Funding and financing for health-determining sectors</b> Funding allocated to relevant health-determining sectors for climate change adaptation projects and programmes
<p>Relevant guidance include:</p> <p>WHO GPW-14: <a href="https://apps.who.int/gb/ebwha/pdf_files/WHA77/A77_16-en.pdf">https://apps.who.int/gb/ebwha/pdf_files/WHA77/A77_16-en.pdf</a></p> <p>Operational framework for building climate resilient and low carbon health systems: <a href="https://www.who.int/publications/i/item/9789240081888">https://www.who.int/publications/i/item/9789240081888</a></p> <p>Measuring the climate resilience of health systems: <a href="https://www.who.int/publications/i/item/9789240048102">https://www.who.int/publications/i/item/9789240048102</a></p> <p>2021 WHO Health and Climate Change Survey Report: <a href="https://www.who.int/publications/i/item/9789240038509">https://www.who.int/publications/i/item/9789240038509</a></p> <p>Health and climate country profiles: <a href="https://www.who.int/teams/environment-climate-change-and-health/climate-change-and-health/evidence-monitoring/country-profiles">https://www.who.int/teams/environment-climate-change-and-health/climate-change-and-health/evidence-monitoring/country-profiles</a></p>	

**Target (d)** Reducing climate impacts on ecosystems and biodiversity, and accelerating the use of ecosystem-based adaptation and nature-based solutions, including through their management, enhancement, restoration and conservation and the protection of terrestrial, inland water, mountain, marine and coastal ecosystems

**WHO indicators work:**

No indicators monitored with relevance to GGA

**Target (e)** Increasing the resilience of infrastructure and human settlements to climate change impacts to ensure basic and continuous essential services for all, and minimizing climate-related impacts on infrastructure and human settlements

**WHO indicators work:**

WHO has prepared guidance to assist countries in assessing their vulnerabilities to their health facilities. Although there are no prescribed sets of indicators, the available guidance suggests several indicators (and actions) to build resilience. The guidance document provides assessments lists for interventions on climate resilience in four areas: i) Health workforce, ii) Energy, iii) WASH and healthcare waste, iv) Infrastructure, technologies, and products. A companion document aims at establishing the baseline for climate resilience in health facilities, focusing on reducing risks from hazards, exposures and vulnerabilities. Hazard templates for floods, storms, sea-level rise, drought, extreme heat, wildfires and cold waves are included.

See WHO guidance for climate-resilient and environmentally sustainable health care facilities: <https://www.who.int/publications/i/item/9789240012226>

Checklists to Assess vulnerabilities in Health Care Facilities in the Context of Climate Change: <https://www.who.int/publications/i/item/9789240022904>

**Target (f)** Substantially reducing the adverse effects of climate change on poverty eradication and livelihoods, in particular by promoting the use of adaptive social protection measures for all

**WHO indicators work:**

No indicators monitored with relevance to GGA

**Target (g)** Protecting cultural heritage from the impacts of climate-related risks by developing adaptive strategies for preserving cultural practices and heritage sites and by designing climate-resilient infrastructure, guided by traditional knowledge, Indigenous Peoples' knowledge and local knowledge systems;

**WHO indicators work:**

No indicators monitored with relevance to GGA

**Para. 10 – 2/CMA.5** Decides that the United Arab Emirates Framework for Global Climate Resilience includes the following targets in relation to the dimensions of the iterative adaptation cycle, recognizing the need to enhance adaptation action and support.

**Target (a)** Impact, vulnerability and risk assessment: by 2030 all Parties have conducted up-to-date assessments of climate hazards, climate change impacts and exposure to risks and vulnerabilities and have used the outcomes of these assessments to inform their formulation of national adaptation plans, policy instruments, and planning processes and/or strategies, and by 2027 all Parties have established multi-hazard early warning systems, climate information services for risk reduction and systematic observation to support improved climate-related data, information and services

### WHO indicators work:

WHO has prepared guidance for climate change and health vulnerability and adaptation assessment (V&A) to assist countries in this process. To date, 68 countries/areas have completed V&As and an additional 14 countries/areas have started or are in process of completing V&As. The V&A process includes the collection of all relevant climate change, health and vulnerability indicators at the national and/or sub-national levels. The six V&A Steps include the use of and/or collection of data and indicators, specifically:  
STEP 1 - Getting started: plan the assessment (specifically Step 1E, identify information and data to inform the assessment).

STEP 2 - Vulnerability assessment: describe the current burden of climate-sensitive health outcomes and vulnerabilities to climate variability and recent climate change

STEP 3 - Capacity assessment: Assess the capacities of health and health-relevant systems

STEP 4 - Future risk assessment: qualitatively and/or quantitatively project the health risks of climate change

STEP 5 - Adaptation assessment: Identify and prioritize policies, programmes and actions to address current and projected health risks

STEP 6 - Synthesize the assessment as input into relevant climate change and health policies, plans, and reporting mechanisms

See, Climate change and health: vulnerability and adaptation assessment:

<https://www.who.int/publications/i/item/9789240036383>

Through the GLAAS country survey, WHO collects information on if countries have conducted climate risk assessments that are used in national planning for WASH.

The GLAAS 2024 country survey includes the following questions on climate risk assessments:

- *A4. Are climate risk assessments undertaken for national WASH planning?*
  - a) *If yes, which year did the most recent climate risk assessment for WASH take place*
  - b) *Please describe the climate risk assessment*
  - c) *Please describe how the climate risk assessment has been used in national planning*
  - d) *Please describe the specific climate risks that were considered in the assessment.*
- *A6. Content of WASH policies and plans/strategies (disaggregated by sub sector: urban sanitation, rural sanitation, urban water, rural water, WASH in schools, WASH in HCFs, other)*
  - a) *Risk of climate variability and climate change to WASH services*
  - b) *Climate resilience of WASH technologies and management systems (e.g. adaptation)*
  - c) *Climate change mitigation*

**Target (b) Planning:** by 2030 all Parties have in place country-driven, gender-responsive, participatory and fully transparent national adaptation plans, policy instruments, and planning processes and/or strategies, covering, as appropriate, ecosystems, sectors, people and vulnerable communities, and have mainstreamed adaptation in all relevant strategies and plans

**WHO indicators work:**

WHO has prepared guidance to assist countries in conducting health adaptation plans to be included in NAPs and are known as H-. To date, 74 countries/areas have completed HNAPs and an additional 21 countries/areas have started or are in process of completing HNAPs. HNAP guidance does not propose specific adaptation indicators, but proposes a framework to identify indicators on climate hazards, risk factors, protective factors, response measures, adaptive capacity and health outcomes.

See, WHO guidance to protect health from climate change through health adaptation planning: <https://www.who.int/publications/i/item/9789240018983> and Quality Criteria for Health National Adaptation Plans: <https://www.who.int/publications/i/item/9789240018983>

**Target (c)** Implementation: by 2030 all Parties have progressed in implementing their national adaptation plans, policies and strategies and, as a result, have reduced the social and economic impacts of the key climate hazards identified in the assessments referred to in paragraph 10(a) above

**WHO indicators work:**

No indicators monitored with relevance to GGA

**Target (d)** Monitoring, evaluation and learning: by 2030 all Parties have designed, established and operationalized a system for monitoring, evaluation and learning for their national adaptation efforts and have built the required institutional capacity to fully implement the system

**WHO indicators work:**

No indicators monitored with relevance to GGA