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Geneva
Health
Forum

SCALING IMPACT: CLIMATE & HEALTH SOLUTIONS THAT DRIVE CHANGE

WEDNESDAY, MAY 21

9 am - 10.30 am



CAMPUS BIOTECH
GENEVA,
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Introduction

On May 21, 2025, on the sidelines of the 78th World Health Assembly, the Geneva Health Forum organized a session entitled "Scaling Impact: Climate & Health Solutions That Drive Change." The meeting brought together global health experts, humanitarian organizations, researchers, and international institutions with a shared goal: to move beyond observations to present concrete solutions to the climate crisis and its already visible health consequences.

Climate change is profoundly disrupting public health. Its direct and indirect effects are evident in deadly heatwaves, recurring natural disasters, increased spread of infectious diseases, deteriorating food and water security, and mounting pressure on already fragile health systems. These impacts disproportionately affect the most vulnerable populations, posing a significant challenge to equity and international solidarity.

The session was structured around four complementary components. First, the World Trade Organization (WHO) presented its Global Action Plan on Climate and Health (2024–2027), designed to strengthen the resilience of health systems while reducing their carbon footprint. Next, the One Sustainable Health Forum highlighted the importance of breaking down silos and building bridges between climate, health, and society. Then, four concrete field examples illustrated the diversity of possible responses: a One Health approach for pastoralists in the Horn of Africa, DNDi's therapeutic innovations for leishmaniasis, the use of digital twins to anticipate floods in Kinshasa, and UNITAID's initiatives to develop "climate-smart" health products. Finally, three international initiatives ("the Humanitarian Action in the Planetary Crisis policy brief", the WHO ATACH alliance, and the Climate Action Accelerator) invited the audience to engage in collaborative approaches.

Beyond the presentations, the session featured a collaborative engagement tree, encouraging participants to share their experiences and foster lasting partnerships.

This document reviews the key lessons learned, the initiatives presented, and the calls to action, aiming to build on the momentum generated in Geneva and transform field experiences into levers for global change.



Alternatives Humanitaires

Humanitarian Alternatives is a media partner of the Geneva Health Forum.

It is an international, bilingual journal (French and English) dedicated to reflection and debate on humanitarian action. The journal is freely accessible on our website: <https://www.alternatives-humanitaires.org>

The March 2025 issue is entitled "The Crisis of Humanitarian Action in the Time of Climate Change." It extends the reflections we shared during our workshop.

When the climate crisis becomes a global health crisis

Taraneh Shojaei

Senior advisor, Environment, Climate change Department at WHO

“Action is needed now, not only to address what is coming, but also to address what is already happening.”

The Health Emergency in the Face of Climate Change

Taraneh Shojaei, emphasized that the climate crisis is already a health crisis. According to the latest IPCC report, 3.6 billion people live in areas highly vulnerable to climate change, where the impacts are up to fifteen times greater than in more affluent regions.

The populations least responsible for global emissions—particularly those in low-income countries and small island states—are suffering the most severe consequences. This stark inequality raises pressing questions of equity and demands stronger international solidarity. Adaptation must be immediate: it is not only about anticipating future crises, but also addressing those already unfolding.

Climate change directly impacts health through heatwaves, extreme weather events, and air pollution. Indirectly, it drives the spread of vector-borne diseases, increases waterborne diseases, exacerbates water scarcity, reduces food production, and contributes to rising mental health disorders.

These impacts particularly affect the social determinants of health: such as access to care, food security, and quality of life. They exacerbate existing inequalities and further weaken already vulnerable populations.

The WHO Global Action Plan

To address these challenges, the WHO has developed a Global Action Plan on Climate Change and Health (2024–2027). Its goal is to help countries strengthen the resilience of their health systems, reduce the sector's carbon footprint, and connect local initiatives with global strategies.

This plan is structured around three strategic axes:

- Leadership, coordination, and advocacy: Integrate health in the global climate agenda and promote community engagement.

- Data and monitoring: Generate reliable information on the health impacts of climate change and connect research with public policy.
- National action and capacity building: Support countries in their adaptation and mitigation efforts by incorporating climate change into health policies and embedding health considerations into climate strategies.

The WHO emphasizes strengthening data and surveillance systems that can not only measure vulnerability but also enable rapid responses to emergencies. The plan promotes innovation by supporting both new technologies and community-driven local solutions.



Taraneh Shojaei

However, one of the key levers remains financing. Without adequate financial support, especially for low- and middle-income countries, it will be impossible to implement the necessary transformations.

Climate action delivers immediate health benefits. The fight against air pollution is a prime example: reducing emissions both protects the environment and improves public health. This logic of co-benefits underscores the need for an integrated approach to health and climate policies.

The WHO Action Plan is supported by a resolution adopted by the World Health Assembly. It aligns with the United Nations Framework Convention on Climate Change (UNFCCC), the Paris Agreement, and the Sustainable Development Goals

(SDGs). Its rapid development, completed in less than a year, demonstrates strong commitment and broad consultation involving Member States, civil society, foundations, and all levels of the WHO.

A steering committee will oversee monitoring, coordination, and evaluation, using indicators aligned with those of the UNFCCC and the SDGs.

Conclusion: Bridging the Gap

In conclusion, Taraneh Shojaei emphasizes that a gap remains between the urgency of health impacts and the pace of commitments. Bridging this gap requires concrete actions, greater collaboration, and sustainable financing. Climate change and health are inseparable: protecting one means protecting the other.

The WHO Global Action Plan on Climate Change and Health (2024–2027)

This plan is a three-year strategy aimed at strengthening health system resilience to climate impacts while reducing emissions from the health sector. It is built around three strategic pillars: leadership, coordination, and advocacy to integrate health into the climate agenda; evidence generation and utilization to guide policies and interventions; and national action with capacity building to support climate adaptation and mitigation.

Endorsed by a World Health Assembly resolution and aligned with the UNFCCC, the Paris Agreement, and the WHO Programme of Work, the plan promotes innovation, monitoring, and integrated planning, while emphasizing equity and financial support for the most vulnerable countries. It provides a global framework to transform climate action into tangible, coordinated public health outcomes.



From Pandemic Lessons to Global Action: The Journey of the One Sustainable Health Forum

Benoit Miribel

One Sustainable Health Forum

“One of the main problems we identified was that climate and health professionals often operate in separate spheres. Fostering dialogue was one of our initial commitments.”

A Forum Born from the Pandemic

Benoît Miribel presented the “One Sustainable Health Forum”, launched during the COVID-19 pandemic out of the realization that climate and health experts worked too often in isolation. The Forum’s mission is to bridge these gaps by creating a space for dialogue that connects science and society, accelerating concrete action.

Until recently, health played a marginal role in climate negotiations. A turning point came at COP26 in Glasgow, with the launch of the first WHO pavilion, which, significantly increased health’s visibility. This shift was reinforced by the Geneva Health Forum and the World Health Summit in Berlin, which anchored health within climate debates and established a lasting platform for collaboration.

More than 150 organizations worldwide support the Forum’s recommendations. A Scientific Council was established to translate evidence into action, while ten international working groups are actively engaged. One group, focused on the “One Health” approach in humanitarian settings, has already published recommendations—developed jointly by the University of Geneva and Humanity & Inclusion.

Health, Environment, and Society

The Forum is built on three pillars: health, environment, and social issues. Miribel emphasized that without addressing social factors, climate adaptation and health protection remain incomplete. He recalled the rural exodus observed decades ago, where climate-driven migration to cities reshaped diets and contributed to obesity epidemics in developing countries—clear evidence of the interconnected nature of health, climate, and social challenges.

Towards New Convergences

The Forum holds an annual international meeting: Lyon in 2022, Dakar in 2024, and returning to Lyon this November, alongside the French President’s “One Health” Summit. This edition will launch the *OSH Factory, a think tank that brings together One Health, Planetary Health, and the Sustainable Development Goals to develop new recommendations.

Miribel concluded with an invitation to all stakeholders to join this open, collaborative movement, uniting science and action for sustainable health for all.

benoit Mérihel



How climate change impacts health

Direct climate-related impacts

- Heatwaves: Increased mortality and a rise in cardiovascular and respiratory diseases.
- Extreme weather events: Floods, storms, and fires causing injuries, deaths, and population displacement.
- Air pollution: Exacerbation of chronic respiratory diseases (asthma, COPD) and cardiovascular diseases.

Infectious and communicable diseases

- Vector-borne diseases: The geographic spread of mosquitoes, ticks, and other vectors, promotes the transmission of malaria, dengue fever, chikungunya, and Lyme disease.
- Water-borne diseases: Increased diarrhea and other infections caused by contaminated water.
- Zoonotic diseases: Altered climatic conditions that increase contact between species, facilitating the transmission of new pathogens.

Water and Food Security

- Water shortages: Reduced access to safe drinking water, leading to increased health risks.
- Decline in agricultural production: Leading to increased food insecurity and malnutrition.
- Food contamination: Proliferation of bacteria and toxins driven by rising temperatures.

Mental Health and Well-being

- Psychological trauma: Resulting from natural disasters, homelessness, and displacement.
- Chronic stress: Manifesting as anxiety and eco-anxiety due to climate-related uncertainty.
- Increased social vulnerabilities: Including isolation, loss of livelihoods, psychological distress.

Weakened health systems

- Increased pressure on infrastructure: Hospitals overloaded during extreme weather events.
- Loss of access to care: Disruption of health services during disasters.
- Carbon footprint of the health sector: Responsible for approximately 5% of global emissions, highlighting the need for a transition to decarbonized and resilient systems.



Experience from the field:

A One Health solution for pastoralists in the horn of Africa

Sara Imbach

Vétérinaires Sans Frontières Switzerland

Sara Imbach, from Vétérinaires Sans Frontières Switzerland, takes us to the Horn of Africa, where pastoral and agro-pastoral communities face a convergence of crises. In these arid lands, mobile livestock herding has long been a lifeline, yet the ecosystems that sustain it are under severe strain. Land degradation, recurring droughts, and increasingly frequent floods undermine animal production, resulting in food and nutrition insecurity, population displacement and heightened risk of epidemics. These often-isolated populations lack adequate access to both human and veterinary care, while their traditional coping mechanisms are stretched to the limit.



To address these interconnected challenges, Vétérinaires Sans Frontières adopts a “One Health” approach, bridging human, animal, and environmental health. Their work is guided by four principles: communication, coordination, collaboration, and capacity building. At the core of this strategy are One Health Units—community-driven structures embedded within existing public and private health systems. Designed with and for local populations, these units bring together multiple stakeholders under one roof, providing truly integrated services.

With partners such as the International Livestock Research Institute, the organization pioneers innovative solutions: including rangeland community health workers, diversification of livelihoods through agro-pastoralism, hydroponic fodder production, poultry farming, milk processing and marketing, and farmer field schools that engage communities in hands-on experimentation. In parallel, Amref Health Africa strengthens resilience through community-based weather observation networks, helping communities better anticipate droughts and floods.

Launched in 2019, this model already reaches over 150,000 people across Ethiopia, Kenya, and Somalia. Operational guidelines and training materials have been developed and shared to support wider replication. The priorities are to consolidate the model, secure sustainable financing, and generate further evidence of its impact. What began as a pilot has now become a proof of concept—an approach with the potential to transform fragile rural health systems and enhance resilience in the face of climate change.

Adapting to climate-sensitive diseases: new tools to treat Leishmaniasis

Monique Wasunna

Drugs for Neglected Diseases Initiative (DNDi)

Monique Wasunna, from the Drugs for Neglected Diseases Initiative (DNDi), speaks with urgency about climate-sensitive diseases, focusing on leishmaniasis, one of the most devastating among the 21 neglected tropical diseases recognized by the World Health Organization. These illnesses, which affect over a billion people worldwide, trap vulnerable communities in a vicious cycle of poverty and disease. Among them, leishmaniasis stands out for its devastating human toll. It occurs in three forms—cutaneous, mucocutaneous, and visceral—the last being the most deadly, killing up to 95% of untreated patients, many of whom are children.



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Leishmaniasis follows seasonal patterns, but climate change is redrawing its boundaries. Rising temperatures, floods, and shifting rainfall are altering the distribution of sandfly vectors and the animal reservoirs that carry the parasite. In Kenya, where six counties were once considered endemic, that number has nearly doubled in recent years, driven by extreme weather events. Pastoralist communities, whose seasonal migrations bring them into contact with infected vectors, are particularly vulnerable, and new epidemics emerge with each climate shock.

For more than 80 years, treatments for visceral leishmaniasis have remained toxic, injectable, and difficult to administer in contexts of extreme poverty. DNDi and its partners are beginning to change this reality by developing shorter, cheaper, and more effective combination therapies, already adopted in South Asia and beyond. But the ultimate goal is an oral treatment—simple tablets taken at home, without the need for hospitalization or refrigeration. Such innovation would transform the fight against the disease.

Wasunna emphasizes that innovation is essential, not only for treatments but also for diagnostics and vaccines. Once adopted by countries, these tools will be central to strategies addressing both climate change and its health impacts. Yet innovation alone is not enough. The growing spread of leishmaniasis—from Kenya to Somalia, Pakistan, Thailand, and even parts of Europe—demands collective action. No single institution can meet this challenge. Only by working together can humanity hope to eliminate neglected tropical diseases in an era of climate uncertainty.

Health, hazard and digital resilience: using real-time monitoring to reduce disaster impact in Kinshasa's vulnerable neighborhoods

Jean-Claude Baraka Munyaka

Swiss Federal Institute of Technology (EPFL)

Jean-Claude Baraka Munyaka, from the Swiss Federal Institute of Technology (EPFL), recounts the dramatic reality unfolding in Kinshasa, a vast and rapidly expanding city already bearing the weight of climate change. Just weeks ago, floods swept through its neighborhoods, claiming the lives of 70 people. This tragedy underscores not only the fragility of urban infrastructures but also the intensifying consequences of a warming world on cities unprepared for such shocks.



In the Democratic Republic of Congo, the Red Cross deploys its 60,000 volunteers whenever disaster strikes, whether natural or human-made. Floods have become recurring emergencies, overwhelming both the population and response capacity. The organization sought tools to anticipate where and when to act, and how to deploy its limited resources with maximum efficiency. This need led to a partnership with EPFL and Morocco's Mohammed VI Polytechnic University.

The proposed solution was the digital twin, a technology already tested elsewhere but now adapted to the unique Congolese context. Beginning in the neighborhoods of Maziba and Dingi Dingi, near the N'Djili River, researchers combined hydrological modeling with local knowledge. The findings were stark: in Maziba, half the territory lies within flood-prone zones, while in Dingi Dingi, a quarter of households face the same risk. Altogether, nearly 7,000 families live under constant threat.

To turn vulnerability into foresight, the digital twin recreates the hydrological reality of the terrain in virtual form. Sensors installed on the ground provide real-time data on rainfall and river levels, transforming the model into a dynamic tool. For the Red Cross, this means anticipating danger, positioning volunteers, and preparing interventions before the waters rise. It is the difference between reaction and prevention.

Yet technology alone is not enough. Munyaka emphasizes the importance of contextualization, workshops, and capacity building to ensure the tool is fully integrated into local realities. Beyond Kinshasa, the project aims to contribute to a national disaster management framework—an essential structure still lacking in the DRC.

At its core, this initiative demonstrates how data, innovation, and collaboration can shift the balance of vulnerability. By bringing foresight where once there was only exposure, the digital twin offers hope that future floods will claim fewer lives. It is not just a technological achievement, it is a powerful call to embed anticipation and preparedness at the heart of disaster response in a climate-challenged world.

UNITAID's climate-smart health products

Lourdes Sanchez Aparicio
UNITAID

Lourdes Sanchez Aparicio of Unitaïd speaks with conviction about the inescapable intersection between health and climate. For an organization whose mission is to introduce and structure markets for life-saving products in low- and middle-income countries, the climate crisis is not a distant threat, it is a central element shaping the future of global health. Each year, Unitaïd manages \$200 million in grants to ensure that medicines and diagnostics are effective, affordable, and equitably accessible. Increasingly, however, its strategy is being guided by a new imperative: advancing “climate-smart” health products and building sustainable supply chains.



Within Unitaïd’s framework, climate-smart products must not only deliver strong health impact but also demonstrate clear benefits in mitigating and adapting to climate change. Mitigation efforts focus on reducing CO₂ emissions across the health sector, while adaptation ensures that tools are resilient to climate risks, responsive to shifting disease burdens, and appropriate for local conditions. The organization has identified three priority areas with the highest potential: long-acting technologies that reduce reliance on frequent treatments, HIV-related medicines with measurable emissions-reduction benefits, and thermostable solutions that withstand rising heat and humidity.

The importance of thermostability cannot be overstated. With global temperatures projected to rise under nearly every scenario, the viability of medicines and diagnostic tools faces growing threats. Many essential products, from vaccines to tests, rely on cold chains that are costly, fragile, and often impractical in vulnerable regions. The consequences of failure are stark. Malaria rapid diagnostic tests, for instance, can degrade in hot and humid conditions, sometimes producing false results—an unacceptable risk where accurate diagnosis can mean the difference between life and death.

Faced with this reality, Unitaïd is preparing a major investment to secure the future of health products in a changing climate. The initiative will generate data on the vulnerability of existing tools, map current innovations, and fund prototypes of new solutions that are both medically impactful and climate-resilient. This is not work done in isolation. Through close collaboration with experts and initiatives such as the ATTACH program, Unitaïd contributes to a collective effort to align global health innovation with the urgent demands of the climate era.

Sanchez Aparicio concludes with a reminder of the complexity behind every medicine: research, supply chains, manufacturing, and distribution all intersect with environmental realities. If products lose reliability under climate stress, the most vulnerable will pay the highest price. The task ahead is clear—innovation, collaboration, and foresight are no longer optional; they are essential to safeguarding health in a warming world.

Challenge 1:

Humanitarian Action in the Planetary Crisis: 4 recommendations and 28 actions for humanitarians, researchers, policy makers and donors

Rafael Ruiz de Castaneda

University of Geneva

Climate change is a major driver of humanitarian crises worldwide. Addressing its impacts requires integrated and systemic approaches to health in humanitarian settings, strengthened through collaboration among humanitarians, academics, and other stakeholders working at the intersection of communities, animals, and the shared environment.

In recent years, the concepts of One Health, Planetary Health and Nature-Based Solutions (NbS) have gained significant political and scientific recognition. Humanitarian organizations are now exploring how best to translate these concepts into practice in the field.

In February 2025, the University of Geneva (UNIGE) with the support of the GHF, and in collaboration with a broad international and transdisciplinary consortium, published a foundational policy brief that outlines specific recommendations for humanitarians, academics, donors, and policymakers.

The policy brief, titled "Humanitarian Action in the Planetary Crisis," underscores the urgent need to integrate One Health and Planetary Health approaches into humanitarian action. In the Anthropocene, six of the nine planetary boundaries have already been crossed: climate change, biodiversity collapse, disruption of the water cycle or soil and more. These upheavals amplify existing humanitarian crises—natural disasters, conflicts, epidemics, mass displacement—while weakening both human populations and the ecosystems on which they depend. Yet, the One Health approach remains too theoretical and insufficiently operationalized in the field.

This document proposes a concrete roadmap structured around four areas: For humanitarian actors: integrate a systemic vision into their programs, assess the ecological impact of their interventions, and promote prevention, resilience, and nature-based solutions. For researchers: prioritize transdisciplinary research, shared databases, indicators that measure the co-benefits for humans, animals, and the environment and strengthen of North-South and South-South collaborations. For policymakers: establish multisectoral structures and task forces, integrate climate and environmental issues into health policies, and develop local capacities through training and coordination. For donors: support flexible, sustainable financing focused on prevention and local co-design, rather than strictly sectoral and short-term responses.

This session at the GHF provided an opportunity to present the policy brief and discuss our plans to advance some of the proposed actions, including the creation of the first global map of One Health, Planetary Health and Nature-based Solutions initiatives in humanitarian settings.



The session also emphasized the need for collaboration in collecting and sharing concrete field experiences where One Health approaches have been applied in humanitarian contexts.

The ultimate goal is to build a body of inspiring examples that move beyond theory and, through real-life practice, demonstrate the added value of integrated approaches to strengthening resilience and effectiveness in the face of global crises.

Challenge 2:

ATACH : Alliance for Transformative Action On Climate and Health

Elena Villalobos Prats

World Health Organization, Alliance for Transformative Action on Climate and Health

The Alliance for Transformative Action on Climate and Health (ATACH) is an initiative launched by the World Health Organization (WHO) following COP26. Its mission is to support and accelerate the transformation of health systems so they can respond to the challenges posed by climate change. Its ambition is twofold: to strengthen health systems so they are resilient to increasing climate impacts and to make them sustainable and low-carbon thereby contributing to the fight against the climate crisis while protecting population health.

ATACH is a voluntary and inclusive cooperation platform, open to WHO Member States as well as a wide range of stakeholders including government institutions, intergovernmental organizations, NGOs, researchers, and civil society. The WHO provides secretariat and coordination support. The alliance's objectives are structured around several key priorities:

1. Strengthen the resilience of health systems to anticipate and adapt to climate-related impacts such as heat- waves, natural disasters, new infectious threats, and food insecurity. This requires robust infrastructure, early warning systems, and improved service preparedness.
2. Reduce the carbon footprint of health systems by promoting renewable energy, energy efficiency in buildings, waste reduction, and more sustainable medical practices.
3. Mobilize and direct financing by supporting countries in accessing climate funds and identifying the investments required for the transition.
4. Enhance knowledge sharing and technical assistance so that countries can benefit from international expertise , shared methodological tools, and practical experience from different contexts . 5. Monitor and evaluate progress to , ensure the quality of national plans, track achievements and identify the most effective actions for wider dissemination.

To advance these priorities in a structured way, ATACH has established five thematic working groups:

- Financing health-climate commitments.
- Climate resilience of health systems and infrastructure adaptation.
- Reducing carbon emissions in health facilities and services.
- Sustainable, less vulnerable, and more environmentally friendly supply chains.
- Climate and nutrition nexus, addressing the impact of climate on food security and promoting more sustainable diets.

Beyond its organizational structure, ATACH plays a central catalytic role. It facilitates the development of concrete projects, supports countries in translating their commitments into action, and fosters a collective dynamic where local successes can inspire global transformations. within the face of the already evident health impacts of climate change—extreme heatwaves, the spread of vector-borne diseases, food and water crises, and population displacement—ATACH offers a structured response. It bridges the gap between political declaration and practical implementation, providing countries with the tools, financing, and partnerships needed to transform their health systems.

This initiative embodies a clear vision: health systems that can effectively protect populations from climate threats while contributing to planetary preservation and the achievement of the Sustainable Development Goals.

This session invited organizations engaged in One Health approaches to contribute to ATACH. The aim is to share practical field experiences, build a dynamic network that can bridge humanitarian action, public health, and the ecological transition.



Challenge 3:

Healthcare Climate Action: Models, Impact and Scale-up

Alexandre Robert

Climate Action Accelerator

The Climate Action Accelerator is a non-profit initiative dedicated to helping organizations rapidly and significantly reduce their greenhouse gas emissions while strengthening their resilience and equity. Our mission is to catalyze climate action in high-impact sectors that deliver essential services to populations with a strong focus - on practical implementation, peer-to-peer learning, and community-based collaboration. We partner with committed actors across health, international aid, and higher education to develop low-carbon, resilient, and sustainable models that can be replicated and scaled.

Health systems are on the frontlines of the climate crisis. They are both heavily impacted by and significant contributors to climate change—yet they also hold many of the keys to solutions. The climate emergency is already reshaping disease patterns and healthcare demands. Health systems must adapt to these shifting burdens, reduce their own emissions, and regenerate in line with planetary boundaries. The science is clear, political will is growing, and strategies exist. What is missing is implementation and operationalization at local level.

Our acceleration model is built around five levers: pilot, learn, capitalize, disseminate, and scale capabilities. Through this approach, we help actors move beyond isolated initiatives toward systemic transformation.

In our health programme, this model is exemplified through our CRESH initiative—Climate-Resilient and Environmentally Sustainable Health Care Facilities ([WHO guidance for climate resilient and environmentally sustainable health care facilities](#)). These pilot projects assess and adapt healthcare services to climate risks, implement low-carbon and sustainable measures, and deliver tangible results: facilities that are resilient, low-emission, and designed to meet real health needs.

Currently, we are piloting four CRESH projects:

- The Ngouri District Hospital in Chad
- Two primary health centres in Cox's Bazar, Bangladesh
- A primary healthcare network in Cederberg, South Africa
- Three health centres in Sédhiou, Senegal

The Cederberg pilot in South Africa stands out as a model of integrated climate planning and capacity building. Through our dedicated toolbox and collaborative methodology co-designed with the French Development Agency, we equip healthcare managers and system leaders with the tools to build resilience and reduce emissions. This work has also contributed to the broader Climate Action Plan of the Western Cape Department of Health, highlighting a promising example of sub-national leadership.

To move from piloting to scaling up, a growing community of action is essential. That is why we collaborate closely with partners like Alima and TDH. Alima is mainstreaming climate action in its strategy and seeking urgent access to climate finance. TDH advocates for data-driven early warning systems and stronger links between urban planning and public health preparedness.

To scale up, we aim to:

- Demonstrate impact through research and cost-effectiveness assessments. Our findings have been presented at numerous conferences and [our first scientific article was published in August 2025](#).
- Diversify partnerships to broaden our reach and relevance
- Capitalize on existing work to secure technical and financial support

If you are ready to take action, we invite you to explore our Climate Vulnerability and Capacity Assessment (VCA) toolkit—an open, replicable methodology designed specifically for healthcare systems. Start with the VCA [here](#), or explore our full set of actionable resources [here](#). Whether you are a policy-maker, implementer, funder or researcher—there is a role for you in this transformation.

Key messages

The objective of this workshop was to better understand the impact of climate change on health and highlight concrete actions to address it. We note 10 key messages from these discussions:

Impacts of Climate Change on Health

1. Climate change is already a global health crisis, with direct impacts (heatwaves, extreme events, air pollution) and indirect impacts (infectious diseases, food and water insecurity, mental health).
2. The most vulnerable populations (low-income countries, small islands, rural communities) are the most affected, exacerbating inequalities and requiring greater international solidarity.
3. Health systems themselves are weakened, facing a dual pressure: meeting increased demand while reducing their own carbon footprint (approximately 5% of global emissions).
4. Reducing emissions brings immediate health benefits (e.g., combating air pollution → improving respiratory and cardiovascular health). Climate and health must be addressed together.

Local and global solutions and innovations

5. The One Health approach (integrated human, animal, and environmental health) provides concrete solutions to rural and pastoral communities facing multiple crises (e.g., the Horn of Africa).
6. Medical and technological innovation is essential: the development of safer and more accessible treatments (e.g., leishmaniasis), climate-smart and heat-stable health products, and digital tools such as digital twins to anticipate disasters.
7. Local initiatives (e.g., resilient hospitals in Chad, Bangladesh, South Africa, and Senegal) demonstrate that it is possible to build low-carbon and robust health systems that serve as replicable models.

Governance, Policies, and Financing

8. The WHO Global Action Plan (2024–2027) provides a roadmap for strengthening the resilience of health systems and reducing their emissions by integrating health into climate policies and vice versa.
9. International alliances (ATACH, Climate Action Accelerator, OSH Forum) are creating cooperation platforms to support governments, share experiences, and access climate financing.

Social Mobilization and Communication

10. Changing social perceptions and sharing inspiring stories are essential to combat stigma, foster community engagement, and transform practices in the long term.

Building on its role as a platform bringing together researchers, policymakers, field stakeholders, and the private sector, the GHF aims to showcase health-climate solutions. In particular, we aim to:

- Highlight concrete initiatives
- Give a voice to local communities and stakeholders on the ground
- Promote collaboration and the sharing of experiences
- Support the development of new initiatives
- Strengthen cross-sectoral collaboration by bringing together stakeholders in health with those in energy, agriculture, education, and urban planning, in order to develop integrated solutions.

Acknowledges to the speakers and round table rapporteurs:

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The Geneva Health Forum is a non-profit initiative launched in 2006 by the Geneva University Hospitals and the University of Geneva. It provides a neutral platform for dialogue and collaboration between public stakeholders, academia, civil society, and the private sector. It collaborates with its partners to create synergies to address public health challenges.



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