



Framing of Health Co-Benefits of Climate Change Mitigation in Africa Workshop Report

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TABLE OF CONTENTS

Introduction	3
Key results from the workshop	4
Framing of climate change in Sub-Saharan Africa	4
What are some of the words, terms or phrases when we talk about climate mitigation and health in Sub-Saharan Africa?	4
Key questions on framing of health co-benefits of climate mitigation in Africa asked to stakeholders in breakout room sessions	5
Conclusion	6
Appendages	7
Appendix 1	7
Appendix 2	8

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Introduction

The second phase of the Pathfinder Initiative project on Accelerating Climate Action for Health aims to catalyse and support successful action on climate mitigation, with a focus on measured co-benefits for health. The first phase of the Pathfinder Initiative synthesized evidence on climate mitigation actions with health co-benefits across sectors, including energy, transport and agriculture/food (climatehealthevidence.org). The second phase of the Pathfinder Initiative (Pathfinder 2) will focus on three key areas: evidence for action, monitoring and evaluation progress and capacity strengthening.



An important issue that the Pathfinder collaborators identified early on in the Initiative was that of framing and communicating about climate mitigation, and health co-benefits, in Africa.

An important issue that the Pathfinder collaborators identified early on in the Initiative was that of framing and communicating about climate mitigation, and health co-benefits, in Africa. Framing in this particular case refers to building consensus on the language and terminologies that would be best suited in communicating how climate action can both reduce emissions and improve health, particularly in the context of Africa.

In order to support this, Pathfinder 2 organized a virtual workshop with industry experts from the African continent in the field of climate and health ranging from academia to the public sector including NGOs as well as INGOs. This workshop's aim was to explore how to effectively communicate about or frame key pathways to a low carbon future that bring public health benefits in ways that help to enable policy action in sub-Saharan Africa (SSA). It is important to note that not all pathways stipulated in the findings of the first

phase of the Pathfinder Initiative may be applicable or practical for the African context.

Details of the workshop

The workshop was held virtually on March 25, 2025, from 2 to 3:30 p.m. (EAT). The meeting brought together 28 stakeholders from various African areas who are specialists in climate change, health, and resilience. This featured government officials from Ethiopia's Ministry of Forestry, academia, and stakeholders from non-governmental organisations (NGOs) and international non-governmental organisations (INGOs) around Africa.

The workshop programme (see appendix 2)

The workshop programme included information on the benefits of framing in the broad field of health in Africa (with a focus on the evolving framing of HIV/AIDS, which was critical in galvanising stakeholders); a presentation outlining the Pathfinder Initiative, including results from the first phase; and Q&A and discussion sessions (both breakout and plenary) with workshop participants. The conversation and Q&A sessions were guided by a series of pre-prepared questions that corresponded to the workshop's goal and expected outcomes.

Key results from the workshop

Framing of climate change in Sub-Saharan Africa

Following the presentations on the wide benefits of framing and an overview of the Pathfinder Initiative, there was a brief discussion session with a Q&A and thoughts from participants on the current situation of framing climate change in Africa. Here is a breakdown of the important takeaways from that session:

1. Avoid negative connotations: Climate mitigation initiatives should not be framed negatively; instead, they should be solution-oriented. Participants stated that climate change is now presented in a negative light due to the detrimental impact that climatic phenomena like as flooding, heat waves, and droughts have on people and livelihoods in Africa. This presumably explains why the majority of current framings/narratives on the confluence of climate change and health in Africa focus on the negative health effects of climate change rather than investigating the potential health advantages of mitigation and adaptation activities. As a result, it is critical that current framing include a focus on the positive health effects of climate mitigation interventions/action.

2. Demonstrating win-win situations: The framing of climate policies with health co-benefits should highlight win-win scenarios. Some of the examples cited by participants included a UNDP intervention in Malawi (called Solar for Health), which is assisting district

hospitals that are experiencing power outages by installing solar panels and equipment to provide uninterrupted power while also ensuring reliable power to improve healthcare delivery quality. Thus, framing interventions in this manner would help to successfully communicate with and engage policymakers and communities.

3. Climate mitigation actions: Using the term 'mitigation' actions is often met with resistance as despite only contributing less than 4% to global emissions, the African continent bears a disproportionate share of climate impacts. As a result, framing climate efforts around 'mitigation' can imply a responsibility to reduce emissions and can feel misplaced and unjust. A more balanced and resonant approach is to talk about climate action more broadly, rather than framing it as a binary of 'mitigation vs adaptation.' This language shift recognizes Africa's priorities and historical context, while still encouraging proactive solutions.

What are some of the words, terms or phrases when we talk about climate mitigation and health in Sub-Saharan Africa?

Participants were asked to provide keywords, terminology, or phrases that are commonly used when discussing climate mitigation and health in Sub-Saharan Africa. A word cloud was created (shown below) to provide an overview of all terms. The most commonly used terms were 'carbon emissions' and 'pollution'.



Key questions on framing of health co-benefits of climate mitigation in Africa asked to stakeholders in breakout room sessions

The workshop purposively sought to engage experts on their view on the following questions to understand framing in the context of Africa. There were two breakouts with participants organising themselves with a moderator and note takers who would report at the plenary. The following questions were posed to the breakout rooms:

What works and what doesn't work about these ways of framing?

(What terms are used successfully and what terms have not worked in communicating health co-benefits of climate change mitigation in the Africa context)

»»» **Relatable:** Terms that are relevant to communities proved to be the most effective in successfully communicating climate change mitigation issues. Terms like 'global warming' and 'temperature change' were mentioned as being relevant to the majority of people and communities.

»»» **Understandable:** Terms that are unrelated and make communication of climate mitigation to communities relatively difficult are technical jargon and buzzwords such as 'carbon emissions', 'net zero', 'decarbonisation', and 'carbon footprint'. It was also mentioned that terms tend to focus on emissions reduction without adequately addressing health-related outcomes. Participants emphasised the need for better framing—such as discussing "air quality for health" instead of the vague term "pollution"—to improve relevance and impact.

»»» **Negative connotations:** Much of the current framing of climate action relies on negatively connoted terms, with little emphasis on well-being, welfare, or the goal of maximising health. In contrast, more effective and impactful approaches use positive, direct language that highlights the health and social benefits of climate action.

»»» **Inclusion of wider impacts:** It is also important that when communicating the health co-benefits of climate change mitigation, the impacts

on livelihoods and wellbeing of communities should be included. For example, in Ghana, there are some communities whose livelihoods depend on mangroves. Due to their ability to absorb carbon, protecting mangroves is a widely used mitigation action. The importance of protecting mangroves on the livelihoods of local communities is, however, often not communicated well enough. Making sure that the impacts of climate action on local communities are well communicated and showcasing a win-win situation for those communities on the ground is key.

What are the key pathways to a healthy low carbon future with practical public health benefits for the African Context?

»»» Land use and urbanization – Most of the urban population growth will take place in Sub-Saharan Africa, which presents an opportunity for African cities to be carefully planned and designed in a way that is more environmentally friendly.

»»» Household fuel – In a lot of households in Africa, cooking/heating fuel is one of the major sources of pollution, and can be an important contributor to GHG and wider issues including environmental degradation. Solving this issue in the long run will have significant impact on reduction of greenhouse gases as a whole through the use of clean sources of energy as well as providing health benefits including reductions in respiratory infections.

»»» Health sector - Another pathway particularly targeting the health sector involves managing energy use associated with the health sector, and how waste is handled and disposed in the health sector. This is because the health sector worldwide is estimated to contribute about 4.4 percent of all greenhouse gas (GHG) emissions. However, decarbonising the health industry is not a priority in Sub-Saharan Africa (SSA) for a number of important and interconnected reasons, the most pressing of which is that countries are focused with more immediate and existential public health issues and structural challenges. Examples include high disease burden and weak health systems, low contribution to global emissions, energy poverty and development objectives, and a lack of data and technical capacity.

Waste sector - Another pathway that was suggested was capacity building of those that work in waste management in Africa. This is essential because over the period 2000-2021, greenhouse gas emissions from waste in Africa has grown almost twice as fast as overall emissions accounting for around 8% of the total consisting mainly of methane (95%) that is produced from waste. Negative impacts to health from open burning of waste include respiratory tract infections, dermatological illnesses, immunological and developmental abnormalities.

Transport sector - Providing individuals with more options for commuting in cities. For example, participants agreed that not all African cities are designed to provide inhabitants with alternative modes of transportation that are also healthy for their health. For example, suitable bicycle lanes for persons who want to cycle to work, which is beneficial to their health, as well as other types of safe active travel such as walkability and public transportation.

Public engagement – Public engagement in climate action is often treated as a box-ticking exercise, leaving people feeling disconnected from responsibility for healthier, more sustainable lives. Yet there is a clear opportunity to involve the public more meaningfully—as informed participants and even investors in climate action.



Emissions data - Finally, rather than a pathway, participants emphasised the topic of climate mitigation, which should be considered closely. People, particularly those affected by climate change, must be aware of and comprehend how many emissions are currently generated in Africa, as well as how this will evolve in the following years and decades. This information is not well-known or readily available. For example, to determine how much carbon will be released into the atmosphere if a particular number of trees are cut down vs how much carbon will be collected if a certain number of trees are planted. Transparency is also vital for communities in a readily understandable way. This can make it easier to create paths.

3. What alternative terminologies or terms could be used to communicate health co-benefits of climate change, if any in the African Context?

Overall, there was consensus among the workshop participants that framing climate action should move beyond a narrow focus on health to encompass overall well-being while still recognising that health is a core component of this. Too often, the benefits of climate actions are framed in negative terms; instead, there is value in using simpler, more positive language to highlight the full range of climate-related benefits. Terms that are more relatable and easily understood to people are the best to use for communication and getting the message in the context of Africa.

Conclusion

The workshop on health co-benefits of climate mitigation provided important insights from experts in climate change and health on effective and ineffective ways of communicating health co-benefits of mitigation actions in Sub-Saharan Africa. The workshop also provided clear and practical pathways to a healthy, low-carbon future for the African context, giving an eye-opening view on which pathways could be more appropriate, practical and effective in climate mitigation in Africa. These insights will inform future work of the Pathfinder Initiative on capacity strengthening and could be useful for policy and programme implementation on climate mitigation interventions and communication in Africa if properly adapted.

Appendages

Appendix 1

This appendix provides a table with the list of the participants who attended the workshop on 25th March 2025. It includes names of participants, organizations they are affiliated to and geographical distribution of participants by country.

No.	Name	Organisation	Country
1	Guadalupe Kabia	UNDP Malawi	Malawi
2	Dr. Martin Mutchangi	AMREF	Kenya
3	Dr. Judy Omumbo	Science for Africa Foundation	Kenya
4	Dr. Anderson Kehbila	Stockholm Environment Institute Africa Office	Kenya
5	Associate Professor. Abu Mumuni	University of Ghana	Ghana
6	Tatenda Makhanga	University Zimbabwe	Zimbabwe
7	Chauncy Masamba	WFP	Malawi
8	Mr. Vincente Ruiz	OECD	France
9	Dr. Vincent Pagiwa	Okavango Research Institute – University Botswana	Botswana
10	Dr. Liliosa Pahwaringira	University of Zimbabwe	Zimbabwe
11	Patrick Ken Kalonde	Malawi-Liverpool Wellcome Trust	Malawi
12	Michael Ochieng' Okumu	Ministry of Environment, Climate Change and Forestry	Kenya
13	Mulatu Mengist	Ministry of Environment and climate change	Ethiopia
14	Nurudeen Alhassan	African Institute for Development Policy (AFIDEP)	Malawi
15	Chimwemwe Chifungo	African Institute for Development Policy (AFIDEP)	Malawi
16	Charlotte Chisoni	African Institute for Development Policy (AFIDEP)	Malawi
17	Levi Kalitsilo	African Institute for Development Policy (AFIDEP)	Malawi
18	Alice Ritho	APHRC	Kenya
19	Gladys Mbai	APHRC	Kenya
20	Mary Chawira	Zimbabwe Open University	Zimbabwe
21	Rabi Gaudo	UNDP	Malawi
22	Robert Hughes	LSTHM	United Kingdom
23	Blanca Anton	LSTHM	United Kingdom
24	Rebecca Newbould	LSTHM	United Kingdom
25	Hellen Gitau	APHRC	Kenya
26	Ellie Morse	LSTHM	United Kingdom
27	Nicolas Etyang	APHRC	Kenya
28	Sarah Sharpe	LSTHM	United Kingdom

Appendix 1

WORKSHOP ON HEALTH CO-BENEFITS OF CLIMATE MITIGATION ACTIONS IN AFRICA

DATE: TUESDAY, 25TH MARCH, 2025

PROGRAMME

TIME	ACTIVITY	RESPONSIBLE PERSON
2:00- 2:10 PM	Introduction	All
2:10- 2:15 PM	Welcome Remarks	Nurudeen Alhassan, AFIDEP
2:15- 2:25 PM	overview of Pathfinder initiative	Blanca Anton, LSHTM
2:25- 2:35 PM	Case study from an African City	Hon. Dr. Manuel de Araujo. Mayor of Quelimane City, Mozambique
2:35- 2:40 PM	Q and A	All
2:40- 3:25 PM	Discussion on framing	All
3:25-3:30 PM	Closing Remarks and Next Steps	Robert Hughes, LSHTM

References

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