ICCN Climate & Health Research Project

How climate councils can integrate health into climate policy

About the Project

We are running out of time to prevent the worst health and livelihood impacts of the climate crisis. Heat stress is one visible example: the World Meteorological Organization and World Health Organization identify it as a growing threat to billions of people who work outdoors.[1] But the risks extend much further, including worsening air pollution, rising food and water insecurity, and the spread of mosquito-borne diseases in warmer and more humid conditions. Additionally, evidence is growing on how climate action, both mitigation (reducing emissions) and adaptation (reducing exposure and vulnerability to climate change impacts), delivers substantial health gains.[2]

Climate councils offer a way for governments to embed robust, science-informed advice into their policymaking processes. Strengthening climate governance through effective climate councils will ensure climate and health objectives are implemented to benefit the lives and health of citizens. Launched by the International Climate Councils Network (ICCN) in January 2026, this seven-month project will develop best-practice guidance on how 31 climate councils can incorporate health into their policy advice, including methods for making the economic case for climate policies with strong health co-benefits. This brochure previews the work that is underway.

Health co-benefits of climate action are positive health outcomes resulting from policies or measures primarily designed to address climate change, both mitigation and adaptation.



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ICCN Climate-Health Framework

A practical tool for climate councils to assess and strengthen health integration

Why it matters:

Climate and health policies remain largely siloed, even as integrated approaches are increasingly recognized as essential for complex, cross-sectoral challenges.[3, 4, 5] National and sub-national climate councils differ in mandate and design, but many act as trusted advisors, convenors, and accountability bodies within climate governance systems. This gives them a strategic role in making health more visible in climate policy and in promoting climate action that delivers measurable health co-benefits.

What the framework does:

Building on policy sciences literature[6] and World Health Organization guidance, the framework helps climate councils assess how far health is embedded in their policy advice, convening role, working processes, and accountability functions. Currently in a pilot stage, the framework is a diagnostic tool: the aim is for councils to apply it and identify practical next steps from health-neutral climate advice toward transformative climate-health integration. The exercise is to score each of the 10 indicators from 0 to 4, record evidence, and focus on the lowest-scoring areas to identify feasible improvements.



Scoring at-a-glance:

Total	Tier	Policy Interpretation
0 - 8	Health-neutral	Health is absent or incidental in climate advice and accountability.
9 - 16	Health-referenced	Health is acknowledged, but not systematically embedded.
17 - 24	Procedural integration	Health is built into selected processes or products, evidence use, or monitoring.
25 - 32	Strategic integration	Health objectives, co-benefits, and equity shape priorities and advice.
33 - 40	Transformative integration	Health is a headline outcome of climate governance and accountability.

Using results to support progress:

Scores are most useful when they diagnose where integration is strongest and where targeted support is needed. Councils should interpret results by assessment area, not only by the total score.

Current position	Typical gap	Examples of practical support
Health-neutral	Health absent from policy advice.	Add health framing, invite health expertise, and identify one priority pathway.
Health-referenced	Health is mentioned but not institutionalized.	Create a formal health role, require health sections in advice, and map health-linked sectors.
Procedural integration	Procedures exist but do not yet shape priorities.	Add health indicators, use health appraisal tools, and quantify co-benefits where feasible.
Strategic integration	Health is important but not yet a headline outcome.	Align targets, monitoring, and accountability around health, equity, and co-benefits.
Transformative integration	Integration is strong but must be sustained.	Invest in learning, independent review of progress, and diffusion of policy learning within ICCN and across councils within a country.

Assessment areas:

	0	1
Assessment area 1: Policy and communications framing		
1.1 Health framing	Health is absent in council mandate (e.g., legislation), outputs, or communications	Health is acknowledged but in a limited way, such as mentions of climate-related impacts (e.g., "heat affects health")
1.2 Equity, justice & differential risks	No equity, justice, or differential impacts framing	Generic references to "vulnerable groups" or "at-risk populations," with little explanation of why risk differs or how inequities are produced
Assessment area 2: Actor involvement		
2.1 Health representation on the council and secretariat	None	*Ad hoc* invitations to health experts
2.2 Engagement and coordination with actors from sectors that shape climate-health outcomes (e.g., health, housing, land use, energy, transport, food, water, emergency management)	Engagement is narrow, limited to climate or environment focal points, with little or no involvement of health or health-determining sectors	Engagement with health and one or more health-determining sectors on an ad hoc, project, event, or consultation basis. No sustained coordination or clear follow-up
Assessment area 3: Goals and instruments		
3.1 Health objectives in council strategy	Climate goals omit health	Broad aspirations about protecting health
3.2 Health appraisal practice	No health lens	Optional narrative health sections in advice, submission, or work programs
3.3 Health co-benefits & harms	Not identified or discussed	*Ad hoc* identification of health co-benefits and trade-offs of climate policy, driven by internal champions
3.4 Health in policy advice	None	Recognition of the impacts of climate change on human health but gives few policy recommendations
Assessment area 4: Policy monitoring and evaluation		
4.1 Monitoring & indicators	None, monitoring frameworks are not health sensitive	Occasional health statistics related to climate impacts and action reported
4.2 Accountability & learning	None, no reflection on health impacts and effects of climate policy	Irregular reviews of health impacts and effects of climate policy

Framing refers to problem definition or the way a problem is understood; references to **co-benefits & harms** focus on evidence appraisal of benefits/trade-offs; references to advice refer to explicit recommendations or policy asks.

The framework uses ten indicators across four areas largely within a council's sphere of influence. The unit of assessment is the council.

2	3	4
Health is framed as a cross-cutting challenge for mitigation and adaptation	Health is a core rationale for mitigation and adaptation	Council work is organized around health as a central outcome, reflecting a "health-in-all-climate-policy" or "One Health" thinking
Specific groups facing disproportionate climate–health risks and mechanisms identified (e.g., age, health status, income, housing, geography, occupation)	Frames disproportionate risks through structural determinants of health (e.g., discrimination, unequal access to resources)	Uses climate-justice framing, including distributional impacts, inclusion, and recognition of affected communities' knowledge and agency
Health is formally represented through health-sector capacity within the secretariat, a standing advisory role, formal secondment, or equivalent institutional partnership	Health is formally represented through at least 1 health expert council member with additional health-sector capacity within the secretariat	Health is embedded across the council architecture (co-chairing or equivalent governance role and resourced secretariat)
Regular information exchange with health and multiple health-determining sectors to understand cross-sector climate–health linkages, including through consultations, expert input, interviews, or evidence review	Structured cross-sector coordination through working groups, co-development exercises, or formal consultation mechanisms, with participation from government departments, non-government actors, and affected communities, where appropriate. Roles, responsibilities, and evidence needs are at least partly clarified.	The council contributes to networked climate–health governance across sectors and levels of government, with clear roles, mechanisms to address interdependencies, sustained engagement with affected communities, and institutional capacity to synthesize evidence and bridge departmental siloes.
Explicit health-related objectives sit alongside climate objectives being promoted	Adoption of at least one measurable health target linked to climate policy [7]	Adoption of measurable public health and healthcare targets linked to climate policy
Health sections are required in advice, submission, or work programs	Quantitative appraisal (e.g., health impact and risk assessment, health co-benefit valuation, and multi-criteria decision analysis) informs advice, submission, or work programs	Health appraisal materially changes council priorities and focus (within the scope of their mandate)
Identification of health co-benefits and trade-offs of climate policy in one or more council work programs	Health co-benefits and tradeoffs of climate policy are assessed qualitatively and used across council work programs	Co-benefits, trade-offs, and distributional effects are quantified where feasible and consistently used across council work programs
Integration of health adaptation-related actions in policy advice, both actions to support healthcare resilience, reduce public health & workforce risks	Integration of actions targeting health-determining sectors in policy advice using health rationale (e.g., sectoral decarbonization plans)	Joint recommendations with health advisory bodies, including during key policy windows (e.g., updates to Nationally Determined Contributions (NDCs), National and Sectoral Adaptation Plans, emissions reduction plans, fossil fuel phaseout roadmaps)
At least one health-specific headline indicator included in monitoring frameworks	Monitoring frameworks include indicator sets for health-linked targets (climate impacts, mitigation & adaptation)	Monitoring frameworks include indicator sets for health-linked targets (climate impacts, mitigation & adaptation), including equity and differential health effects of climate action
Scheduled and predictable reviews of health impacts and effects of climate policy	Integration of health coverage in independent evaluation or parliamentary reporting on climate policy	Integration of health coverage in independent evaluation or parliamentary reporting on climate policy, including lessons on what works for health

Case Stories

Netherlands Scientific Climate Council (Netherlands)

Council success story: *Ongoing council work on climate and health appears to be building momentum for climate-health integration*

> *"The three council members [who] were involved in this [health report] learned a lot about climate and health. So [for our next advice] on the built environment, our council members […] will be more triggered to also think about [health-related topics like] heat stress in houses or older buildings."*
>
> — Advisor at the Netherlands Scientific Climate Council

Since 2023, the Netherlands Scientific Climate Council (Wetenschappelijke Klimaatraad) has provided the Dutch government and parliament with climate-related policy advice founded in scientific evidence. With a legislated mandate derived from the Dutch Climate Act (Klimaatwet), the council primarily serves in an advisory role for ministers to inform policies and plans. Health is mostly implicit through work on climate adaptation or co-benefits framing. However, one project from 2024–2026 has addressed health more explicitly: the climate council collaborated with the national health council to produce a report[8] focused on the health impacts of climate change. To build better health policy in a changing climate, the report recommends that ministers implement long-term, coherent health policy integrated across multiple policy objectives, with policy development prioritized for at-risk groups and residents of the Caribbean Netherlands and key next steps aimed at reducing climate risks (particularly heat risk) in homes, buildings, and workplaces; strengthening monitoring of climate-related exposures and impacts; and building resilience by improving social structures and emergency response preparedness.

An advisor with the council's secretariat highlighted several enablers of climate-health integration within the council, including:

- Collaboration with the health council;
- Continuity amongst unelected officials (e.g., council secretariat members);
- A receptive political context under the current government;
- Co-benefits opportunities (e.g., urban design choices and impacts to health), which can make climate action more attractive or legitimate.



New South Wales Net Zero Commission (Australia)

Council success story: *The council's adaptation remit offers a way to make health relevant*

> *"[The Council] doesn't necessarily need to be bigger to achieve climate-health integration. I think it's just seeing it as important and finding easy ways to integrate it [….] The fact that we have a climate adaptation remit […] really changes things as it allows us to focus on health, well-being and other social aspects in a way that is harder for emissions. We wouldn't have done a health-focused report if we didn't have that remit for climate adaptation."*
>
> — Advisor at the NSW Net Zero Commission

The New South Wales (NSW) Net Zero Commission is a state-level independent statutory body in Australia that monitors, reviews, and provides advice on NSW's climate mitigation targets and adaptation objectives. Established in 2023, the council has a legislated mandate from the Climate Change (Net Zero Future) Act 2023 and serves advisory and monitoring roles, producing reports and briefings related to both mitigation and adaptation. Although health does not appear consistently across outputs, it does feature in specific projects (e.g., extreme heat, economic costs of climate change). The council recently produced a Heat Stress Spotlight Report,[9] which highlights the health risks of extreme heat and humidity events.

Key enablers of climate-health integration have been:

- The council's adaptation mandate, where the imperative to protect citizens is clearer than the net-zero mitigation mandate;
- Requirements for agency-level climate-related financial disclosures, which have driven agencies to better understand their roles and responsibilities in addressing climate change, prompting broader agency engagement on climate change, including from the Health Department;
- Learning from others. The NSW Net Zero Commission has also learnt from other jurisdictions, including international adaptation frameworks like the Paris Agreement's Global Goal on Adaptation, the UK CCC's Adaptation Monitoring Framework, Spain's monitoring of heat-related health impacts under the National Health Plan, climate-health targets in Canada's National Adaptation Strategy, and collaboration with other Australian states and the national Australian climate council.

Presidential Climate Commission (South Africa)

Council success story: *Strategic partnerships have strengthened efforts to embed climate-health integration within the council's advisory work*

> *"We've seen interest from the University of Pretoria as well, where they've launched the Lancet Regional Office in South Africa, and they've approached PCC as a potential partner to provide the evidence, technical and scientific rigor around the advice and recommendations provided to the government."*
>
> — Senior Manager at the Presidential Climate Council

Established in 2020, the Presidential Climate Council (PCC) serves as an independent body providing climate-related policy guidance to the South African Government. Under a legislated mandate derived from the Climate Change Act, the council primarily serves an advisory role, overseeing and facilitating a just and equitable transition towards a low-emissions and climate-resilient economy. Convening is integral to the way the council functions.

The council seeks to strengthen its engagement at the intersection of climate and health by facilitating collaboration among climate-health stakeholders and enhancing knowledge sharing across health and climate sectors. The commitment shines through in a webinar hosted in 2025 to launch a health scoping study by the Pivot Collective called Climate Health in South Africa: Pathways Toward Resilience and Equity. This webinar was a joint effort between the PCC and the French Development Agency and forms part of the PCC's work in developing the Just Adaptation and Resilience Investment Platform (JARIP).

Key enablers facilitating the continued integration of climate-health considerations include:

- Collaboration with universities to strengthen data collection and support the translation of scientific evidence into policy-relevant recommendations;
- Access to a blend of funding from government, philanthropy and donor climate finance, which enabled them to receive funding support from the French Developmental Agency.

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[7] As an example, the UK Climate Change Commission includes health-related targets in their recent independence assessment of UK climate risks. The target is as follows: "By 2050, excess heat-related mortality should be no greater, and ideally lower, than today's annual average". See: https://www.theccc.org.uk/publication/a-well-adapted-uk/

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