



Recommendations from the South-South Cooperation Symposium on Climate Change, Migration and Health in Marrakesh, Morocco, 12-13 October 2022

The government representatives from Egypt, Libya, Morocco, Tunisia and Yemen, together with UN agencies, the Ministry of Foreign Affairs of Finland as a donor of an IOM regional migration health project, a multilateral development bank, academia, international and regional organizations, and civil society gathered in Marrakesh, Morocco to deliberate on the nexus between climate change, migration and health (henceforth referred to as 'the nexus'). As a result of two-day discussions, the following recommendations are agreed upon to be presented at the 27th Conference of Parties (COP 27) of UNFCCC in Sharm El-Sheikh, Egypt.

1. Robust, comprehensive, up-to-date and disaggregated (gender and age) data are indispensable to better understand the nexus and address it effectively. Global-level scientific findings from the Sixth Assessment Report by the Intergovernmental Panel on Climate Change (IPCC) confirms that the climate change patterns of mobility are detrimental to health. Country and regional-level data on the nexus remain scarce, especially when cross-border movements are involved in migratory routes to and from the Middle East and North Africa (MENA).
2. Climate change contributes to water scarcity and food insecurity in some settings in MENA, which in turn significantly affect human health and human mobility. These should be prioritized by policy and programmes that address climate change health and migration.
3. Increasing urbanization will put a significant pressure on already stretched health systems in urban areas. Climate Resilient Development¹ is the key to make health systems responsive to the effects of climate change.
4. Climate change impacts on human health will be distributed unequally. Health and migration outcomes depend on the vulnerability, exposure and the adaptive capacity of individuals, communities and countries. Achieving the Universal Health Coverage (UHC) will reduce the severity of additional inequity caused by climate change especially for the most vulnerable including displaced populations and people living with disabilities. Tailored and affordable responses are needed when providing climate-sensitive health-care services and other related assistance (water, sanitation and hygiene access, food and shelter etc).
5. Migration can be an effective adaptation strategy when people can exercise their agency in the migration process and when migration takes place in a safe, orderly and regular manner. When migration is voluntary, it is more likely to be adaptive and reduce health risks. Diversification of regular migration pathways should be explored in anticipation of an increase in human mobility in the context of climate change.

¹ Climate Resilience Development is a solutions framework that successfully combines strategies to deal with climate risks (adaptation) with actions to reduce greenhouse gas emissions (mitigation) to lead to improvements for nature's and people's well-being – through reducing poverty and hunger, improving health and livelihoods, reaching a greater number of people with clean energy and water and safeguarding ecosystems (<https://www.ipcc.ch/report/ar6/wg2/about/frequently-asked-questions/keyfaq6/>).



6. Migration is more likely to be adaptive to climate change - and reduce health and other risks - if it is voluntary and well managed. While migration should not be considered a blanket solution to climate change, people should be enabled and supported to move if they chose to do so in the context of climate change. Restrictive and punitive migration policies should be avoided at origin, transit and destination countries.
7. The negative impacts of climate change on physical and mental health need to be averted, mitigated and addressed in a holistic manner, including non-communicable diseases (NCDs) as well as changing patterns of communicable diseases such as malaria, dengue fever, and cholera, amongst others. A One Health approach should be considered to address health issues holistically, as animal, plant and human health are interdependent.
8. Women, men, girls and boys experience the effects of climate change and migration differently because of existing gender roles and gender inequalities in social, economic and political spheres. Gender-specific consequences of the nexus need to be addressed holistically, including health needs (incl. reproductive health) with attention to the social determinants of health.
9. In line with the Cancun Adaptation Framework and the Sendai Framework for Disaster Risk Reduction for 2015-2030, it is imperative to build resilience of vulnerable individuals and communities in the face of climate-induced disasters. Actions should include risk assessments, early-warning systems, anticipatory actions, simulation exercises, necessary equipment support, and capacity building on preparedness, response to and recovery from disasters. Resilience building, climate change adaptation and risk reduction should take into account the voices of the affected communities as the end users and build on locally led solutions.
10. Putting in place early-warning systems at all levels including community-levels based on metrological and epidemiological data as well as initiating anticipatory actions to detect the emergence of diseases/illnesses linked to climate change is imperative. Such monitoring, surveillance and early warning systems should cover everyone, including migrants and displaced persons. It is important to develop an integrated mobility-sensitive disease surveillance, monitoring and response systems with effective mechanisms to disseminate actionable information among all relevant stakeholders. Community-level capacity building is also important, including awareness raising and psychosocial activities.
11. In line with the spirit of common but differentiated responsibilities, the developed countries' delivery and scaling up of climate finance is critical for the countries in the MENA region to address the nexus, together with mitigation and adaptation priorities. Mitigation and adaptation efforts need to go hand in hand to effectively address the nexus. Capacity building efforts need to be scaled up by adopting the whole of society approach, making use of local knowledge and solutions, building on south-south cooperation and engagement with the private sector. It will also be imperative for developed countries to support the developing countries accelerate the transition as well as developing climate resilient and sustainable health systems.
12. Migrants, displaced persons and the affected communities need to be involved in the process of deliberating on and formulating policies and strategies related to the nexus of climate change, migration and health. The whole of society approach needs to be applied to strengthen partnerships and collaboration among different actors at all levels.



13. Special needs of the countries in fragile and conflict-affected settings should be taken into account, as health needs of mobile populations are compounded in such settings. Context-specific support should be provided, linking humanitarian, peace building, and development efforts with climate action.