



Republic of Macedonia
Ministry of Environment
and Physical Planning

Sectoral report-Health Sector

Rapid assessment of the capacities of national institutions responsible for health protection and management in regards to climate variability and climate change adaptation

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This document intends to establish the level of development related to climate change adaptation in the health sector and to determine the congruence and confluence of the policies, programs, projects or activities between national priorities on climate change and general national priorities. No detailed assessment of the quality of the vulnerability analysis or the pertinence of the adaptation strategies was made. The scope of the results is limited to the documents reviewed.

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1 Design of the assessment

1.1 Description of the context in which the assessment was conducted

Preparation of the Third National Communication in the country is underway. In the First and Second ones, even though a chapter related to vulnerability assessment and adaptation that took into account the health sector was included, some difficulties were identified. These difficulties were mainly related to methodology, data availability and analysis of the impact of climate change on health and the vulnerability assessment. It is expected that with a review of these aspects and new studies, the Third National Communication will overcome those issues.

1.2 Description of the primary client of the assessment

This consultancy is on the interest of the United Nations Development Program (UNDP) to support the elaboration of the Third National Communication of the Republic of Macedonia. The UNDP has supported the government in the previous National Communications and continues to support the Third one. Even though the Ministry of Environment and Physical Planning (MEPP) is the national level institution responsible for the National Communications, including this rapid adaptation capacity assessment of the health sector, the results are also of the interest of the Ministry of Health and other national health authorities. The ministry and the other health authorities will be directly responsible for implementing adaptation measures to protect the population from climate change risks.

1.3 Definition of the objective of the assessment:

1.3.1 General objective

Assess the current capacity of the national institutions responsible for health protection and management to integrate climate change adaptation priorities into the health sector development, policies, strategies and relevant sector programs.

According to the scope proposed in the terms of reference (rapid capacity assessment), this capacity assessment cannot be used as a final assessment and should be considered as a starting point for a more detailed capacity assessment.

1.3.2 Specific objectives

1.3.2.1 Specific objective 1:

Determine the scope of the assessment and identify the technical and functional capacities to be assessed in order to integrate climate change adaptation priorities into the health sector development, policies, strategies and relevant sector programs.

1.3.2.2 Specific Objective 2

Assess the level of existing capacities and according to the results, generate preliminary recommendations for a capacity development program.

2 Assessment

2.1 Scope Definition

Effective and efficient climate change adaptation of the health sector is one of Macedonia's development objectives (The Climate Change and Health Committee of the Ministry of Health, 2011). In that order, a specific capacity development¹ program should be formulated to achieve that objective. To

¹ According to the UNDP, capacity development is "the process through which individuals, organizations and societies obtain, strengthen and maintain the capabilities to set and achieve their own development objectives over time"

do so, the first step to reach that objective is to identify what capacities already exist and what capacities are needed. That process is called a capacity assessment². In general terms, a climate change adaptive capacity assessment should provide a starting point for formulating a capacity development response to integrate climate change adaptation priorities into health sector development policies, strategies and relevant programs. The assessment will also facilitate the process of building political support for a climate change adaptation agenda in the health sector and offer a platform for dialogue among stakeholders.

According to the terms of this consultancy, a rapid capacity assessment will be carried out. Consequently, the scope of the assessment will be limited to identify the general adaptive capacities needed. A qualitative evaluation of the level of development of those capacities in the health sector, will also be carried out mainly through empirical information from the members of the National Committee for Climate Change and Health of the Republic of Macedonia. Climate change specific programs and other documents will also be reviewed.

2.2 Methodology

2.2.1 Base methodology definition

The UNDP capacity assessment framework (United Nations Development Program-Capacity Development, Group Bureau for Development Policy, 2008) was proposed and approved as the starting point in order to identify the methodology to be used. Other documents reviewed to identify the final methodology were:

- “Ready or Not: Assessing Institutional Aspects of National Capacity for Climate Change Adaptation.” WRI Report. Dixit, Aarjan, Heather McGray, Javier Gonzales, and Margaret Desmond. 2012. World Resources Institute, Washington DC.
- “Health Sector Self-Assessment Tool for Disaster Risk Reduction”. Pan American Health Organization, Washington, D.C., 2010
- “Climate Vulnerability and Capacity Analysis”. Handbook. CARE. Angie Dazé, Kaia Ambrose and Charles Ehrhart. 2009
- Protecting Health from Climate Change. World Health Organization- Pan American Health Organization Washington. Kristie Ebi, Peter Berry, Diarmid Campbell-Lendrum, Carlos Corvalan, Joy Guillemot. 2012

2.2.2 Rationale for conducting the capacity assessment

According to UNDP methodology, defining the rationale will help to identify the capacity development objective to be achieved and consequently will help define the main objective of the capacity assessment. The guiding question is: capacity for what? the answer is to provide a starting point for formulating a capacity development response to integrate climate change adaptation priorities into the health sector development policies, strategies and relevant programs. Nevertheless it is important to keep in mind that given the scope of this assessment the rationale is limited to the general objective.

2.2.3 Capacity assessment framework

The following dimensions were selected:

a. Points of entry:

Enabling environment: “elements that can facilitate or constrain the development capacity. Includes policies, rules and norms. These elements create incentives or constraints that determine the rules of the game for interaction within and across sectors” (United Nations Development Program-Capacity Development, Group Bureau for Development Policy, 2008).

² According to UNDP, capacity assessment is the process to evaluate the *existing capacity* of an institution or sector to perform key functions and deliver expected results.

In the previous report (Rapid assessment of the current status of the health sector in the Republic of Macedonia in the context of climate change) an assessment of the current status of the health sector in the country, in terms of the existing strategies, planning documents, studies, project reports, statistical documents related to climate change was done. Therefore, those results will be the input to identify the enabling environment.

- b. Functional capacities: refers to capacities that are important across various levels, sectors and themes.
 - a. Planning capacity: refers to the capacity to assess a problem and define a work plan and strategies to resolve it or diminish its impacts. Given that climate change is a long term dynamic process, its impacts are long and dynamic as well. The medium and long term planning capacities are of vital importance, as well as the capacity to evaluate implemented strategies in order to adjust them if necessary.
 - b. Coordination among sectors and within the health sector: refers to the capacity to work coordinately with different sectors and within the health sector, to identify and mobilize stakeholders, to mediate divergent processes and create partnerships and networks
- c. Technical capacities: refers to specific capacities associated to particular themes.
 - a. Knowledge of climate change risk: having as a reference the definition of climate change risk used by the IPCC (Risk as a function of vulnerability and hazard) this is the key to formulate a climate change adaptation strategy. The vulnerability assessment is an input to define the risk.

2.2.4 Tools

To initially set the scope of the capacity assessment, a decision matrix was designed (Annex 1). The matrix was discussed with the national health consultant and the UNDP National Communication coordinator.

A questionnaire was designed to identify the level of development (existing) in each functional and technical capacities (Annex 2). It had four sections as follows:

1. Policy and legal framework: the objective was to identify the level of knowledge about national and sector climate change policy and legal framework. Given the controversy about the existence of a National Policy about climate change, the information obtained from this section will be used to contrast with the results of the status assessment. The information all together will be used to assess the enabling environment.
2. Planning capacities: only question regarding the health sector were included. Long term planning capacity and strategies and policies implementation evaluation capacity were assessed.
3. Coordination among sectors: this section included specific questions for the health sector and for the national level. Questions used to evaluate the specific presence of inter-sectoral work coordination groups were included, as well as its level of functioning.
4. Knowledge of climate change risk: especial emphasis was made to identify the level of knowledge about the difference between concepts like impact assessment, risk assessment and vulnerability assessment.

The questionnaire was distributed by the national health consultant and the UNDP National Communication coordinator to the members of the National Committee for Climate Change and Health. A total of seven questionnaires were received. The results will be integrated with the findings of the previous report "Rapid assessment of the current status of the health sector in the Republic of Macedonia in the context of climate change".

Personal interviews during the field visit were also used as input for the capacity assessment (Annex 3). Finally, in addition to previous documents reviewed in the first report, the following documents were included to complete the assessment:

- Policy and Implementation Public Health System Reform. IBRD Loan No. 4733 Component 1. Thomas E. Novotny. 2008. Ministry of Health of the Republic of Macedonia.

- The former Yugoslav Republic of Macedonia: Health system review. Gjorgjev D, Bacanovic A, Cicevalieva S, Sulevski Z, Grosse-Tebbe S.. *Health Systems in Transition*, 2006; 8(2):1–98.
- Law on crisis management .

3 Results

3.1.1 Questionnaires results

Given the few questionnaires, no general conclusion could be drawn and the results should be interpreted as a preliminary approach which could be reviewed, improved and expanded in the future.

Policy and legal framework: with relation to a National climate change adaptation policy and national climate change adaptation legislation, approximately 71% did not answer these questions. Only one person specifically identified the Second National Communication as the Climate Change National Policy. Regarding the health sector climate change adaptation policy, the majority of people (85%) in a way or another identified the Climate Change Health Adaptation strategy and Action Plan as the health sector policy. The majority of the people (85%) did not identify a specific Health sector climate change adaptation legislation. Interestingly, it is possible to observe that when they were asked about the health sector in the national climate change adaptation policy, and about the congruence of the health sector adaptation policy with the national climate change adaptation policy, the majority of the people (71%) answered yes, even though they had previously and explicitly not identified a national climate change policy.

Planning capacity: in general people think that the health sector has the capacity to conduct long-term visioning policies (100%) and to translate those policies into strategies and actions (85%). Seventy five percent of the people think that the national health authorities have the necessary capacity to evaluate the outputs, outcomes and impacts of their policies and strategies. All people think that there is a system in place for reviewing and adjusting priorities or policies over time in the health sector. Only four people out of seven think that national health authorities have the capacity to advocate for health considerations in policies from other sectors.

Coordination among sectors: it seems that people recognize a good capacity of the government to perform intersectoral work (85%). People also identify an authoritative body that has been tasked with inter-sectorial coordination about climate change (85%) and whose responsibilities and coordination mechanisms are clearly defined and are working. Additionally the perception that the health authorities take into account the information, products and recommendations made by the coordination mechanism is high (85%).

Knowledge of climate change risk: Apparently, in the health sector the risk assessments are identified and differentiated from the vulnerability assessments, but this doesn't happen in the same way at a national level. The status of the national climate change risk assessment and the national climate change risk conceptual framework is not clear (28% did not answer and 42% do not know). In addition, confusion is observed between the terms because people identified the risk assessment without a vulnerability assessment, which is not possible (risk is a function of the hazard and the vulnerability).

3.1.2 Interviews

From the interviews, mixed opinions were expressed. In general terms, there was an agreement about the good short term planning capacity but not about the medium and long term. Similarly, there was a general consensus about the progress and improvements achieved to perform inter-sectorial work in

aspects of a direct competence of the health sector as a result of the participation of different sectors in the Climate Change and Health Commission and the personal commitment of its members. Nevertheless, disagreements were also observed about the implementation capacity of the Action Plan of the Climate Change health Adaptation Strategy. The disagreement was more evident when the strategy activities did not fall within the regular responsibilities of the corresponding institution and, therefore, additional resources were required for its implementation. Some confusion was observed between climate change risk impact and vulnerability. Those terms, were used indistinctly of the concept behind.

4 Conclusions and recommendations

4.1 Discussion and Conclusions

Regarding to the knowledge of climate change risk, confusions were still observed about the conceptual basis of the adaptations, specifically in the risk, vulnerability, and impact definitions. The Climate Change Health Adaptation Strategy and Action Plan is recognized in the health sector as the adaptation national policy. However, despite being a policy document, it does not define the conceptual framework in which the strategy was defined. Therefore, these terms lead to misunderstandings. Because of this situation, every time that a risk or vulnerability assessment is performed to define an adaptation strategy, different approaches might be used resulting in not comparable assessments which do not allow to estimate the impacts of the implemented adaptation measures.³ Although the conceptual framework can be dynamic and change over time, having it defined makes it possible to identify which are the necessary changes and also identify to what extent it is possible to compare one result to another. When the conceptual framework is not even defined, it is not possible to make this adjustment. Finally, the lack of alignment among concepts also generates disagreements with strategies and action plans, because each new assessment can be easily disproved or disputed. In conclusion the adaptive capacity related to climate change risk knowledge should be improved.

Again, the need to identify the explicit relation and connections among different strategies and policies is highlighted. This contributes to the sustainability of the strategies and policies and to visualize their common sense. People identify that the sector adaptation policy is aligned with the specific interests of the health sector and other sectors. Even though this connection is not specifically mentioned, when the policy documents are reviewed, sometimes it is possible to identify some alignment. But this situation could cause that some strategies are seen as isolated and aims exclusively to solve its own interests, without seeking for a common good. About this subject there will be no further explanations given that it was widely discussed in the previous report. Seemingly, the health sector has a high capacity to develop intersectoral work. Part of this capacity is noticeable in the conformation of the Climate Change and Health Committee and the creation of the Action Plan for the Climate Change Health Adaptation Strategy. However, it was also possible to observe that during the interviews that those activities which required resources or those activities which should have been implemented by sectors different to the health sector were the most backward.

It might be assessed if this situation is due to a high capacity to convene other sector in different subjects directly related to health, but also a low capacity to influence other sectors when their own activities represent a hazard or a benefit for health.

The planning capacity includes capacity to identify policy and strategies needs, formulate and implement those strategies and policies and finally evaluate them. The good planning capacity perceived by the people answering the questionnaire could be explained because of the Crisis Management

³ using the IPCC risk concept where risk is a function of vulnerability and hazard. Consequently the way of reducing the risk is reducing the vulnerability.

System work through the Crisis Management Center. Nevertheless, during the interviews, the planning capacity at the medium and long term was not so clear⁴. And as in many other countries, long term planning capacity is influenced by political movements. That is the case of the Health Strategy of the Republic of Macedonia. According to what was informed during the field visit, this strategy was never implemented given the political changes occurred after its promulgation. On the other hand, other strategies like the First and Second Environmental Action plan apparently were satisfactorily implemented. This medium and long term planning capacity requires a more detailed assessment.

The Republic of Macedonia has a national coordination mechanism (the National climate change committee) and a specific health sector coordination mechanism (Climate Change and Health Committee). Through the questionnaire it was identified that there is a high perception of intersectoral coordination in each of these committees. However the connection between the two is not clear. Apparently, in the health sector the risk and vulnerability assessments are identified and differentiated, but this does not happen in the same way at a national level.

4.2 Recommendations

4.2.1 General recommendations

4.2.1.1 Knowledge

The development of the conceptual framework about risk and vulnerability is highly recommended. Ideally, this should be made at a national level; however, because each sector at the moment has a different development level around the subject, a minimum conceptual framework should be defined for the health sector. The making of this conceptual framework will make it possible to define, additionally, a methodology to assess the hazard to health of climate change and the vulnerability of the communities. This altogether will lead to the identification of the sector adaptation plan. If the plan is a result of the conceptual framework and a methodology of risk and vulnerability assessment agreed by the whole sector, it will stand better a better chance of being implemented. The development of a conceptual framework and the definition of a risk and vulnerability assessment methodology require an extensive work of intra and inter-sectorial inquiry.

4.2.1.2 Institutional arrangements

Due to the complexity of the effects of climate change in any sector, intersectoral coordination mechanisms are required to generate effective adaptation strategies.

The duties, the responsibilities and the products of the intersectoral coordination instances should be clearly defined and agreed. It is necessary to define if the decisions there made are above the interests of every sector, with this, every institution and sector involved will be committed to comply with this decision and will also be committed to provide with the necessary resources for that purpose. Additionally, this will make it possible for these activities to become integrated to the development plans of every sector and, therefore, their sustainability will be improved and their dependence on external sources of funding will be decreased. Whereas, those activities or interventions which require additional work or resources have a high chance of not being executed.

Another option is, through a labor of consensus and agreements, to define strategies which integrate efforts and activities that are being implemented and can be used as strategies of adaptation

There is scarce available information and evidence regarding the effects of climate change and its action mechanisms. Consequently, this situation generates a great uncertainty about the adaptation measures. The benefit of these measures will be seen exclusively in a determined scenario of climate change.

⁴ People were asked if the HMI identifies a high probability of drought in one year from now, what they considered was the planning capacity of the health sector.

Therefore in most cases the adaptation measures include reinforcing or improving activities that are already being implemented.

4.2.1.3 Leadership

According to UNDP, leadership is “the ability to influence, inspire and motivate people, organizations and societies to achieve and go beyond their goals” (United Nations Development Program-Capacity Development, Group Bureau for Development Policy, 2008). Leadership is an important capacity to achieve an efficient and effective adaptation process. The health authorities have to improve their influence on other sectors, not only to integrate the health sector owns analysis and interventions, but to incorporate climate change health consideration in other sectors policies and strategies.

4.2.2 Recommendations for the short, medium and long term

Functional capacity	Recommendations		
	Short term	Medium term	Long term
Knowledge	<p>Develop a vulnerability and risk framework specifically for the health sector in agreement with all the members of the Climate Change and Health Committee.</p> <p>Define a vulnerability and risk assessment methodology developed in agreement with all the members of the Climate Change and Health Committee and in general with the health sector.</p> <p>Define a national research agenda that solve specific questions and uncertainties about the impact of climate and climate change on health. Adaptation to climate change requires a clear understanding of vulnerability. Most of the time, vulnerability assessment are full of uncertainties and many assumptions are made. Defining a research agenda that prioritize the needs of knowledge about climate and</p>	<p>Develop a vulnerability and risk framework specifically for the country</p> <p>Carry out a climate and climate change vulnerability and risk assessment for the health sector according to the methodology and framework defined.</p> <p>Identify vulnerability indicators that could be used as impact evaluation of adaptation strategies.</p> <p>Implement a monitoring system for impact evaluation.</p> <p>Periodical reviews of the vulnerability framework and assessment methodology developed according</p>	<p>Improve research capacities and research institutions interest in this matter.</p>

	<p>climate change and its effects on health, will improve the vulnerability assessment. In addition, given that climate change is on the front line of the international cooperation agenda, it is possible to find resources for research, consequently an agreed research agenda it is needed in order to make the best use of the resources according to the country interests.</p>	<p>to new knowledge made available or to the development of a national vulnerability and risk framework</p> <p>Establish a mechanism for periodical update of the research agenda.</p>	
Institutional arrangements	<p>Improve dissemination of information within the health sector and among other sectors. Apparently there is some confusion about the National Climate Change Policy and regulation associated with it. If the country's decision is to assume that the National Communications will be the National Policy about climate change, this should be better communicated to sectors.</p> <p>Identify the explicit relation and connections among different strategies and policies and consequently improve the sustainability. Currently the people involved in the development of the strategies or policies are still in close contact with this matter and it is clear for them the connection within strategies and with country</p>	<p>Establish inter-sectorial cooperation mechanism for the medium and long term planning. Adaptation to climate change requires medium and long term planning capacity. The Crisis Management Center apparently has a good short term planning capacity, but a specific mechanism for medium and long term inter-sectorial planning capacity mechanism should be considered. It is important to review the existing mechanism that could be used in order to avoid creating a new one.</p>	<p>Incorporate climate change risk assessment in all development objectives of the country</p> <p>Assume climate change as a State Policy and not a Government Policy⁵. Long term planning policies and strategies that are independent of the specific interest of the government in place.</p>

⁵ The latter reflects a strategy of a particular ruling party and has a temporal duration (related to the stay of the party in power) while a state policy is the result of a consensus among different parties and whose horizon is more long-term government policy.

	<p>development interest. Nevertheless, it is important to clearly specify this in the documents. Perhaps when new lines of work are included or professional are incorporated to the process, the connection will not be so clear.</p> <p>Specify the regulation and norms related to climate change strategies.</p>		
Leadership	Achieve the participation of the health sector in the decision making process of other sectors (related to climate and climate change)	The health sector should be positioned as leader in the climate change adaptation agenda of the country. Given that most of the time, people's health will be affected given the impacts of climate change on other sectors and, on the other hand, actions and adaptation measures from other sectors will affect (positively or negatively) directly or indirectly the health of the population, the health sector should be included in the decision making process of other sectors, in climate change matters.	The health sector could be strengthened and reduce its dependence on the cooperation of multilateral organizations. Consequently the health sector assumes more direct responsibility and guarantees the sustainability

5 Bibliography

The Climate Change and Health Committee of the Ministry of Health. (2011). *Climate change health adaptation strategy and action plan of the former Yugoslav Republic of Macedonia*. Skopje: World Health Organization.

United Nations Development Program-Capacity Development, Group Bureau for Development Policy. (2008). *Capacity Assessment Methodology*.

Annex 1

Capacity for why? (high level objective)					
UNDP: Provide a starting point for formulating a capacity development response, build political support for an agenda, offer a platform for dialogue among stakeholders		OR	Provide insight into operational hurdles in order to unblock a programme or project (National Health Adaptation Strategy, NHAS)		
Capacity for whom					
Enabling environment (the regulation and the role of each institution)		Selected stakeholders (organizations)		Ministry of Health	Selected stakeholders NHAS
All stakeholders involve in the NHAS					
Capacity for what					
climate change adaptive capacity*		Risk assessment capacity		Vulnerability assessment capacity	
Capacity to implement the NHAS					
Functional and technical capacities					
Knowledge of climate change risk (UNDP: Assess a situation, create a vision, prioritization)	Knowledge of the hazard (climate change scenarios)	Knowledge of the exposure		Ability to integrate and work coordinately with different sectors in the planning and implementing process (UNDP: engage stakeholders)	
Ability to plan (policy, programs, strategies, legislation) for the medium and long term. (UNDP: Formulate policies and strategies)	Knowledge of the vulnerability or capacity to identify and measure it (indicators and conceptual frame).	Knowledge of the sensitivity		Ability to mobilize information and knowledge	
Ability to integrate and work coordinately with different sectors in the planning and implementing process (UNDP: engage stakeholders)	Ability to integrate and work coordinately with different sectors in the planning and implementing process (UNDP: engage stakeholders)	Knowledge of the adaptive capacity			
Ability to review and adjust policies (UNDP: evaluate)	Health data	Health data			
Ability to mobilize information and knowledge	Climate data	Climate data			
		Ability to integrate and work coordinately with different sectors in the planning and implementing process (UNDP: engage stakeholders)			

Annex 2
Capacity assessment

1. Policy and legal framework

In terms of climate change adaptation, what is the status of the following?						
	Implemented	Promulgated	Being developed	To be developed	Other	Don't know
National government						
National climate change adaptation policy (if so, please provide the policy reference)		Reference	Reference			
National Climate change adaptation legislation (if so, please provide the legislation reference)		Reference	Reference			
Health sector						
Health sector climate change adaptation policy (if so, please provide the policy reference)		Reference	Reference			
Health sector climate change adaptation legislation (if so, please provide the legislation reference)		Reference	Reference			
Further comments or explanations						

With respect to your national policies, which of the following statements are accurate?							
	Yes	No	In development	Planning process	Not applicable	Don't know	
National government							

The National Climate change adaptation policy* includes the health sector *if there is one, other way answer not applicable						
Health sector						
The Health sector climate change adaptation policy* is intentionally articulated with the health sector priorities and general strategies *if there is one, other way answer not applicable						
Health sector climate change adaptation policy* is intentionally congruent with national adaptation climate change policy* *if there is one, other way answer not applicable						
National health related legislation contain provisions for climate change adaptation (if so, please provide the reference)						
Further comments or explanations						

2. Planning Capacities

With respect to the national planning capacities, which of the following statements are accurate?						
	Yes	No	In development	Planning process	Not applicable	Don't know

The health authorities have the capacity to conduct long-term visioning policies						
The health authorities have the capacity to translate long term visioning policies into operational (concrete) objectives and actions						
National health authorities have the necessary capacity to evaluate the outputs, outcomes and impacts of their policies and strategies						
There is a system in place for reviewing and adjusting priorities or policies over time in the health sector						
National Health authorities have the capacity to advocate for health considerations in policies from other sectors						
Further comments or explanations						

3. Coordination among sectors

With respect to work among sectors, which of the following statements are accurate?						
	Yes	No	In development	Planning process	Don't know	
National government level						
The government has the capacity to promote and facilitate intersectorial work? (Specific spaces for intersectorial meeting,						

intersectorial policies) If yes, please provide example					
The government has the capacity to develop policies and legal and regulatory frameworks and mechanisms that ensure multi-stakeholder participation					
An authoritative body has been tasked with inter-sectorial coordination about climate change					
If previous answer is yes:					
<ul style="list-style-type: none"> Responsibilities are clearly defined 					
<ul style="list-style-type: none"> A clear coordination mechanism have been established 					
<ul style="list-style-type: none"> The coordination mechanism is functioning effectively 					
<ul style="list-style-type: none"> Participants report regularly to the organizations they represent 					
<ul style="list-style-type: none"> The health authorities takes into account the information, products and recommendations made 					
<ul style="list-style-type: none"> Involve all stakeholders 					
Health sector					
National health authorities have the capacity to develop policies that ensure multi-stakeholders participation					
National health authorities have the capacity to develop legal or regulatory frameworks that ensure multi-stakeholders participation					
National health authorities have the capacity to develop mechanisms that ensure multi-stakeholders participation					
In the health sector, an authoritative body has been tasked with inter-sectorial coordination about climate change					
If previous answer is yes:					
<ul style="list-style-type: none"> Responsibilities are clearly defined 					

• A clear coordination mechanism have been established					
• The coordination mechanism is functioning effectively					
• Participants report regularly to the organizations they represent					
• The health authorities takes into account the information, products and recommendations made					
• Involve all stakeholders					
Further comments or explanations					

4. Knowledge of climate change risk

In terms of climate change adaptation, what is the status of the following?						
	Done	Being developed	To be developed	No action	Other	Don't know
National government level						
National Climate change risk assessment						
National Climate change vulnerability assessment						
National climate change risk conceptual framework*						
National climate change vulnerability conceptual framework*						
Health sector level						
Health sector Climate change risk						

assessment						
Health sector Climate change vulnerability assessment						
Health sector climate change risk conceptual framework*						
Health sector climate change vulnerability framework*						
Further comments or explanations						

*Conceptual framework: document that delimits definitions and concepts.

In terms of climate change adaptation in the health sector, what is your level of agreement with the following statements?					
	Strongly agree	Agree	Disagree	Strongly disagree	Don't know
The health sector is prepare to act in response to climate change risks					
The health sector has sufficient information to face the climate change risks					
The health sector authorities is sufficiently empowered to lead the sector in matters of climate change adaptation					
The health policy framework about climate change adaptation is adequate					
The national health authorities have capacity to manage relations with key stakeholders inclusively and constructively to act in response to					

climate change risks					
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Further comments or explanations

Annex 3
Salua Osorio meetings in and around health sector

19.02.2012

Host : Prof. Dragan Gjorgjev

- 9.00-10.00 **Dr. Vesna Nedelkovska** (Chief of **Pre hospital Emergency Health Care units** – Skopje - Member of the National CC and Health Committee)
- 10.00-11.30 **Prim. Dr. Jovanka Kostovska** (**Ministry of Health** , President of the National CC and Health Committee)
- 11.30- 13.00 **Prof. Fimka Tozija** (Chief of the Lecturer Desk for Social Medicine, **Medical Faculty** – Skopje, public health expert)
- 13.00-14.00 **Mrs. Marija Milkova, Dr. Bogdan Karovski** – **Crisis Management Center** – members of the National CC and Health Committee)
- 14.30-15.30 **Mr. Pece Ristevski** – **Hydro meteorological Institute** - member of the National CC and Health Committee)

20.02.2013

- 10 :00-12 :00 **Prof. Jovanka Karagjinska Bislimovska** (member of the National CC and Health Committee) , Dr. Snezana Milkovska, Assoc. Prof. Jordan Minov, Ass. Dragan Mijakoski, Ass, Sasho Stoleski/ INSTITUTE OF OCCUPATIONAL HEALTH
- 14.00-15.20 Prof. **Mihail Kochubovski** – **Institute of Public Health, dr.Vera Menkovska Chief Health Inspector** (members of the National CC and Health Committee) Host prof. Gjorgjev
- 15.30-16.30 – **Ms. Margarita Spasenovska** – **WHO Office, Skopje** (accompanied by Prof. Gjorgjev)