

# KAILA

## PACIFIC VOICE FOR ACTION ON AGENDA 2030

### *Strengthening Climate Change Resilience through Reproductive, Maternal, Newborn, Child and Adolescent Health*

**We, the Pacific Islands Ministers, gathered in Nadi, Fiji, on 28 October 2015 to deliberate on strengthening climate change resilience through reproductive, maternal, newborn, child and adolescent health (RMNCAH);**

**Recall and Reaffirm;** The Pacific Regional declarations and commitments related to climate change, in particular, Majuro Declaration on Climate Leadership (2013) Moana Declaration (2013), Samoa Pathway (2014)<sup>1</sup>, Yanuca Island Declaration on Health In Pacific Island Countries and Territories (2015) and the Suva Declaration on Climate Change (2015); Reaffirm our commitment to other relevant United Nations conventions, conferences and summits on sustainable development<sup>2</sup>.

**Commit to the Sustainable Development Goals (SDGs)** as critically important to the future of Pacific island people, planet, peace and prosperity. We reaffirm our contribution and commitment with other UN member states to the 2030 Agenda for Sustainable Development - an agenda of the people, by the people, and for the people.

**Acknowledge** the importance of the Global Strategy for Women's, Children's and Adolescent's Health (2016-2030) that reflects a new consensus on the need to better prioritize reproductive, maternal, newborn, children's and adolescents' health (RMNCAH) in humanitarian or fragile settings such as natural hazards, extreme climatic conditions, or disease outbreak that impact our islands;

**Recognizing** the real and potential impacts of climate variability on health systems as an immediate challenge in the Pacific, commit to the Healthy Islands vision as a unifying theme to guide health and development through community empowerment and an engagement approach in programme delivery, led by those who best understand how to support their communities;

**Ensure** the Pacific voice is heard in global conversations, so that our experience may guide others and our specific concerns are addressed, including seeking novel funding sources;

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<sup>1</sup> Small Islands States (SIDS) ACCELERATED MODALITIES OF ACTION

<sup>2</sup>The Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), Convention on the Rights of the Child (CRC), International Conference on Population and Development (ICPD), Convention on the Rights of Persons with Disabilities

**Recognizing** the particular vulnerabilities of Pacific islands, the importance of engaging, as equal partners and participation of civil societies, women, youth and persons with disabilities, in all efforts towards building climate change resilience - leave no one behind. This includes providing support to inclusive sustainable development strategies, and responding to specific needs of persons with disabilities, vulnerable and marginalized groups.

**Agreed** that as we protect our environments and livelihoods from the impact of Climate Change, we also will ensure the protection of women, children and adolescents, including their mental health, during and after natural disasters is reflected in our national policies and guidelines.

**Acknowledge** that sexual and reproductive health and rights (SRHR) is an integral part of National development strategies, National plans and public budgets, with clearly identifiable resource allocations and expenditures. This includes enhancing support and protection for young women and girls through improving access to education, information and SRH services.

**Affirm** the centrality of advancing gender equality and women's empowerment in the context of the new climate agreement and post-2015 Disaster Risk Reduction Framework, for a truly transformative, sustainable and inclusive development path.

**Recognizing** the importance of the **renewed global strategy for Women's, Children's and Adolescents' health** introducing a strategic focus on fragile and humanitarian settings, and noting its key messages, including:

- More than half of all maternal, newborn and child deaths occur in humanitarian settings, including conflict and post-conflict situations, transnational crises, countries that have experienced one or more serious natural disasters and situations of protracted socio-economic and political instability.
- Climate change will continue to aggravate chronic crises such as food and water insecurity, placing more people at risk of hunger and our women, children to malnutrition. .
- Health challenges are particularly acute among mobile populations, internally displaced communities and those living in islands, including low lying islands whose livelihoods are constantly threatened by Climate Change.
- Women and adolescent girls in particular are vulnerable in such settings through exclusion, marginalization and exploitation, including sexual and gender-based violence.
- Applying a sustainable, human-centered approach to humanitarian efforts in crisis situations, whether short or protracted in duration, can strengthen the resilience of women, children and adolescents and their communities.

Need to localize the 2030 Agenda and key climate agreements in the context of our joint and country specific realities, make central our commitment to ensure women, adolescents and children are not left behind and are engaged as active partners in the fullest realization of the scale of the Pacific 2030 Agenda.

We call on the international community to partner with us to this end.

We call on the 2015 Paris Climate Change Agreement<sup>3</sup> to make explicit provisions to ensure and enhance decisive national, regional and global action for innovation, support and investment in gender and age sensitive people-centered adaptation measures.

**In this, we highlight the context of climate change impacts on the Pacific’s women, children and young people:**

**1. Women, children and young people are disproportionately affected by climate change impacts**

While climate change threatens everyone, it has become increasingly evident that it brings differential impacts on the women and girls, children and young people. We recognize that:

- a) Women and men experience key dimensions of climate change’s impacts differently. For example,
  - i. Discriminatory gender norms reduce or complicate women’s access to social and economic resources, which in turn reduces their resilience to disasters and other impacts from climate change.
  - ii. Women are often the primary managers of household resources, such as food, water and fuel. In settings where climate change reduces access to these means, the impacts on women are direct and immediate.
  - iii. Many women make their living in ways that are highly vulnerable to climatic variations, such as agriculture and fisheries.
  - iv. Women are further disadvantaged when there is limited access to critical climate information, lack of access to training in hazard-warning signals, responsibility for dependents and lack of decision-making power.
  - v. The specific roles, needs and rights associated with reproductive, maternal, newborn, child and adolescent health, are often invisible in adaptation planning and response processes.

**2. Women, children and young people are key partners in adaptation to the impacts of climate change<sup>4</sup>**

- a) Women are not just the “victims “of climate change; they are “power houses”<sup>5</sup> behind adaptation and building family and community resilience:
  - i. Promoting women’s participation in the design of climate friendly changes and ensuring their access to the ability to implement those changes enables them to improve their lives, their families and communities.
- b) The future of humanity and our planet lies also in the hands of today’s younger generation calling for our investment in our young people as agents of change.

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<sup>3</sup> Convention of the Parties (COP21), Paris, Nov 2015

<sup>4</sup>Children and young women and men are critical agents of change – para. 51, SDG Outcome Document

<sup>5</sup> HRM Princess Sarah Zeid, Kingdom of Jordan; Nadi Fiji Islands, 26 Oct 2015

- c) Need to scale up the delivery of services using comprehensive school safety, decentralized and community-based health and nutrition services.
  - i. Water, healthy foods, sanitation and hygiene services that considers all risks, specifically risks associated with climate change, and to build adaptation capacity of communities to deal with shocks and stress.

**We the Pacific Islands Ministers following consultation with technical experts and agreement of stakeholders therefore call for action in the following:**

- 1. The imperative of gender equality and women's empowerment as a priority to our national health plans and programmes in the context of climate change**
  - a) To better ensure the realization of a just and equitable global climate regime that will shape gender-responsive climate actions in PICs, women and girls must be able to exercise their right to be agents and beneficiaries of climate change action and fully participating in shaping these actions and responses.
  - b) Strengthen human resource capacity and building competencies for RMNCAH through a variety of training programmes in different settings, as integral to increasing public awareness and health system response.
  
- 2. Robust gender analysis, concrete steps for gender mainstreaming and evidence based monitoring of RMNCAH**
  - a) Take concrete steps to advance gender equality, women's empowerment and the realization of their human rights;
  - b) Evaluate the integration of gender and age considerations into adaptation and making improvements if necessary;
  - c) Collect sex and age disaggregated data on women, children and adolescents in relation to climate change and the impact on their health and ensure this data is used in vulnerability and adaptation assessments.
  
- 3. Strengthening participation of women, children and adolescents in the formulation and implementation of the RMNCAH components of National and Regional Adaptation Plans**
  - a) Ensure participation and integrate perspectives of women, children and adolescents drawing on their unique traditional adaptation knowledge and local coping strategies in the process;
  - b) Undertake community outreach to ensure that different stakeholders understand the gender dynamics of climate change adaptation.
  
- 4. Strengthening strategic focus on RMNCAH as an instrument for enhancing the contribution of women, children and adolescents to effective sustainable climate adaptation**

- a) Tailor and implement adaptation priorities and activities based on an understanding of gender and age dynamics and the potentially disproportionate impacts of climate change on women, children and adolescents;
- b) Increase support and protection for girls and young women, including enhancing access to education and comprehensive mechanisms for ensuring their access to SRH information and services;
- c) Prioritize couples and individuals' access to contraception and information to make free and informed decisions about the number and timing of children, thereby preventing unintended and unplanned pregnancies, and reducing the need for abortion;
- d) Eliminate all forms of violence against women and children integrate responses to gender-based violence in all SRH programmes and services before, during and post disasters;
- e) Prioritize adolescent SRHR, including through comprehensive sexuality education, and establish accessible SRH and mental health services for young people in schools and other institutions.
- f) Scale-up national efforts to halt the spread of STIs and HIV, and meet the goal of ensuring universal access to STIs and HIV, education, prevention, treatment, care and support, free of discrimination;
- g) Strengthen services for delivery of required health care and urgent deployment of humanitarian and relief supplies for RMNCAH during an emergency, natural hazards, or disease outbreak to vulnerable populations living on outer islands and difficult-to-reach areas;
- h) Recognize the heightened social and economic risk factors for Non-Communicable Diseases confronting the peoples of the Pacific, and taking action to strengthen prevention and control of these diseases;
- i) Targeted public expenditures to ensure benefits for women, children and adolescents and apply gender equality indicator for tracking public expenditure on RMNCAH; and
- j) Strengthen public-private partnerships and south-south cooperation for RMNCAH in countries to support sustainable funding mechanisms, response and knowledge-sharing.

Adopted in Nadi, Fiji on 28 October 2015 by:

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Minister for Health

**Vanuatu**

Ms Dorosday Kenneth  
Director, Ministry of Justice & Community Services

**Kiribati**

Hon. Martin Moreti  
Minister for Labour and HR Development

**Niue**

Hon. Pokotoa Sipeli  
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Annex: Country Delegation officials participating in the technical consultations from 26-27 Oct 2015