ANTALYA INITIATIVE FOR HEALTH RESILIENCE (AIR)

BACKGROUND

1. Climate change as a systemic health challenge

Climate change is no longer a distant or sector-specific risk. It represents a rapidly evolving, systemic challenge to human health, affecting disease patterns, growing demand on health systems, and creating increasingly complex conditions for the delivery of essential services. Health systems must therefore become more adaptive and responsive as scientific evidence continues to expand regarding the wide-ranging health impacts of climate change. These include heat-related illness, respiratory and cardiovascular disease, vector-borne diseases, mental health impacts, food and water insecurity, and disruptions to health services caused by extreme weather events.

The World Health Organization (WHO) has characterised climate change as a fundamental threat to human health, highlighting its growing impact on the functioning and resilience of health systems worldwide. In this context, resilience refers to the ability of health systems to anticipate, absorb, adapt to, and transform in response to climate-related shocks and long-term stresses, while maintaining essential services and protecting population health.

WHO estimates that, between 2030 and 2050, climate change could cause approximately 250,000 additional deaths annually from malnutrition, malaria, diarrhoeal disease, and heat stress alone. Health systems, particularly those in vulnerable and resource-constrained settings, are already experiencing growing pressure, including disruptions to service delivery, increased demands on health workforces, damage to infrastructure and rising costs associated with climate-related risks.

2. The implementation gap in climate-resilient health systems

Although health has gained increasing prominence in recent COP decisions and climate negotiations, further efforts are needed to translate this political momentum into a comprehensive, implementation-oriented framework for adaptive and climate-resilient health systems. Existing initiatives have contributed important political commitments, technical guidance, and pilot programmes, providing a strong foundation for broader and more systemic implementation.

An important opportunity remains to further integrate climate-health strategies into national resource allocation, health-sector investment and wider health-system strengthening processes. In many countries, implementation continues to be supported primarily through individual projects and donor-funded programmes, with scope to strengthen coordination across institutions and sectors and promote longer-term, nationally anchored approaches.

Other challenges include the availability and coordination of climate-health finance, the integration of health considerations into national climate policies and planning processes, the climate resilience of health infrastructure, workforce and institutional capacity, and the further development of climate-health surveillance systems, interoperable data platforms, and localised risk assessments.

COP31 provides an opportunity to build on growing political recognition of the interconnections between climate change and health and accelerate coordinated, implementation-focused action. Türkiye's health reforms since 2002, including its emphasis on preparedness for crises and public health emergencies, its experience in responding to COVID-19 and the Kahramanmaraş

earthquakes, the continued modernisation of health infrastructure through city hospitals, and the development of digital health infrastructure aimed at supporting equitable service provision across urban and rural areas, offer relevant experience for advancing this agenda.

Located at the intersection of Europe, Asia and the Mediterranean Basin, Türkiye is exposed to a range of climate-related risks, including extreme weather events, droughts, wildfires, floods, water scarcity, and climate-sensitive public health threats. These conditions have reinforced the importance of continuously strengthening the resilience, adaptability, and preparedness of the country's health system.

Türkiye also brings experience in disaster preparedness, emergency health coordination, health-system modernisation, manufacturing and logistics, digital health, and sustainable infrastructure. This combination of experience positions Türkiye to convene diverse partners, facilitate the exchange of knowledge and good practices, and contribute to collective efforts to advance climate-resilient health systems through the Antalya Initiative for Health Resilience.

OBJECTIVE

The Antalya Initiative for Health Resilience (AIR) is focused on advancing dynamic and resilient health systems as a practical response to the growing health risks created by climate change. Building on existing global climate-health efforts, the initiative aims to translate political recognition into implementation-oriented guidance and support for countries.

AIR responds to the increasing pressure climate change places on health systems, including heat-related illness, respiratory and cardiovascular disease, vector-borne disease, mental health impacts, food and water insecurity, and operational disruptions caused by extreme weather events. Its output will be voluntary-based Implementation Framework for Dynamic and Resilient Health Systems, designed to provide practical, measurable, and implementation-oriented guidance across key health system dimensions, which also follows the WHO Operational Framework for Building Climate Resilient and Low Carbon Health Systems.

AIR aims to accelerate the implementation of this framework by connecting existing knowledge, country experience, technical expertise, financing, and innovation around a common framework for dynamic and resilient health systems, and thus aims to support capacity-building efforts in this field. Rather than creating an additional layer of guidance, the initiative will bring together and build on what already exists, identify approaches that have proven effective in practice, and facilitate mutual learning among countries and partners. By linking practical experience and technical knowledge with implementation capacity and available resources, AIR aims to shorten the distance between commitment and action, helping countries move more rapidly from planning to implementation and from implementation to scale.

Experience sharing will therefore be a core function of AIR. The initiative will provide a structured space for countries and partners to exchange good practices, lessons learned, implementation challenges and practical solutions. Particular emphasis will be placed not only on what needs to be done, but also on how countries have implemented relevant measures, what has worked, what has not, which factors have enabled implementation, and which approaches could be adapted to other national contexts.

INITIATIVE OUTLINE

1. Implementation pillars

AIR is designed as a complementary initiative, rather than an alternative to or replacement for, the existing work of the World Health Organization (WHO), the Alliance for Transformative Action on Climate and Health (ATACH), and other established climate and health initiatives focusing on three pillars. It will build on the normative guidance, technical frameworks, country support mechanisms, and knowledge-sharing platforms already developed through these efforts.

Pillar 1	**Policy Coherence and Implementation Support** Develop a COP31-aligned global framework or roadmap for defining dynamic and resilient health systems, supporting countries in translating climate-health commitments into national planning and implementation processes.
Pillar 2	**Climate-Informed Health Intelligence and Digital Innovation** Promote integrated climate-health information systems, predictive analytics, early warning systems, data-driven decision-making, and digital health solutions to strengthen preparedness, response, and resilience.
Pillar 3	**Capacity and Implementation Support** Support the mobilisation, accessibility, and effectiveness of climate-health resources, while developing technical capacity for health professionals, policymakers, and emergency response actors.

2. Delivery

The outputs and lessons generated through AIR will be shared through relevant WHO and ATACH mechanisms and channels, connecting the initiative's practical insights with the wider global climate and health community. In this way, AIR will complement existing mechanisms by helping to shorten learning curves, support the adaptation of proven approaches to different country contexts, and accelerate the uptake and scaling of effective solutions. The experiences and good practices collected through AIR over the course of the year are intended to provide substantive input to the global climate and health agenda leading up to COP32 and beyond.

Policy coherence and implementation support

The Antalya Initiative for Health Resilience (AIR) will be structured around the development and delivery of a COP31-aligned Implementation Framework for Dynamic and Resilient Health Systems. The framework will translate existing climate-health commitments into practical, measurable, and actionable guidance for countries, with a focus on implementation, resources, technology, capacity-building, and governance.

Climate-informed health intelligence and digital innovation

Through a structured process of country engagement, AIR will collect practical experiences and good practices relating to policies, programmes, innovations, financing approaches, and implementation solutions that demonstrate how health systems can become more dynamic and resilient in the face of climate change.

Capacity and implementation support

Particular emphasis will be placed on facilitating peer-to-peer learning and connecting insights from countries with implementation experience to the needs of those seeking to advance or scale their efforts. The objective is not to promote a single model for climate and health action. Countries differ

in their health systems, institutional arrangements, resources, climate risks, and development contexts. AIR will therefore promote learning and adaptation rather than replication. By making practical experience more accessible and connecting countries facing similar challenges, AIR will help reduce duplication, shorten learning curves, and accelerate the uptake and scaling of effective approaches.

GOVERNANCE STRUCTURE AND PARTNERS

AIR will be launched by the Ministry of Health of the Republic of Türkiye in the context of COP31 in close cooperation with UNFCCC Secretariat. WHO/ATACH will support the operational coordination of the initiative and encourage Parties to share their experiences in the pool. In addition, ATACH will take the role to document, synthesize, systemize, and share the collected knowledge and experience.

The initiative development was informed by consultations and exchange with stakeholders engaged in *Axis 5: Fostering Human and Social Development* of the Global Climate Action Agenda, the Antalya Initiative for Health Resilience (AIR) will support efforts to advance the Global Climate Action Agenda's objectives.

PARTICIPATION

AIR will bring together governments, ministries of health, public health authorities, COP31 country delegations, UN agencies, financial institutions, intergovernmental organisations, non-state actors and academia around a shared vision for climate-resilient, sustainable and equitable health systems.

Parties wishing to participate in the initiative are kindly requested to submit their request through ATACH, by their official e-mail address, by using the illustrative template in the annex of the AIR Terms of Reference. On the other hand, the address below may be used by interested stakeholders to express their support of the initiative.

CONTACT

Ministry of Health of the Republic of Türkiye
E-mail: disab.uk@saglik.gov.tr