Terms of Reference
Public Health Specialist
for the project
"Strengthening Adaptation Planning and Coordination in Namibia (NAP)"

Implementing Partner	Namibia Nature Foundation (NNF)
Oversight Body	Ministry of Environment, Forestry and Tourism (MEFT) – Climate Change Unit
Funding Source	Green Climate Fund (GCF)
Duty Station	Namibia (with fieldwork as required)
Consultant Type	Individual
Level of Effort	Part-time/Consultancy basis
Date of Issuance	30 March 2026

I. Background and Context

The Project, NAM-RS-007 "Strengthening Adaptation Planning and Coordination in Namibia" is a three-year project funded by the Green Climate Fund (GCF). It aims to ensure a strategic approach to planning and implementing adaptation actions that enhance resilience to climate change in Namibia at national and subnational levels, and across all sectors, ecosystems and livelihoods. The Ministry of Environment, Forestry and Tourism (MEFT) is the National Designated Authority (NDA) providing strategic oversight for the project, and the Namibia Nature Foundation (NNF) serves as Delivery Partner. A Project Management Unit (PMU), housed at the NNF, will be responsible for the implementation of the NAP.

The Project has four overarching outcomes:

- Outcome 3.1 - Adaptation planning and institutional coordination is strengthened
- Outcome 3.2- An evidence basis is used to design adaptation solutions for maximum impact
- Outcome 3.3 - Private sector engagement in adaptation is catalysed
- Outcome 3.4 - Adaptation finance is increased

The NAP will be informed by a robust and scientific process to evaluate likely future climate change impacts, assess vulnerabilities across all levels and sectors, and explore the economic costs of inaction vs. the costs of adaptation. It will seek to identify adaptation strategies at national, subnational and sectoral levels, integrate adaptation into planning, enhance integrated monitoring, evaluation and learning, and ensure access to climate change and adaptation information and data for all stakeholders. It will further seek to enable private sector engagement in climate adaptation through enabling policy frameworks, information and incentives, as well as to scale up finance for adaptation from international and domestic, public and private sources and through the strategic use of public funds to de-risk private investment. Ultimately, the purpose of the NAP is to reduce vulnerability to the impacts of climate change by building adaptive capacity and resilience across key sectors and at different levels.

II. Climate Change and Public Health

Climate change poses a significant threat to public health, acts as a "threat multiplier" that exacerbates existing health challenges and introduces new ones through both direct and indirect pathways. Direct impacts include increased morbidity and mortality from extreme weather events such as droughts, heatwaves, floods, veldfires, and storms, which cause immediate injuries, deaths, and humanitarian emergencies. During prolonged drought periods, food insecurity is amplified, leading to hunger, malnutrition, especially for children under five. Flooding in Namibia, particularly in the northern and northeastern regions has adverse public health impacts which are amplified by poor sanitation, access to potable water, overcrowding in relocation camps, and pre-existing vulnerabilities like high HIV prevalence and malnutrition. Floods also contaminate water sources, damage sanitation infrastructure, and exacerbate public health risks to open defecation, leading to outbreaks of diarrheal diseases, cholera and other conditions such as Hepatitis A and E. Standing water from floods also creates ideal breeding sites for mosquitoes and other vectors leading to increased incidence of malaria. Reduced air quality from veldfires affect persons with respiratory conditions.

Mental health is another critical dimension, with climate-induced disasters causing anxiety, depression, and increased substance abuse. Displacement from extreme weather further erodes social cohesion, access to support systems, and drives rural-to-urban migration. Vulnerable populations bear the disproportionate burden to climate change impacts: pregnant and lactating women, children, older adults, migrants, displaced persons, and those with pre-existing health conditions.

Health systems face immense strain, with increased demand for services during crises while infrastructure is damaged or overwhelmed, hindering universal health coverage and response capabilities. Flood damage and limit access to health facilities cutting off access to essential services. This particularly affects people with chronic conditions (e.g., HIV/AIDS, tuberculosis, diabetes), interrupting antiretroviral therapy (ARVs), TB treatment, insulin, and other medications.

Climate change presents a fundamental threat to human health and is one of the most directly and severely affected sectors, making its explicit inclusion in National Adaptation Planning critical to protect populations and achieve sustainable outcomes. The Public Health Specialist will ensure that public health climate risks are addressed in the NAP Strategy and Action Plan.

III. Objectives of the Consultancy

The NAP Public Health Specialist is being recruited to strengthen climate resilient health policy and systems that can anticipate, absorb and recover from climate shocks, while continuing to deliver essential services. The Public Health Specialist will provide sector-level expertise across

the various NAP deliverables, which includes interpreting climate risks and their impacts on the public health system; and ensuring that health-related climate vulnerabilities are adequately captured and analysed to inform the NAP Strategy and Action Plan. The Public Health Specialist will act as a bridge between technical data and policy/practice, ensuring that findings are usable by decision-makers. The Public Health Specialist will assess institutional capacity gaps including data, planning, financing, and integrated monitoring, evaluation and learning (IMEL). The Public Health Specialist will also play an important role in coordinating stakeholders in the sector, including ministries, academia, civil society and other technical experts, and in facilitating meetings.

Specifically, the Public Health Specialist will **contribute to** the following Outputs:

Output 3.1.2 The institutional framework for coordinating climate adaptation is strengthened

- Lead sector stakeholder engagements and coordinate sector groups (including facilitation of meetings).
- Liaise with focal persons in sector ministries and recommend updates to coordination protocols where gaps exist.
- Identify relevant platforms, such as technical working groups, steering committees, and inter-ministerial platforms, dealing with public health.
- Participate in and inform technical working groups, steering committees, and inter-ministerial platforms, ensuring the sector's voice is present in decision-making.
- Suggest mechanisms for long-term coordination between sectors.

Output 3.1.3 A NAP strategy and action plan, including a budget, is adopted

- Take the lead role in drafting the health sector component of the NAP Strategy & Action Plan, building on the outcomes of stakeholder engagements, the climate modelling work, the vulnerability assessments and the climate economics work
- Advise on mainstreaming climate adaptation into health policies, regulatory frameworks, and budget processes.

Output 3.1.4 Adaptation priorities are integrated into national, subnational, and sectoral development plans and budgets

- Identify relevant development plans and budgets where health adaptation measures need to be integrated
- Ensure that priority public health adaptation measures are integrated into national and subnational strategies, plans, sector policies, and budgeting processes.
- Support coordination between national and subnational institutions within the public health sector.
- Help identify opportunities to align regional or local sectoral institutions (e.g., regional health offices, regional development plans, mass housing development and servicing programs, etc.) with national adaptation goals.

Output 3.2.1 Future climate change risks and levels of uncertainty have been ascertained taking into account different global mitigation scenarios and socioeconomic pathways

- Review consultant report on future scenarios and validate findings for the health sector, propose recommendations where appropriate, and explain what it means for sectoral decision-making.
- Translate future scenarios developed by the climate modelling firm into practical, sector-specific risks and implications for human health and wellbeing, and epidemiology.
-
- Help communicate complex climate risks and uncertainties in clear, accessible ways to decision-makers, practitioners, and communities.

Output 3.2.2 Assessments of climate change vulnerabilities and impacts across sectors, geographies and ecosystems under various climate change scenarios have been conducted

- Participate in the design of the vulnerability assessments to ensure that surveys will capture health vulnerabilities (how strongly health outcomes respond and ability to prevent, cope and recovery from climate shocks).
- Review the final assessment report conducted by the Vulnerability Expert and ensure health vulnerabilities have been adequately captured.

Output 3.2.3 Estimations of costs of climate change impacts (the cost of inaction) have been produced.

⇒ Provide input into the methodology of the climate economics firm to ensure that the analysis of the health sector is appropriate to the Namibian context and informed by the latest data and developments
⇒ Review the findings and report of the climate economics firm
⇒ Help communicate economic information in clear, accessible ways to decision-makers, practitioners, and communities.

Output 3.2.5: An integrated monitoring, evaluation, and learning (IMEL) system for adaptation is developed at the national (subnational and sectoral) level including participatory, project-level mechanisms for monitoring, evaluation, and learning.

- Identify what successful adaptation looks like in the public health sector and propose quantitative and qualitative indicators to track progress, effectiveness, and resilience over time.
- Identify gaps in data, surveillance and monitoring systems within the sector that need to be addressed.
- Advise on feasible data sources (e.g., administrative records, remote sensing, community surveys).
- Recommend improvements in public health data collection methods and sources, which are sustainably implementable and can be maintained after project end.

Output 3.3.2 Public policy and financing options to catalyse and incentivise private sector engagement have been identified

- Identify public health entry points for private sector engagement (e.g. promotion of public private partnerships PPPs).
- Highlight where private sector investment or innovation can enhance health adaptation outcomes.
- Recommend public policy interventions that may reduce investment risk and enable private-sector participation.

Output 3.4.1 A resource mobilisation strategy is developed outlining the potential sources of funding, vehicles, and mechanisms for channelling funding to projects has been developed, drawing on international best practice

- Propose potential projects or scalable interventions suitable for private co-financing.
- Help develop or validate health adaptation investment plans or pipelines to present to investors or funders.
- Assess the costs, benefits, and financing options for climate adaptation and resilience-building efforts.

I. Deliverables

- Input into the methodological report for vulnerability assessments covering health sector.
- Draft component on health sector for inclusion in the NAP strategy and action plan.
- Summary report of sectoral policy gaps, priorities, and opportunities to mainstream climate adaptation measures in the health sector, drawing on the findings of the climate modelling work, the vulnerability assessments, and the climate economics work, as well as stakeholder consultations.
- Sector inputs into the NAP strategy and action plan ensuring the public health sector is fully considered.
- Recommendations to integrate adaptation priorities into subnational and sectoral development plans and budgets.
- Technical input into quantitative and qualitative monitoring and evaluation indicators for tracking progress against adaptation targets in the NAP.
- Stakeholder engagement reports.

II. Duration of the Consultancy:

The consultancy shall take place over the course of the NAP Project from May 2026 to November 2027. The number of working days foreseen is 90. The number of workdays per key deliverable is proposed as follows:

NAP Output	# of days
Output 3.1.2 The institutional framework for coordinating climate adaptation is strengthened	5
Output 3.1.3 A NAP strategy and action plan, including a budget, is adopted	20
Output 3.1.4 Adaptation priorities are integrated into national, subnational, and sectoral development plans and budgets	20
Output 3.3.2 Public policy and financing options to catalyse and incentivise private sector engagement have been identified	10
Output 3.2.1 Future climate change risks and levels of uncertainty have been ascertained taking into account different global mitigation scenarios and socioeconomic pathways	5
Output 3.2.2 Assessments of climate change vulnerabilities and impacts across sectors, geographies and ecosystems under various climate change scenarios have been conducted	5
Output 3.2.3 Estimations of costs of climate change impacts and the cost of inaction) have been produced.	5
Output 3.2.5: An integrated monitoring, evaluation, and learning (IMEL) system for adaptation is developed at the national (subnational and sectoral) level including participatory, project-level mechanisms for monitoring, evaluation, and learning.	10
Output 3.4.1 A resource mobilisation strategy is adopted outlining the potential sources of funding, vehicles, and mechanisms for channelling funding to projects has been developed, drawing on international best practice	10
Total Number of Days (estimated)	**90**

III. Desired Expertise:

- A Master's or Doctorate degree Public Health, Environmental Health, Health Policy & Management, Epidemiology, Medicine or related field.
- A minimum of 10 years' work experience in a technical lead or planning position on development/climate/natural resources management programmes.
- Demonstrated skills in workshop facilitation and stakeholder management.
- Experience of working and collaborating with developing country governments.
- Ability to effectively work in and coordinate with a large, multidisciplinary team of experts and consultants is desired; and
- Strong skills in project monitoring and evaluation are an added advantage.

IV. Reporting

The Public Health Specialist will work closely with, and report to the NAP Project Management Unit (PMU).

V. Additional Provisions

These Terms of Reference may be updated, subject to mutual agreement, to reflect changing circumstances or additional requirements.

VI. To Apply:

This consultancy is open to Namibian nationals and foreign nationals with a valid work permit. The indicative starting date for the position is May 2026 with 90 working days over the course of the project period. Applications should be sent to CV@nnf.org.na, stating "GCF NAP - Public Health Specialist" in the subject no later than 18H00 on Monday, 27 April 2026. The location of the assignment is Windhoek, Namibia. The application should includes:

- A Curriculum Vitae describing previously accomplished work related in the public health sector
- Cover letter with motivation, summary of expertise, daily rate, indication of availability; and
- Certified copies of academic qualifications for Namibian nationals.

Previously disadvantaged Namibians, women, disabled persons, and youth are encouraged to apply for this position. Only short-listed applicants will be contacted and invited for interview and no documents will be returned. No late submissions will be accepted.