



OHCHR Call for Inputs Climate Financing and Human Rights

Make Mothers Matter (MMM) welcomes the opportunity to contribute to this Call for Inputs. Our answer focuses on climate financing to address the specific impacts that climate change has on women who are mothers, including on maternal physical and mental health and unpaid care work. It largely draws on a Policy Brief we co-authored on *Climate Change: a Maternal Physical and Mental Health Emergency*, which was published in November 2025.¹

Why Climate Finance Must Centre Mothers and Caregivers

Climate change is not only an environmental crisis, but a **human rights crisis that is profoundly reshaping care, health, and survival**, especially for mothers and children, and more generally unpaid caregivers and care recipients.

Mothers and other unpaid caregivers constitute the **invisible frontline of climate response**. They secure water, food, fuel, and care for children, older persons, persons with disabilities, and the sick, roles that intensify dramatically under climate stress. Yet, **global climate finance architecture largely ignores care work, maternal health, and mental health**, focusing instead on mitigation, infrastructure, and technological solutions.

This exclusion is neither neutral nor efficient. Climate change **disproportionately affects women's physical and mental health**, particularly during pregnancy, childbirth, and early motherhood. Extreme heat, air pollution, food insecurity, displacement, and disaster-related stress increase risks of preterm birth, stillbirth, maternal mortality, and infant death. At the same time, these stressors **amplify maternal mental health vulnerabilities**, including depression, anxiety, trauma, and suicidal ideation, conditions that remain largely absent from climate policies and financing mechanisms.²

¹ Available on <https://makemothersmatter.org/climate-change-a-maternal-physical-and-mental-health-emergency/>

² World Health Organization, *Protecting maternal, newborn and child health from the impacts of climate change: A call for action*, noting that climate hazards, including extreme heat and poor nutrition, are associated with increased risks of adverse maternal and perinatal outcomes and can affect mental health through stress, anxiety and depression. <https://www.who.int/publications/i/item/9789240085350>

If care is not recognised as climate infrastructure, and mothers and caregivers are not prioritised in climate finance, **climate action will continue to fail a large part of the population** and undermine fundamental human rights, including the rights to health, life, equality, and dignity.

Effective and Rights-Based Models of Care-Centred Climate Finance

Evidence shows that climate finance can be both effective and rights-based when it is designed to reach communities directly and respond to lived realities, including care responsibilities and health needs.

The **Climate & Care Initiative (CCI)** provides a concrete example of how modest, grant-based funding (up to USD 50,000 per project) can enable locally designed solutions at the intersection of climate adaptation and care. Through its initial funding round, CCI supported women-led grassroots organisations across Latin America, the Caribbean, and Sub-Saharan Africa, illustrating that **care-sensitive, community-based adaptation can be delivered through accessible funding models that value local knowledge and leadership.**³⁴

Likewise, feminist funds such as **Mama Cash** demonstrate the importance of directing resources to women-led and grassroots organisations. By offering flexible, long-term support, these funds have enabled Indigenous women, environmental defenders, and community organisers to advance climate action grounded in human rights, social justice, and local accountability. For example, Mama Cash has supported Indigenous women with disabilities in Nepal to bring their lived climate experiences into international climate policy spaces, and women’s activism in Kenya via Save Lamu that contributed to a tribunal decision halting a proposed coal power plant, highlighting how locally driven organising can protect community health and wellbeing.⁵⁶

At the same time, **maternal, newborn and child health systems that are resilient to climate stress** are increasingly recognised by global health institutions, including WHO, UNICEF and UNFPA, as a core component of climate adaptation. Such approaches emphasise protecting essential health services during heatwaves, floods, and other climate-related disruptions, ensuring access to clean water and energy in health facilities, and maintaining continuity of care for mothers and newborns during crises.⁷

³ Climate & Care Initiative (CCI), “The Climate & Care Initiative Fund.”

<https://climateandcareinitiative.org/fund/>

⁴ Climate & Care Initiative (CCI), “First 13 organisations selected to advance climate and care solutions across the Global South.” <https://climateandcareinitiative.org/first-13-organizations-selected-to-advance-climate-and-care-solutions-across-the-global-south/>

⁵ Mama Cash, “Climate finance that works: supporting the women driving locally-led adaptation.”

This resource describes how feminist funds support grassroots climate action, with examples including NIDWAN in Nepal and Save Lamu in Kenya. <https://www.mamacash.org/resources/climate-finance-that-works-supporting-the-women-driving-locally-led-adaptation/>

⁶ Mama Cash, *Annual Report 2024*, p.59, section on Global Alliance for Green and Gender Action (GAGGA) climate justice events at CSW68 and COP29, showing feminist funds advancing gender-just climate finance dialogues. <https://mamacash.jaarverslag.org/wp-content/uploads/sites/800/2025/08/Mama-Cash-Annual-Report-2024.pdf>

⁷ WHO, UNICEF, UNFPA (2023), *Protecting maternal, newborn and child health from the impacts of climate change: A call for action*. <https://www.who.int/publications/i/item/9789240085350>

Despite growing recognition of the links between climate change and health, **a major financing gap remains**. While more than 90 per cent of countries include health priorities in their Nationally Determined Contributions under the Paris Agreement, **only around 0.5 per cent of multilateral climate finance is directed to projects that explicitly focus on human health**, according to WHO and Green Climate Fund reporting on climate-health financing gaps.⁸

Core Evidence: Climate Finance, Gender Inequality, and Human Rights

- Pregnant women, newborns, and children are among the populations most exposed to climate-related risks, including heatwaves, floods, droughts, and air pollution, directly threatening their rights to health and life.
- Women globally perform **76% of unpaid care and domestic work**.⁹ Climate stressors, such as water scarcity, food insecurity, disease outbreaks, and disasters, multiply these unpaid responsibilities, reinforcing gender inequality and economic exclusion.
- Climate change is increasingly recognised as a **major driver of maternal mental health disorders**, particularly in low- and middle-income countries where health systems are weakest. Depression, anxiety, and trauma undermine caregiving capacity, infant development, nutrition, and long-term resilience.
- Small-scale, grant-based climate finance mechanisms have demonstrated success in reducing vulnerability, strengthening care systems, and improving health and livelihoods, yet remain marginal within global climate finance frameworks.

Failing to finance care and maternal health undermines human rights obligations and weakens climate resilience.

Structural Barriers in Climate Finance Architecture

Despite growing recognition that climate change intensifies care work and health risks, current climate finance systems remain poorly aligned with the lived realities and human rights of mothers and other unpaid caregivers.

First, **care remains largely invisible within climate finance frameworks**. Unpaid care work, maternal health and maternal mental health are rarely recognised as legitimate climate adaptation priorities, even though climate shocks directly increase caregiving demands and undermine women's physical

⁸ WHO (2023), "41 funders, partners endorse new guiding principles for financing climate and health solutions to protect health," World Health Organization, 2 December 2023, <https://www.who.int/news/item/02-12-2023-41-funders--partners-endorse-new-guiding-principles-for-financing-climate-and-health-solutions-to-protect-health>

⁹ **United Nations, E/CN.5/2026/4, "Unpaid care and support work, time allocation and labour market participation,"** noting that women perform approximately 76 % of unpaid care and domestic work globally and spend significantly more hours on care responsibilities than men. https://digitallibrary.un.org/record/4096493/files/E_CN.5_2026_4-EN.pdf

and psychological wellbeing, affecting the rights to health, equality and an adequate standard of living, and, in the case of mothers, negatively impacting child development.¹⁰

Second, **women-led and caregiver organisations face structural exclusion**. Complex accreditation requirements, high minimum funding thresholds and administrative barriers systematically prevent grassroots women’s groups and mothers’ associations from accessing climate finance, despite their central role in community-level adaptation and crisis response. This undermines the principles of participation, inclusion and non-discrimination.¹¹

Third, **the reliance on debt-based climate finance weakens care-centred resilience**. Loans increase fiscal pressure on low- and middle-income countries and can crowd out public investment in health, social protection and care services, limiting States’ ability to fulfil their human rights obligations to protect mothers, children and caregivers.

Finally, **care-related impacts remain largely unmeasured and unheard**. Climate finance tracking rarely captures reductions in unpaid care responsibilities, maternal mental health outcomes or social cohesion, and mothers and caregivers are seldom meaningfully involved in decision-making, monitoring or accountability mechanisms. This absence perpetuates rights-blind climate action and financing, and weakens long-term resilience.

Principles for a Care-Centred Climate Finance System

Make Mothers Matter (MMM) calls for climate finance approaches that place care, health, and human rights at the centre of climate action, based on the following principles:

- **Care as essential infrastructure:** Care work, maternal and child health, access to water, clean energy, and social protection should be recognised as foundational to climate resilience, not as secondary or social add-ons.
- **Gender equality and care justice:** Climate finance must address the unequal share of unpaid care work carried by women, which intensifies during climate shocks and deepens existing inequalities.
- **Direct and inclusive access:** Funding mechanisms should be designed so that grassroots women’s organisations and caregiver-led initiatives can access resources directly, without

¹⁰ UN Women, *Explainer: How gender inequality and climate change are interconnected*, recognising that climate change disproportionately increases unpaid care burdens and health risks for women, with direct implications for human rights and gender equality. <https://www.unwomen.org/en/articles/explainer/how-gender-inequality-and-climate-change-are-interconnected>

¹¹ UNFCCC Women and Gender Constituency & Global Gender and Climate Alliance (2022), “Submission on Gender and Climate Finance,” notes that multilateral climate funds remain largely inaccessible for women’s organisations, Indigenous peoples and local communities, due to accreditation, scale and procedural barriers. Access to climate finance is generally conditioned on agency accreditation and large-scale eligibility requirements, which most grassroots organisations cannot meet. https://www4.unfccc.int/sites/SubmissionsStaging/Documents/202205122306---WGC_Submission%20on%20GAP%20Progress.pdf

prohibitive administrative or scale requirements.

- **Non-debt financing:** Grant-based and community-level finance should be prioritised over loans, to avoid increasing debt burdens and undermining public spending on health and social protection.
- **Human rights accountability:** Climate finance should embed participation, transparency, and accountability, ensuring that affected communities, particularly mothers and caregivers, have a meaningful role in decision-making and evaluation.
- **Meaningful monitoring and data:** Climate finance systems should require data disaggregated by gender and caregiving status, and track social and health outcomes, including mental health and reductions in care work.

MMM's Key Recommendations to States and Climate Finance Actors

To ensure climate finance responds to lived realities and advances human rights, Make Mothers Matter (MMM) calls on States and climate finance institutions to take the following practical steps:

- **Integrate care into global climate finance priorities:** As negotiations advance on the next collective quantified climate finance goal, States should recognise care, health and social protection as core elements of climate adaptation, including through dedicated funding streams or earmarked allocations.
- **Make care and health visible in funding decisions:** Major climate funds should strengthen gender-responsive tracking by incorporating indicators on care, maternal and child health, and mental health, building on existing gender markers rather than creating parallel systems.
- **Enable locally led action:** Expand small-grant funding windows (approximately USD 10,000–100,000) tailored to grassroots women's and caregiver-led organisations. Experience from feminist and community-based funding mechanisms shows that grants at this scale are often sufficient to support local adaptation, care, and health initiatives, without the administrative burdens associated with large-scale climate finance.
- **Embed health in adaptation planning:** Governments should ensure that maternal, newborn, and mental health are systematically reflected in National Adaptation Plans, climate budgets, and disaster preparedness and response frameworks.
- **Prioritise grant-based finance:** States and climate funds should limit reliance on loans for adaptation in health and care sectors, to protect public spending on essential services and avoid increasing debt burdens.
- **Lower barriers to access:** Accreditation, fiduciary, and scale requirements should be simplified so that women-led and community-based organisations can access climate

finance directly or through trusted intermediaries.

- **Strengthen data and accountability:** Climate finance reporting should include data disaggregated by gender and caregiving status and assess social and health outcomes, including impacts on care workloads and mental wellbeing.
- **Ensure meaningful participation:** Mothers and other unpaid caregivers should be actively involved in the design, implementation, and monitoring of climate finance policies and projects, in line with human rights principles of participation and accountability.

Conclusion

Climate justice is incomplete without caregiving justice. Climate finance that ignores mothers and other unpaid caregivers, as well as maternal physical and mental health **undermines human rights, weakens resilience, and risks reversing decades of progress in maternal and child survival.**

Investing in mothers is not charity, it is **effective climate adaptation, human rights protection, and intergenerational resilience.**

Make Mothers Matter urges the UN and Member States to move beyond “green” finance and **place care, health, and human dignity at the centre of climate finance architecture.**