

# Submission in response to Draft National Preventive Health Strategy

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#### Contact:

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#### About

The Climate and Health Alliance (CAHA) is a national charity and the peak body on climate change and health in Australia. CAHA is an alliance of organisations within the health sector working together to raise awareness about the health risks of climate change and the health benefits of emissions reductions.

The membership of CAHA includes a broad cross-section of health sector stakeholders with 55+ member organisations, representing healthcare professionals from a range of disciplines, as well as healthcare service providers, institutions, academics, researchers, and consumers. Information about CAHA's membership and governance can be found at www.caha.org.au.

The Climate and Health Alliance has produced a significant number of reports and publications to assist policymakers and inform health stakeholders and the wider community understand the links between climate change and health, and to guide decisions regarding policy and solutions.

These include: the Human Health and Wellbeing Adaptation Plan for Queensland; Framework for a National Strategy on Climate, Health and Well-being for Australia and the preceding Discussion Paper; a Review of Health and Climate Change Literature for the City of Melbourne; a joint report on divestment Healthy Investments (with Doctors for the Environment); the seminal report Coal and Health in the Hunter: Lessons from One Valley for the World; a multi-stakeholder Joint Position Statement and Background Paper on Health and Energy Choices; a joint report 'Our Uncashed Dividend' (with The Climate Institute) on the health benefits of reducing greenhouse gas emissions; Discussion Paper for the Roundtable on the Health Implications of Energy Policy and a subsequent Briefing Paper on the same topic.

CAHA has produced a film on the risks to health and climate from fossil fuels, The Human Cost of Power; and has conducted many innovative and ground breaking public events, including an annual series of Greening the Healthcare Sector Forums, including several Healthcare Environmental Sustainability Forums with Western Health and Institute for Hospital Engineers Australia; the Our Climate Our Health Seminar, featuring an innovative thought experiment: Imagining 2030 as a healthy low carbon world; a Public Seminar on Protecting Health from Climate Change (with University of NSW); and a national Forum on Climate and Health: Research, Policy and Advocacy. CAHA also contributes to many conferences, community dialogues, and forums, both nationally and internationally on these issues.

For more information about the membership and governance of the Climate and Health Alliance, please see Appendix A. For further information see www.caha.org.au

#### The issue

The World Health Organization has described climate change as the defining issue for public health in the 21st century. It is an urgent challenge, with implications at the global, national and community levels.

Climate change affects health in many ways; directly by the increased intensity and frequency of extreme weather events, such as prolonged heatwaves, floods and bushfires; and indirectly through worsening air quality, changes in the spread of infectious and vector-borne diseases, risks to food safety and drinking water quality, and effects on mental health.

Climate change is contributing to the collapse of ecosystems and biodiversity, undermining the foundations for health and wellbeing. It is leading to a decline in habitable land, economic hardship due to loss of livelihoods, coastal inundation, forced internal migration, and the loss of homelands and disrupted connections to country.

Climate change contributes to an increased risk of infectious diseases, cardiovascular disease, respiratory disease, asthma, allergies, mental illness, psychosocial impacts, violence, poor nutrition, injury, poisoning and mortality.

As a result, health care services are adversely affected, with those living in rural and remote areas, who may already have increased risk of ill health because of limited access to services, impacted most severely. Health care services in Australia have experienced dramatic increases in service demand from climate change-related extreme weather events, including heatwaves, storms, floods, as well as bushfires and associated smoke pollution.

Tackling climate change not only results in savings for the health sector but provides net economic benefits across multiple sectors. In Europe, estimated annual benefits from climate change mitigation (through reduced air pollution and associated mortality and health care costs) is €17-38 billion by 2050, with additional annual savings on air pollution control measures nearly €50 billion. In the US, it is estimated emissions reduction strategies could provide an annual economic benefit between US\$6-30 billion, if implemented.

A National Preventive Health Strategy that is fit for purpose in the 21st century must prioritise both mitigation of and adaptation to climate change — or it will fail in its objectives.

#### General comments

In September 2020, CAHA and members launched a joint call for the Strategy to address climate change. Over 30 organisations and 200 individuals sent in submissions, and more than 30 organisations signed a Joint Statement calling for climate change to be included in the Strategy.

The draft Strategy is an improvement on the <u>Consultation Paper</u> released in August 2020, which contained no reference to climate change at all.

While it is good news is that climate change *is* mentioned in the draft Strategy, the main pathway to addressing it appears to be via a proposed national environmental health strategy, **which is to be developed by 2030.** 

2030 is far too long to wait to act on what is a current, escalating threat of human health and wellbeing, which <u>risks massive ecosystem and societal collapse in the latter part of this century</u>.<sup>1</sup>

#### Recommendations for improvement

#### A much stronger focus on climate change is required

The draft is a significant improvement in acknowledging environmental health and environmental determinants of health (compared with earlier iterations).

There must be a much stronger emphasis on climate change in the Strategy however.

Strategies to prevent morbidity and mortality from climate change-related health risks must be included in the Strategy, and there must be funded programs and initiatives to reduce risks and prevent harm.

The recognition of climate change health threats under the seven 'enablers to mobilise a prevention system' (leadership, governance and funding, prevention in the health system, partnerships and community engagement, information and health literacy, research and evaluation, monitoring and surveillance, and preparedness) is welcome, however *only addressing climate change through a preparedness lens* misses the point that **mitigation** (i.e. rapidly reducing the drivers of climate change aka greenhouse gas emissions) **is the central priority**, while we prepare for and adapt to impacts that are now unavoidable.

<sup>&</sup>lt;sup>1</sup>International Scholars Warning on Societal Disruption and Collapse, 6 December 2020 <a href="http://iflas.blogspot.com/2020/12/international-scholars-warning-on.html">http://iflas.blogspot.com/2020/12/international-scholars-warning-on.html</a>

There must be actions outlined (and funded programs to deliver) associated with climaterelated health risks under each of the seven 'enablers' in the Strategy.

#### Climate change is not 'an immediate priority'

It is not currently mentioned in the 'Immediate Priorities' for example:

## The immediate priorities



In order to realise the achievements over the next 10 years, building key infrastructure and establishing policy direction to mobilise the prevention system needs to be the immediate priority of this Strategy. It is through prioritising the enablers and desired achievements outlined below, that the foundation will be laid for further action in the prevention system.

- 1. Governance mechanisms
- 2. Increased investment in prevention
- 3. A national platform providing credible and reliable health information
- 4. Embedding prevention in primary health care and aligning with the Primary Health Care 10 Year Plan
- 5. National consumer engagement strategy
- 6. National health literacy strategy
- 7. Enhanced public health workforce planning
- 8. Ongoing national data sets to support the monitoring and evaluation of this Strategy and a National Prevention Monitoring and Reporting Framework

And while all these initiatives are worthy, absent climate action, none of these actions will be able to prevent declining health outcomes, increasing mortality and morbidity, and unprecedented human suffering.

#### Focus areas ignore upstream drivers

Many of the initiatives proposed in the seven focus areas in the draft strategy (reducing tobacco use, improving access to and the consumption of a healthy diet, increasing physical activity, increasing cancer screening and prevention, improving immunisation coverage, reducing alcohol and other drug harm, and protecting mental health) fail to acknowledge or tackle the upstream drivers of ill-health in each of these areas.

#### Mental health risks associated with climate change is ignored

Despite the increasing evidence of mental health burden associated with climate change, there is no mention of this, and no policies or programs proposed to address it.

#### No evaluation or monitoring of climate-related health risks

There is no mechanism proposed for monitoring health outcomes affected by climate change in the strategy, and no targets, baseline figures, or datasets proposed to begin to track health risks from climate change or evaluate the effectiveness of any preventive health measures applied to reduce risks.

#### The timeline for action must be more urgent

A national strategic plan addressing the 'impacts of environmental health' by 2030 is simply inadequate. While the announcement of this plan in the Strategy is very welcome, there simply must be a more urgent timeframe to its delivery before 2030.



- A national strategic plan addressing the impacts of environmental health, including horizon scanning to identify and understand future threats, is developed and implemented in alignment with this Strategy and the work of the Environmental Health Standing Committee (enHealth).
- Evidence-based approaches to identify and address current and emerging pressures on the most vulnerable parts of the health system caused by climate change, are developed and implemented.
- Stronger infrastructure to support the rapid drawing together of leaders from different fields and from different jurisdictions - to develop national and local responses.
- Public health workforce is 'future

- **proofed'** through the enhancement of availability, distribution and the capacity and skills of the workforce.
- The provision of tailored, culturally appropriate and accessible information for all Australians is prioritised during an emergency response to ensure effective messaging and distribution of public health advice.
- A national framework is implemented in all states and territories to distribute close to real-time, nationally consistent air quality information, including consistent categorisation and public health advice<sup>329</sup>. In addition, a 24-hr hour average nationally consistent framework is implemented to provide further public health advice for periods of prolonged air pollution.

### **Concluding comments**

We do acknowledge that the inclusion of climate change in the Strategy is an improvement, given its omission in the preceding Consultation Paper.

The recognition of the need to identify and understand future threats is welcome, as is the proposal to develop and implement evidence-based approaches to 'address current and emerging pressures caused by climate change on the most vulnerable parts of the health system'. Bringing together leaders from different fields and different jurisdictions to develop national and local responses is a welcome idea. So too, the notion of 'future proofing' the health workforce, and the provision of tailored, culturally appropriate and accessible information during emergencies.

The inclusion of a section on air pollution in the environmental health (aka health impacts of climate change) section demonstrates there is emerging awareness about these links - however, as above, this still ignores the fact that reducing the causes of air pollution (and climate change) would be a better approach to preventive health than simply monitoring and reporting on poor air quality.

We urge the taskforce to refer to our further policy recommendations designed to prevent illness and promote health through climate mitigation and adaptation, see the Framework for a National Strategy on Climate, Health and Wellbeing; and the Healthy, Regenerative and Just policy agenda.

#### **APPENDIX A**

#### **Climate and Health Alliance Board**

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#### **CAHA Member Organisations**

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Australasian College of Health Service Management (ACHSM)

Australasian College of Nutritional and Environmental Medicine (ACNEM)

Australasian Epidemiological Association (AEA)

Australasian Society of Lifestyle Medicine (ASLM)

Australian Association of Gerontology (AAG)

Australian Association of Social Workers (AASW)

Australian College of Nursing (ACN)

Australian Council of Social Service (ACOSS)

Australian Healthcare and Hospitals Association (AHHA)

Australian Health Promotion Association (AHPA)

Australian Indigenous Doctors' Association (AIDA)

Australian Institute of Health Innovation (AIHI)

Australian Women's Health Network (AWHN)

Australian Medical Students' Association (AMSA)

Australian Nursing and Midwifery Federation (ANMF)

Australian, New Zealand and Asian Creative Arts Therapies Association (ANZACATA)

Australian Primary Health Care Nurses Association (APNA)

Australian Psychological Society (APS)

Central Australia Rural Practitioners Association (CARPA)

Children's Healthcare Australasia

Codesain

CoHealth

ConNetica Consulting

Consumers Health Forum of Australia (CHF)

**CRANAplus** 

Dietitians Australia

**Doctors for Nutrition** 

Doctors Reform Society (DRS)

Food for Thought Consulting Australia

Friends of CAHA

Health Consumers NSW

Healthy Futures

Health Issues Centre (HIC)

Health Nature Sustainability Research Group (HNSRG)

Health Services Union (HSU)

Kooweerup Regional Health Service (KRHS)

Medical Association for Prevention of War (MAWP) Australia

Medical Scientists Association of Victoria (MSAV)

MinterEllison

Motion Energy Group

Naturopaths and Herbalists Association of Australia (NHAA)

NSW Nurses and Midwives' Association (NSWNMA)

Pharmacists for the Environment Australia (PEA)

Public Health Association of Australia (PHAA)

Psychology for a Safe Climate (PSC)

Royal Australasian College of Physicians

Queensland Nurses and Midwives Union (QNMU)

School of Public Health, University of Sydney

School of Public Health & Social Work, Queensland University of Technology

Services for Australian Rural and Remote Allied Health (SARRAH)

Veterinarians for Climate Action (VFCA)

Victorian Allied Health Professionals Association (VAHPA)

Women's Health East (WHE)

Women's Health in the North (WHIN)

Women's Healthcare Australasia

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