

Report from 10th October 2016 Health Leaders Meeting with Parliamentarians and Roundtable Discussion regarding a National Strategy on Climate, Health and Well-being for Australia



Representatives from many of Australia's leading community, health and medical groups met in Canberra on 10 October 2016 to call on politicians to take immediate steps to protect the health of Australians from the impacts of climate change.

A nation-wide consultation has revealed deep concern within the health sector that there is currently no national health plan to deal with the impacts of climate change.

Around 40 CEOs, Presidents, and policy directors from Australia's leading community, health and medical groups met with Assistant Minister for Health Ken Wyatt, Shadow Minister for Health Catherine King and Greens Leader Dr Richard Di Natale at Parliament House (Session 1).

A subsequent Roundtable meeting in the afternoon (session 2) discussed the key elements for a national strategy on climate, health and well-being, with attendees committing to working together to develop a policy framework to be put forward to the federal government and parliamentarians in 2017, and to engage in advocacy (in consultation with health care stakeholders) for its further development and subsequent implementation.

The objectives of the meeting were as follows:

Session 1:

- To provide an opportunity for health leaders to meet with Members of Parliament to express their concerns about the impact of climate change on the health and well-being of people in Australia and around the world;
- To send a strong message to the wider community that health and medical groups consider climate change a serious threat to health and that they are calling on the Australian parliament to respond;

Session 2:

- To discuss the core themes identified from consultation with the health sector, and to work towards developing a consensus about the key elements for a National Strategy on Climate, Health and Well-being;
- To organise to work together to develop a framework for a policy proposal to be put forward to the federal government and other political parties in 2017.

The attendees included many of Australia's leading healthcare stakeholder groups (see **Appendix B** for a list of attendees).

The meeting followed several month of consultation with healthcare stakeholders across Australia regarding their priorities and concerns to inform the development of a national

public policy response to the impacts of climate change on the health and well-being of the population.

PRIOR CONSULTATION

A [Discussion Paper: Towards A National Strategy on Climate, Health and Well-being for Australia](#) was launched by Nobel Laureate for Medicine, Professor Peter Doherty, in June on behalf of the coalition of healthcare stakeholders that form the [Climate and Health Alliance](#), a group of 30 health professional associations, peak health bodies, research and academic institutions and healthcare service providers. The Health Leaders Meeting with Parliamentarians and Roundtable was hosted by the Climate and Health Alliance and three of its member groups: the [Public Health Association of Australia](#), [Australian Healthcare and Hospitals Association](#) and the [Australian College of Nursing](#).

The [Discussion Paper: Towards A National Strategy on Climate, Health and Well-being for Australia](#) highlights the significant gap between the serious health impacts of climate change and the presence of a health policy response in Australia. The paper also highlights Australia's obligation under the UNFCCC Paris Agreement to protect the health of its citizens from climate change.

A preliminary report from the responses to the Discussion Paper ([Survey of Health Professionals' Opinions around a National Strategy on Climate, Health and Wellbeing for Australia: Preliminary Report](#)) and a [Summary of Themes arising from a nine-day Online Discussion Forum held in August 2016](#) via paxrepublic.com) was provided to attendees prior to the Roundtable to inform discussion. The report provides a rich insight into the concerns and priorities of Australian health professionals and the wider health sector about the risks climate change poses to the health of their patients, families and communities.



SUMMARY OF SESSION 1

The group assembled in a Committee Room at Parliament House to meet with Assistant Minister Ken Wyatt, Shadow Minister Catherine King, and Greens Leader and Health spokesperson Richard Di Natale, who attended successively. The meeting was opened by Climate and Health Alliance (CAHA) President Dr Liz Hanna, and facilitated by CAHA Executive Director Fiona Armstrong.

During the meeting, the Roundtable heard from Fiona Armstrong about the results of a global survey conducted in 2015 by the World Federation of Public Health Associations (WFPHA) that revealed Australia is lagging significantly behind comparable countries in taking action to protect the health of its citizens from climate change.

It also heard that under the new global climate agreement, the Paris Agreement, nations have an obligation to protect their citizens' "right to health" when taking action to address climate change and, in an accompanying decision, to recognise the health co-benefits of climate mitigation and adaptation.

Assistant Minister Ken Wyatt demonstrated an understanding of the health impacts of climate change, acknowledging impacts on marine stocks, extreme weather, changes in rainfall, illnesses and deaths associated with heatwaves, reduced nutrition, and increased mental health impacts.

Assistant Minister Wyatt also acknowledged the impact on the health sector from climate change and invited groups and individuals to contact him and his office to share information and advice about how to respond. He thanked the group for the invitation to attend the Roundtable, said he welcomed further discussions regarding a National Strategy on Climate, Health and Well-being for Australia, and indicated he would be “more than happy” raise the issue with his party-room colleagues, Health Minister Sussan Ley, and Assistant Minister for Rural Health David Gillespie.



Shadow Minister Catherine King noted that climate change reminds us we are “captive to the natural world”, highlighting the impact of recent severe storms in SA on electricity supply, and the sometimes contentious nature of the climate change and energy debate.

Ms King noted the current gap in climate change and health policy, acknowledging this is a new policy area, but recognising that other developed nations are doing more, using the example of a climate and health policy framework developed in the US in 2006 under President George Bush. She indicated that she, along with Shadow Ministers Butler and Burke, are all “willing to work together” with health groups on climate change and health.



Greens Leader Senator Richard Di Natale said the voice of health professionals and organisations was welcome in the climate policy debate but was currently under utilised, suggesting communicating climate change in a health ‘frame’ was a way of “making this story a story that everyone understands”.

Dr Di Natale suggested a Senate Inquiry into the health impacts of climate change could be a useful tool in drawing attention to the need for policy, and offered to help establish an Inquiry if the proposal was supported. Discussions with health leaders also raised the issue of a Productivity Commission Inquiry into the economic costs associated with the health impacts of climate change, as well as the health benefits associated with emissions reduction strategies. Dr Di Natale offered to raise the idea with other parliamentarians to secure support for its establishment - if health groups considered this an important initiative in building the case for action.



Health leaders shared their organisation’s position on climate change and health with the parliamentarians, with common themes including recognition of the serious threats posed to health from climate change, the role of divestment in shifting funds away from fossil fuel industries, and support for the development of a National Strategy on Climate, Health and Well-being. The important role the health professions can play in leading advocacy for climate action as well as sectoral responses (ie reducing emissions in the sector) was noted, and the large size of the sector, indicating the potential for changing community attitudes towards support for climate action.

Other issues raised included the importance of recognising that health and community sector workers were generally driven by deep value commitments, and that many health professionals and health and community sector workers were anxious to be involved in practical actions to mitigate climate change and prepare for climate impacts, but they needed to be supported with policy and funding to do so.

The power of the health voice, and the respected and trusted nature of health and medical professionals as advocates, were both recognised and highlighted as important reasons to more deeply engage the health community more deeply in the national policy conversations on climate change.

SUMMARY OF SESSION 2



Discussions in this session centred on a pathway to action – initially hearing from attendees about their goals for the session, and then talking about how to contribute to the way forward.

The involvement of marginalised communities was a key issue for some, along with being able to communicate the role of a national strategy clearly, including articulating the respective roles of government, communities and the health sector. Participants were keen to find ways to amplify health voices on climate change to create a political climate “conducive to action”. A sense of optimism, the need to create a collective vision and voice through collaboration and networking were seen to be vital for success. Health leaders emphasised their willingness to work with governments and political parties across the political spectrum to “make the strategy happen”.

Key elements for inclusion in the national strategy not identified in prior consultation included: highlighting the importance of food and nutrition in the climate and health discussion; the importance of working across sectors (e.g. with agriculture, energy) thus recognising a siloed approach to policy will not work.

Participants indicated it was important for a national strategy to provide tiered guidance for federal, state and local governments as well as indicate what organisations, communities and individuals can do at the local level.

Broadening engagement with stakeholders to beyond the health sector was considered important in the development of, and advocacy for, a national climate and health strategy, as was the need to work with departments / ministries of health – to “listen, understand and inform”.

OUTCOMES AND NEXT STEPS

Participants at the meeting agreed to work together as part of a broad reference group to guide the development of a framework for the national strategy, and to advocate as individuals, organisations, and as a collective campaign alliance for its implementation.

A national strategy campaign organising group has been established to guide the campaign, and health stakeholder groups are invited to nominate a representative to join the core organising group to ensure their perspectives and that of those constituents are reflected in the framework for the national strategy.

The next steps for the campaign involve the development of a program for training health professionals in climate change lobbying and advocacy, supported by an advocacy and media campaign directed by the core organising group.

Efforts will be made to secure funding to engage a full time organiser to lead the campaign. A research and policy officer (volunteer or part time, depending on available resources) will also be engaged to lead the drafting of the framework for the national strategy.

Many organisations volunteered 'in kind' support for the campaign, such as meeting facilities, assistance with research and preparation of papers.

Follow-up meetings are already being planned for Sydney and Melbourne in November 2016 to scope out the next phase of the campaign. To express interest in attending, and to indicate a preference for dates and times, please complete the relevant Doodle poll via the following links:

Melbourne: <http://doodle.com/poll/zxs4u6c42ycbtrty>

Sydney: <http://doodle.com/poll/256qd4ic6cxvb266>

For more information, or to join the core organising group, email campaigns@caha.org.au

*Report prepared by Fiona Armstrong
26 October 2016*

APPENDIX A: MEDIA, TWITTER AND RESOURCES/LINKS

Several articles appeared in the media about the meeting:

'Historic meeting pushed for national action on climate change', *Croakey*, 9/10/16

<https://croakey.org/historic-meeting-pushes-for-national-action-on-health-and-climate-change/>



'The Health Impacts Of Climate Change Are Huge And Very Real', *Huffington Post*, 11/10/16, <http://www.huffingtonpost.com.au/2016/10/10/the-health-impacts-of-climate-change-are-huge-and-very-real/?ncid=fbklnkauhpmg00000001>

'Australia's Health 2016 – what's missing? (Hint: it's a pretty big omission)', *Croakey*, 11/10/16 <https://croakey.org/australias-health-2016-whats-missing-hint-its-a-pretty-big-omission/>

'Wrapping up an historic meeting on climate change and health: "The time will come..."', *Croakey*, 13/10/16

TWITTER

The meeting generated a lively conversation on Twitter with around 500 tweets about the meeting - a sample of which are captured in this Storify account:

<https://storify.com/CAHAAustralia/health-leaders-roundtable-on-climate-october-2016>

ADDITIONAL RESOURCES/LINKS

[Discussion Paper: Towards a National Strategy on Climate, Health and Wellbeing for Australia](#)

[Preliminary Report from the Survey Responses to the Discussion Paper](#)

[Summary of themes from the nine-day Climate, Health and Well-being Online Discussion Forum held in August](#)

[PowerPoint about the campaign for a National Strategy on Climate, Health and Well-being for Australia](#)

[2015 Global Survey of Climate Change and Health Policy Report](#)

APPENDIX B: ROUNDTABLE ATTENDEES



The following organisations were represented by their President, CEO or senior policy officer at the meeting and / or roundtable:

- Australasian College of Health Services Management (Catherine Chaffey, CEO)
- Australian College of Nursing (Kylie Ward, CEO, and Carolyn Stapleton, Manager, Manager - Policy and Professional Standards)
- Australian Council of Social Service (Cassandra Goldie, CEO)
- Australian Faculty of Public Health Medicine (Lynne Madden, President)
- Australian Health Promotion Association (Suzanne Gleeson, National Secretary)
- Australian Healthcare and Hospital Association (Alison Verhoeven, CEO, and Krister Partel, Advocacy Director)
- Australian Medical Association (Simon Tatz, Manager Public Health Policy, and Georgia Bath, Policy Advisor)
- Australian Medical Students' Association (Elise Buisson, President)
- Australian Nursing and Midwifery Federation (Elizabeth Foley, Federal Professional Officer)
- Australian Practice Nurses Association (Karen Booth, President)
- Australian Psychological Society (Susie Burke, Senior Psychologist, public interest, environment, disaster response)
- Australian Society for Medical Research (Daniel Johnstone, President-elect)
- Centre for Policy Development (Ian McAuley, Fellow)
- Climate and Health Alliance (Liz Hanna, President, Peter Sainsbury, Vice- President, Fiona Armstrong, Executive Director)
- CoHealth (Lyn Morgain, CEO)
- Commonwealth Department of Health (Tony Hobbs, Acting Chief Medical Officer, Debra Thoms, Chief Nursing and Midwifery Officer)
- Croakey - online health news (Jennifer Doggett, editor)
- Dieticians Association of Australia (Gabrielle O'Kane, Director)
- Doctors for the Environment Australia (Liz Bashford, Member, National Committee of Management)

Friends of CAHA (Elizabeth Haworth)
Myer Innovation Fellowship (Anna Rose)
National Rural Health Alliance (Kim Webber, Acting CEO)
Public Health Association of Australia (Michael Moore, CEO)
Royal Australasian College of Physicians (David Harley, Fellow, Corey Watts, Senior
Advocacy Officer)
Royal Australasian College of General Practitioners (Bastian Seidel, President)
Royal Flying Doctors Service (Lauren Gale, Director of Policy and Programs)
Women's Health in the North (Debra Parkinson, Manager of Research, Policy and
Advocacy)

APPENDIX C: REPORTS FROM SMALL GROUP DISCUSSIONS DURING SESSION 2

What else should be considered in the development of the national strategy (and in the campaign to advocate for it)?

GROUP ONE

1. Need to build resilience in health sector to deal with what's already happening – identifying where are stresses in health system that are affected by extreme weather events & other climate impacts
 - a. E.g. draft climate resilience standard
2. More and better data – \$ for CSIRO, AIHW, e.g. using the future fund
3. Clear & concise tailored messaging targeting key audiences
4. Develop a toolkit or training to equip members to advocate for local MPs (a spin off project from national strategy?)
5. Need to frame debate as Australians being part of global citizenry
6. Productivity commission report could be a powerful ask/ tool

GROUP TWO

1. Prevention of the worst impacts of climate change
2. Language around preventing damage to our climate & the health benefits of doing that
3. Actions for health sector to reduce own emissions
4. Cross-sectoral research grants
5. Local health professionals could foster conversations with communities (leadership capacity building project)
6. Adaptation – how health sector can become resilient to climate change, e.g. access to power & water in extreme events.

GROUP THREE

1. Importance of united voice
2. Importance of evidence, build evidence, surveillance, long term
3. Education of health workers
4. Helping public engage with issues
5. National sustainable development unit (example: UK)
6. Senate inquiry into health and climate change
7. Public awareness & advocacy

GROUP FOUR

1. Research, surveillance, data – more research funding into health intelligence on climate change and climate change science in general
2. Links to foreign policy, foreign aid spending
3. Health service & sustainability unit established at a national level – measure emissions from health sector, encourage health services to adopt sustainability programs.
4. Health sector to support national plan to achieve net zero emissions
5. A gendered approach to climate & health

6. Emphasis links between nutrition, health, environment – co benefits for action in this domain

GROUP FIVE

1. Include adaptation and resilience – identify risks to health services, transition risks. Could go into accreditation standards.
2. Allocate responsibilities in strategy document – federal govt, local councils, health sector organisations
3. Manifesto & strategy
4. Protect communities affected by transition to clean energy society eg Hunter & La Trobe Valley – Just Transitions

GROUP SIX

1. Review of research capacity on climate & health
2. Include local government in strategy
3. Valuing prevention of climate change rather than just reacting afterwards
4. Influencing terms of reference of 2017 Fed. Govt review about social implications/ health impacts of climate change in Australia
5. Pressure on Government around who conducts the review
6. Community engagement key
7. Working across political parties is key