

Climate Change and Health

Policy Position Statement

Key messages:

Climate change is a health emergency for humans and the ecosystems we depend on for sustaining life. While there are several anthropogenic contributors to climate change, 90% of global greenhouse gas emissions driving global heating are emitted by fossil fuel (coal, gas, oil) extraction and burning. Droughts, fires, floods and heat waves have impacted every state and territory, demonstrating Australia's vulnerability to climate change.

The impacts of climate change will be inequitably experienced within and between countries, with those who have contributed the **most** to climate change experiencing the **least** impacts, and those who have contributed the **least**, already suffering **the most severe** impacts.

The Governments of Australia must urgently reverse previous climate inaction and address the realities of today, accepting that failure to mitigate climate change places our health and our future at extreme risk.

Key policy positions:

1. PHAA rejects the expansion of the coal and gas industry in Australia and supports climate mitigation policies and decisions that significantly and rapidly reduce fossil fuel production, domestic combustion and export.
2. National, state and sector-specific policies that expedite decarbonisation and waste reduction among high-emitting sectors must be supported.
3. Governments should immediately act to adapt behaviours, infrastructure, ecological resilience and all socioeconomic systems to withstand the impact of current and emerging levels of global heating is urgently required. This must be achieved in a way that maximises equity within and between countries and populations for years to come.
4. PHAA endorses the Climate and Health Alliance *Healthy, Regenerative and Just framework*, and the objectives of the National Health and Climate Strategy, particularly efforts to address carbon emissions attributed to the health system that do not compromise the quality of healthcare.

Audience:

Federal, State and Territory Governments, policymakers and program, PHAA members, media.

Responsibility:

PHAA Ecology and Environment Special Interest Group

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Climate Change and Health

Policy position statement

PHAA affirms the following principles:

1. Optimal human and planetary health are inextricably linked to robust well-functioning ecosystems. However, these are currently severely threatened by climate change. Polluted, damaged and destroyed ecosystems harm human health both directly and indirectly.
2. Climate change is a health emergency that will progressively increase in reach and severity, both in the short and long term. The direct, indirect and flow-on effects are far-ranging, causing irreversible and complex impacts on public health. The ability to adapt to climate change requires collaborative, bold and urgent action to limit the extent of global heating.
3. The most pressing need is to mitigate climate change by significantly and rapidly reducing greenhouse gas (GHG) emissions, within Australia, and globally, in a way that maximises equity within and between countries and generations. Mitigation cannot be achieved without addressing the social drivers of overconsumption (by some), ecological degradation, inequity and injustice.
4. Climate change presents unique challenges to Aboriginal and Torres Strait Islander Peoples, however, it also provides “opportunity for redress and empowerment of Aboriginal and Torres Strait Islander communities to lead climate action planning based on their intimate traditional and historical knowledges of Country”.⁽¹⁾
5. Commonwealth and jurisdictional governments, health systems, communities and individuals must adapt behaviours, infrastructure (e.g., water security, housing, food production) and social systems to withstand the impact of current and emerging heating. Governments should remove and reduce barriers (e.g., financial) that prevent communities and individuals from equitably adapting to climate change.
6. PHAA endorses and participates in actioning Climate and Health Alliance’s (CAHA) [Healthy, Regenerative and Just](#) framework.
7. PHAA supports the [National Health, Sustainability and Climate Unit](#), the objectives of the [National Health and Climate Strategy](#), the development of Australia’s first [National Climate Risk Assessment](#) and the resulting National Adaptation Plan.

PHAA notes the following evidence:

Please access the below resources to fully understand the context, and enormity of the causes and impacts of climate change.

8. The impacts on health from climate change are vast and will affect every person differently. The [Lancet ‘Countdown’](#) is an international research collaboration that monitors the evolving impacts of climate change on health. It includes [The 2023 report of the Lancet Countdown on health and climate change](#) and [The Lancet Countdown: Health and Climate Change in Oceania](#). See Fig. 1.0. for a diagram of the impact of climate change on health.

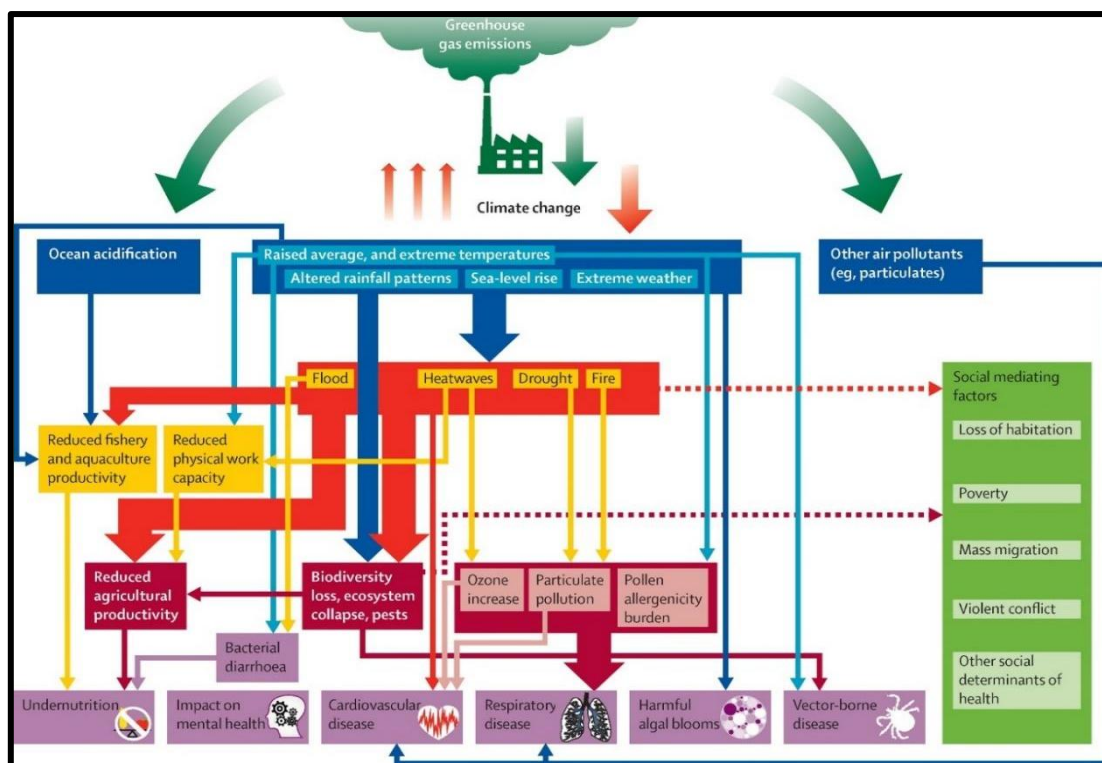


Figure 1.0, Impact of climate change on human and ecosystem health, and the social consequences.⁽²⁾

9. Climate change impacts health physically and mentally, through food and water insecurity as a result of changes in crop yields, and droughts; increases in food, waterborne and zoonotic diseases as a result of uncharacteristic temperature fluctuations; heat-related illness and death as a result of high temperatures;⁽³⁾ and increased climate anxiety, particularly among youth.⁽⁴⁾ Climate change also exacerbates and health system capacity to cope with gradual and acute health impacts of climate change.⁽³⁾
10. Aboriginal and Torres Strait Islander Peoples face uniquely complex impacts from climate change than non-Indigenous Australians. Other than physical health impacts (e.g., waterborne diseases), there are indirect ‘cascading consequences’ for Aboriginal and Torres Strait Islander communities resulting from altered natural and social systems.^(1,5–8) Additionally, “there are also non-tangible impacts such as loss of connection and culture affecting social and emotional wellbeing that are more difficult to define and quantify”.⁽¹⁾ See [Climate Change and Aboriginal and Torres Strait Islander Health Discussion Paper](#).
11. The [Our Knowledge, Our way in caring for Country](#) is the co-produced (CSIRO, National Climate Change Adaptation Research Facility, the National Environmental Science Program and Aboriginal and Torres Strait Islander people across Australia) Aboriginal and Torres Strait Islander-led caring for Country initiatives and climate adaptation best practice guidelines. The core of the guidelines are; 1) strengthening Aboriginal and Torres Strait Islander knowledges by having rights to Country, revitalising knowledges and strong cultural governance over knowledges; 2) building strong partnerships through trust, respect, mutual learning and open-mindedness; 3) sharing and weaving knowledge; and 4) building networks to share knowledge.⁽¹⁾
12. As climate change impacts biodiversity, the risk of the emergence of novel zoonotic pathogens increases.⁽⁹⁾ This is likely to occur due to changes in the geographic distribution and behaviour of

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natural host-pathogen systems.⁽¹⁰⁾ This ecological degradation puts vectors and hosts in contact with human systems. Other human-induced changes to ecosystems will exacerbate this risk, i.e. fires, and land use change.⁽¹⁰⁾

13. The Intergovernmental Panel on Climate Change [Sixth Assessment report](#) provides clear evidence of the drivers and impacts of climate change, and warns of catastrophic changes in the Earth's physical and biological systems if global heating exceeds 1.5 to 2°C above pre-industrial levels.⁽¹¹⁾
14. Australia is a signatory to [the Paris Climate Agreement \(2015\)](#), the goal of which is to limit the increase in global average temperatures to below 2°C, preferably under 1.5°C. Fossil fuel extraction and burning used for human socioeconomic activities and products is the core driver of global heating (with land use/land use change to a lesser extent).⁽¹²⁾ Australia's action to meet the Paris target (by reducing fossil fuel use and thus reducing emissions) has been 'Insufficient'.⁽¹³⁾ Australia is the world's 3rd biggest exporter and 5th biggest miner of fossil fuels by CO² potential.⁽¹⁴⁾
15. A 'gas-based transition' will not help meet emissions reductions targets. The International Energy Agency states that, to meet net zero by 2050, beyond projects already committed as of 2021, there must be no new oil and gas fields or new coal mine extensions.⁽¹⁵⁾ See [Lancet Pathfinder Commission](#), which provides practical, evidence-based pathways to net zero that also bring benefits to health.
16. Fossil fuels are currently inextricable from essential service systems within Australia, systems such as energy,⁽¹⁶⁾ production (e.g., agricultural and chemical),^(17,18) construction⁽¹⁹⁾ and transport (e.g., moving goods, materials, foods and people).⁽²⁰⁾ Hyper consumption of fossil fuels is most attributable to high income countries.^(21,22)
17. Political influence from industry and vested interest groups has delayed action on climate change mitigation and adaptation, both in Australia and globally.⁽²³⁾ Currently, Australia's political lobbying laws are such that:
 - i. The system for recording who is lobbying politicians on behalf of industries consists of a weak register and code applying only to professional lobbying firms, not the lobbyists employed within businesses and industry associations.⁽²⁴⁾
 - ii. There is no adequate linkage of data between records of political donations, spending by businesses to influence elections, lobbying activity, and lobbyists access to parliamentary buildings.^(24–26)
18. Australia's first [National Health and Climate Strategy](#) has a strong focus on decarbonising the health sector (5.3% of Australia's emissions); it acknowledges that a Health in All Policies approach should be taken by government when designing climate adaptation policies; and it recognises the role of prevention and health promotion to protect people against the health impacts of climate change.⁽²⁷⁾ The Strategy has not yet received funding (as of July 2024), but the National Health, Sustainability and Climate Unit established in 2022 has been tasked with managing the Strategy.⁽²⁸⁾
19. The Government is conducting a National Climate Risk Assessment to aid in creating a National Adaptation Plan. Both are expected to be complete by the end of 2024.

PHAA seeks the following actions:

20. PHAA supports the principles and policy actions in CAHA's [Healthy, Regenerative and Just](#) framework. *For greater detail, please refer to the linked framework above.*

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- [Framework principles \(p.20-21\)](#): Right to health; Community safety and resilience; Planetary boundaries and planetary health; Environmental protection for health and wellbeing; Health in all Policies; Intragenerational and intergenerational equity; Minimising and managing risk; Indigenous rights, recognition and reconciliation; and Citizen engagement.
 - [Framework Areas for Policy Action and Reform \(p.23\)](#): Health Promoting and Emissions Reducing Policies; Supporting Healthy and Resilient Communities; Thriving Ecosystems; Emergency and Disaster-preparedness; Education and Capacity Building; A Sustainable and Climate-resilient Health Care Sector; Research and Data; Leadership and Governance.
21. PHAA will continue the call for the Government to reduce emissions to at least meet, if not exceed Australia's commitment to the Paris Climate Agreement.
 22. All governments in Australia must invest in Australia becoming a leader in green, renewable power, abandon the expansion and subsidisation of fossil fuel industries, and maintain the current commitment against the introduction of nuclear power in Australia.
 23. PHAA will advocate for the National Health and Climate Strategy to be fully and sustainably funded by the Government and for measurable, ongoing and timely implementation with effective, multijurisdictional governance and independent evaluation of its progress. For instance, the Australian Institute of Health and Welfare [Climate change and environmental health indicators: reporting framework](#) identifies indicators that measure and monitor how climate change and the environment impact on the Australian population's health.
 24. The Government must develop equitable and evidence-informed climate resilience policies that will directly protect, preserve and promote the health of people in Australia. Including, but not limited to, resilient health care and social services, environmental and food systems, built environments, and housing, improved workplace safety laws (for heat), and policies that enable community-based adaptation, such as financial and planning support.
 25. PHAA will support climate change and health policy advocacy of PHAA Aboriginal and Torres Strait Islander members and the peak bodies in Aboriginal and Torres Strait Islander health.
 26. The Australian Government must take strong action to assist Pacific Island and other vulnerable nations to build climate resilience and negotiate emergency climate visas.
 27. PHAA will support legal frameworks to establish a Duty of Care to future generations and the inclusion of climate impacts as a leading criterion within environmental laws and government decision making.
 28. Demand greater transparency, from all levels of government, of political donations, spending by businesses to influence elections, and lobbying activity to address the barrier to climate mitigation and adaptation action caused by industry's political influence.⁽²⁹⁾
 29. Call on the Government for a One Health approach to tackling challenges caused by climate, such as emerging infectious diseases, antimicrobial resistance, and food system threats.
 30. Call on the Government to fund research and innovations that contribute to efforts that transform our global food system to one that is safe, healthy, equitable, resilient and environmentally sustainable. The desired food system is one that promotes biodiversity, reduces pollution, minimises ecological degradation and emissions through reorienting agricultural practices, enhances carbon sequestration, reduces zoonotic disease spillover risk (emergence), preferences population diets that promote human

health and environmental sustainability and prioritise social justice by considering equitable access to healthy food.⁽³⁰⁾

PHAA resolves to:

31. Support the actions and principles of the CAHA Healthy, Regenerative and Just Framework.
32. Support the rights of people who live in Australia, and the globe, to live in a healthy environment, with clean air and water, nourishing food, thriving ecosystems, and equitable opportunities to attain the highest possible standard of health.

(Adopted 2024; a merged policy: Safe Climate, adopted 2010, Safe Climate - Background Paper, adopted 2010, Health Effects of Fossil Fuels, adopted 2012, Low Emissions and Active Transport, adopted 2011, Nuclear Energy as a Response to Climate Change, adopted 2005)

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