

# A healthy climate for people and planet

Revitalising Australia's domestic policy ahead of COP28



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## About the Climate and Health Alliance

The Climate and Health Alliance (CAHA) is a national health promotion 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 over 100 member organisations (Appendix 1), representing healthcare professionals from a range of disciplines, as well as healthcare service providers, institutions, academics, researchers, and consumers.

## Acknowledgement

The Climate and Health Alliance recognises Aboriginal and Torres Strait Islander People as the traditional custodians of the land on which we live and work, and acknowledge that sovereignty of the land we call Australia has never been ceded. We commit to listening to and learning from Aboriginal and Torres Strait Islander people about how we can better reflect Indigenous ways of being and knowing in our work.

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# A note from the Chair of The Board

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[Climate change is the biggest health crisis of the 21st century](#). For those of us working on climate and health, it's a well worn phrase. We use it when we talk to the government, to the public, to health sector colleagues. We try to invoke a sense of urgency because the reality of climate change is today. For many of us in recent years, we've experienced the climate crisis right outside our window or as we breathe in the air or as we talk to our kids about their future.

In 2018 the world's leading climate scientists warned us [we've got 12 years to limit climate change catastrophe](#). Five years later we are largely [still in the same place](#). Despite clear and irrefutable evidence, the world isn't moving quickly enough towards ambitious and urgent climate action. This does not bode well for health.

Yet there is hope.

This year at COP28 – the 2023 United Nations Climate Change Conference – the first ever [Health Day and Ministerial](#) is being held. This is important progress, and reflects a victory after years of advocacy by some persistent – and noisy – health advocates (including CAHA staff and members). The day will focus on reducing the emissions from the healthcare system itself and exploring health system resilience in the face of the climate crisis.

Australia has an important part to play in this global discussion.

With the exception of the [National Health and Climate Strategy](#) currently under development, Australia has a poor record on addressing the costly health impacts of climate change. This despite being one of the most climate vulnerable countries in the developed world.

Australia's failure to recognise health in its Nationally Determined Contribution (NDC) under the Paris Agreement has been noted in [international analysis](#) and reflects a serious misalignment between the ambition of the Paris Agreement, and the implementation of Australia's NDC.

Australia must also review and adjust the trajectory of domestic policy, particularly in the areas of transport (pg 12), just transition (pg 13) and food (pg 13).

Australia's First Nations people are the longest continuing culture in the world, dating back over 60,000 years. The rich and diverse Traditional Knowledge held by First Nations peoples can contribute to climate solutions, and supports the strength and resilience of First Nations peoples, as well as Australian society at large.



For Australia to have a prosperous, climate-resilient future, protecting people's health and wellbeing must be a priority in all climate policy decisions at home and around the world. We can no longer pretend that a slow transition will achieve what is required and we need to take decisive action: there is no time left to lose.

Ahead of COP28, the Climate and Health Alliance has developed a series of recommendations for the Commonwealth Government. They are not complicated, but they do require political will and a meaningful commitment to slowing and reversing climate change. These recommendations serve as a reminder that there is still much to be done.

We call on the Australian Government to get ambitious over the next seven years to limit the climate change catastrophe and remember what's at stake if it doesn't.



**Dr Frances Peart**  
President & Board Chair

# Australia's role in a healthy COP28

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This year is one of the most important moments for health in global climate change negotiations.

From November 30 to December 12, 2023, the [United Arab Emirates](#) (UAE) will host the 28th Conference of the Parties (COP28) to the [UN Framework Convention on Climate Change](#) (UNFCCC) in Dubai.

Negotiations will focus on global climate change mitigation, adaptation and finance, with important implications for health, including:

- Mitigation with calls for fossil fuel phase out
- Finance to enable climate action
- Operationalisation of the [Loss and Damage Fund](#)
- Conclusion of the first ever [Global Stocktake](#)
- Adoption of a Framework for the [Global Goal on Adaptation](#)

To date, the integration of health into processes under the UNFCCC have been insufficient. This is disappointing, given the [Paris Agreement](#) clearly acknowledges the relevance of the right to health to climate action, and the Intergovernmental Panel on Climate Change (IPCC) warning of the human health impacts of climate change [since 1990](#).

The COP28 Presidency's two-week [thematic program](#) will feature the first ever Health Day and Climate-Health Ministerial. The aim is to build consensus on priority actions for the health system's response to climate change, paired with financing commitments for implementation.

## Impacts of climate change on health

Climate change is having serious impacts on human health, and will continue to exacerbate as global environmental change occurs.

# Why we **must act**

## The current health impacts of climate change in Australia





### Extreme weather events

Heatwaves, storms, floods and fires are increasing in Australia and will worsen leading to illness, loss of life and livelihoods, and increasing pressure on our health services.

These events are increasing the risk and incidence of climate-related mental illness and stress



### Infectious diseases

Through biodiversity loss and a warmer climate, the range and prevalence of vector-borne and zoonotic diseases is increasing, threatening a larger proportion of the Australian population.



### Sea level rise

Coastal inundation from sea level rise threatens food production, health, homes, livelihoods, and culture. Sea level rise also compounds other threats to the availability and quality of fresh water.



### Food and water security

Changing weather patterns associated with climate change are impacting agriculture, fisheries, and water supply, jeopardising rural livelihoods and endangering Australia's food and water security.



### Pollution and aeroallergens

Burning coal, oil and gas creates harmful local air pollution, estimated to cost Australia \$5.3 billion pa.

Droughts and heatwaves contribute to dust storms and bushfires, both additional sources of harmful air pollution.

Rising temperatures increase ground level ozone and aeroallergens, aggravating allergic and respiratory conditions, and amplifying the toxic effect of other air pollutants.

Pollution of our waterways, soil and water is also a major health risk. This is occurring from the overuse of toxic chemicals & plastics and other pollutants.

### Populations at greater risk

Vulnerable populations suffer disproportionately from the adverse health impacts of climate change, with people with pre-existing medical conditions, older people, young, disabled, socioeconomically disadvantaged and Indigenous Australians particularly vulnerable.

Women in particular are disproportionately impacted by climate change, as long-standing social, cultural and economic gender inequalities are exacerbated by climate-related hazards.

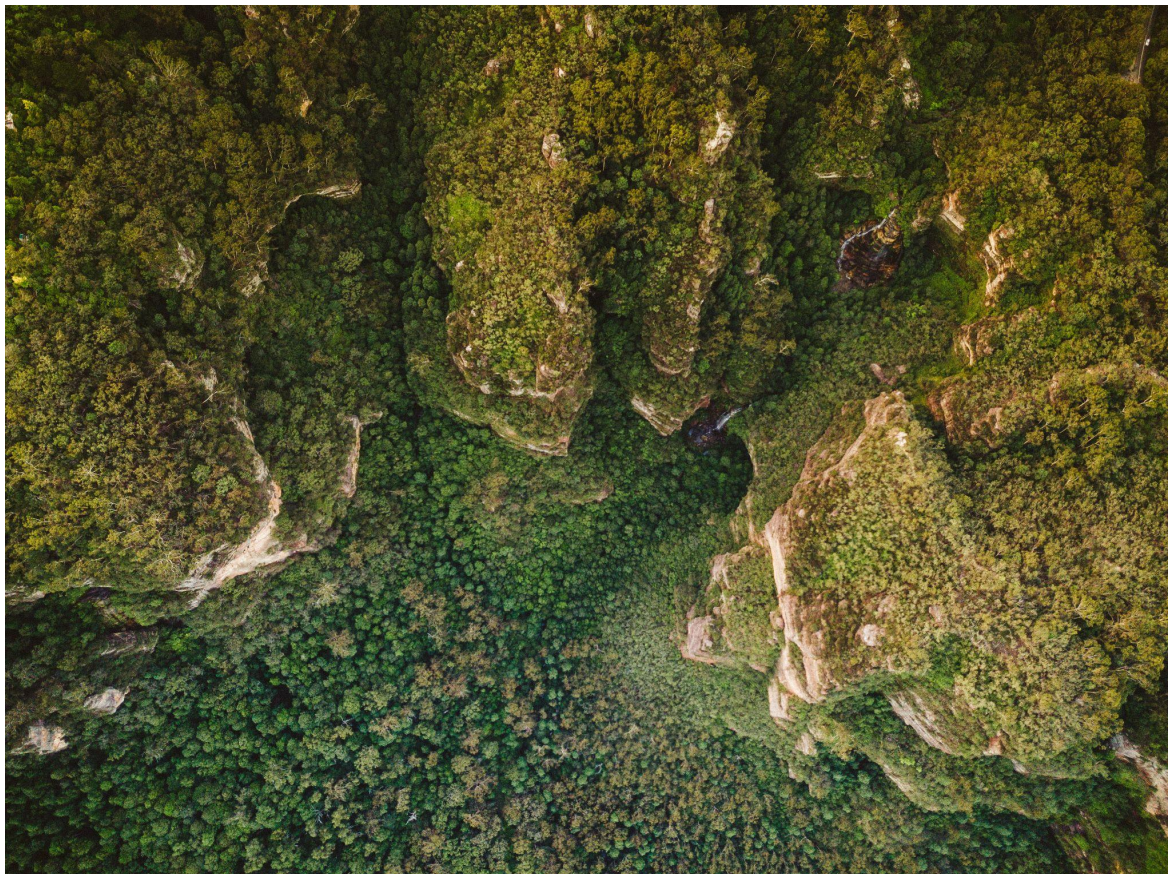
Hotter temperatures are also putting outdoor and manual labourers at increased risk of heat-related illnesses, work accidents and death, while the extreme weather events are increasing occupational risks and demands on emergency services.

Figure 1: *'Why we must act'* - submission to the Department of Health and Aged Care on the National Health and Climate Strategy, Climate and Health Alliance

Climate-sensitive health threats already cause millions of avoidable deaths annually, driving severe productivity losses, and undermining intergenerational equity. Failure to deliver mitigation and adaptation action across all sectors will result in catastrophic health-related losses and damages in every region of the world, including injury, disease and associated healthcare costs, death, damage to healthcare infrastructure, and reduced economic outputs. Meanwhile, investing in climate action now can deliver high returns on investment. It is therefore vital that health is a foundational consideration in climate action.

Climate change disproportionately affects the health of populations who are made vulnerable by injustices relating to their geographic location or individual characteristics. While impacts are felt in all world regions, people in the Global South, especially Small Island States and coastal communities, or rural agricultural communities, bear the brunt of health impacts.

Furthermore, First Nations peoples, women, children, the elderly, people with disabilities, people with non-heteronormative sexual orientation, gender identity and intersex, low-income communities, displaced populations, and other marginalised groups are most impacted at subnational level. These populations often have limited access to healthcare and inadequate housing, facing higher exposure to environmental hazards, while having fewer resources to adapt and recover.





## **Climate Action Network International:** **Health at the heart of climate action**

“The health lens is a systems-change, integrative lens – protecting and promoting health necessitates transformational shifts across all sectors of societies. This notion is encompassed by the concept of ‘wellbeing economies’, whereby economies are designed to serve people and the planet, not the other way around.

Clean air, safe water, nourishing food, and adequate shelter are all vital for human life. Climate action across sectors both [reduces health impacts and further maximises health gains](#), including through reduced air pollution from transitioning to clean and sustainable renewable energy like solar and wind as well as high energy efficiency efforts across all national economic sectors, improved nutrition from plant-rich diets, and improved physical activity from facilitating cycling, walking and public transit over private cars. Agroecology and adaptation in agriculture and water and sanitation promote food and water security, while urban green space reduces the urban heat island effect and promotes mental health.

Furthermore, addressing the health impacts of climate change requires addressing underlying inequalities between communities and countries. The injustices that are at the root of the climate crisis are the same as those that drive global and local health inequalities.

It is thus imperative that health should be seen as a foundational consideration in climate action; not merely as a ‘co-benefit’. Protection and promotion of public health are central objectives and guiding principles in climate-related policies and interventions. Taking health as a foundational consideration reflects how the impacts of climate change on health are significant, immediate and far-reaching, and therefore necessitate dedicated attention and resources.

This approach places equal emphasis on climate action and the protection of public health, seeking to maximise health gains and climate action. For instance, a just transition from fossil fuels to renewable energy will mitigate climate change (and its health impacts), and also improve air quality, thereby reducing respiratory illnesses and improving overall health.

By prioritising health as a foundational consideration, we ensure that sufficient attention, resources and specific interventions are directed toward protecting public health, addressing health inequities, and building resilience in the face of climate change. On the other hand, considering health solely as a ‘co-benefit’ of climate action reduces it to a secondary consideration, rather than a core rationale requiring the prioritisation of dedicated resources.”

## Australia's role at COP28

Historically, Australian governments have made inadequate efforts to meet its international obligation to [the Paris Agreement](#), with its Nationally Determined Contribution (NDC) falling far short of global targets.

A recent paper from the [Global Climate and Health Alliance](#), evaluating the 'healthiness' of 58 countries' NDCs, rated Australia 0 out of 18 for a failure to mention health in any way. This demonstrates just how far we have to go in adopting a '[health in all policies](#)' approach that recognises the benefits of action on climate and health.

In June 2022, the newly elected Albanese Government committed to reducing greenhouse gas emissions to 43 per cent below 2005 levels by 2030. This commitment represents a significant shift in Australia's climate policies, and opened the opportunity for climate change considerations in the business of government for intergenerational benefit. The Albanese Government also committed to a [National Health and Climate Strategy](#), currently under development, and a focus on the health system as part of the National Climate Risk Assessment.

In Australia, we are fortunate to have the wealth of knowledge and resources necessary to meet the challenge of climate change head-on. A [healthy, regenerative and just future](#) is not just possible, it is scientifically, economically, culturally, socially and technologically feasible.

By making the right choices now, we can create a future which benefits everyone, including future generations.





## Recommendations

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Over the past several decades Australia has developed a global reputation for being a 'laggard' on climate action. To restore international credibility, and make genuine contributions to its commitments under the Paris Agreement, it is crucial the Australian Government set an ambitious, evidence-based climate policy agenda ahead of the 2023 United Nations Climate Change Conference in Dubai.

The Climate and Health Alliance, together with members and allies, has developed a series of recommendations. These recommendations have been developed in line with the contemporary domestic policy landscape, whereby the Commonwealth Government can imbed impactful climate and health policy.

## **Recommendation 1 - Adopt a 'Health in All Policies' approach to climate action by:**

- Including health in Australia's Nationally Determined Contribution under the Paris Agreement
- Committing to a reduction in national greenhouse gas emissions of 75% below 2005 levels by 2030 and net zero emissions by 2035 for all sectors, including healthcare, and emissions from fossil fuel exports
- Joining the Alliance for Action on Climate Change and Health, and committing to a climate resilient health system with a 2035 net zero emissions target
- Fully funding the implementation of the National Health and Climate Strategy, the Global Green and Healthy Hospital initiative in Australia, the National Climate Risk Assessment for the health sector and the National Health Adaptation Plan
- Eliminating fossil fuel subsidies

### **COP28 Open Letter on fossil fuels from the Global Medical and Health Community**

"This year, world leaders gathering in the United Arab Emirates to take stock of their climate commitments will for the first time engage in official programming focused on health. We, the signatories of this letter, support your leadership in bringing health front and center at COP28. As global health leaders, we are committed to achieving health and well-being for all – this is not possible without a safe and stable climate.

"The Paris Agreement enshrined the "right to health" as a core obligation for climate action. Yet, communities, health workers and health systems around the world already face the alarming impacts of a changing climate. Climate change-induced extreme weather events are becoming more frequent and severe – many countries are grappling with the health consequences of extreme heat, unprecedented storms, floods, food and water insecurity, wildfires and displacement.

"For COP28 to truly be a "health COP," it must address the root cause of the climate crisis: the continued extraction and use of fossil fuels including coal, oil and gas. We call on the COP28 Presidency and the leaders of all countries to commit to an accelerated, just and equitable phase-out of fossil fuels as the decisive path to health for all".



## Recommendation 2 - Imbed climate and health co-benefits into Australia's transport systems by:

- Implementing an ambitious [Fuel Efficiency Standard](#) and the [World Health Organization Global Air Quality Guidelines](#)
- Increasing the current allocation of 0.1-2% of transport budget towards "non-motorised transport" up to 20% in alignment with [United Nations recommendations](#)
- Developing a comprehensive approach to loss and damage that encompasses the wider externalities of transport systems including health and social costs, agglomeration benefits and associated productivity

### **Hawke's Bay District Health Board- "Go Well" Travel Plan**

Hospitals and outlying clinics in the Hawke's Bay district created a travel plan to remove barriers preventing people using sustainable transport to access services. The desired outcome of the "Go Well" Travel Plan was to change the way staff travelled to the hospital once a fortnight, or a 10% mode shift. The plan hoped to address safety needs, accessibility, availability, promote exercise, reduce the environmental impact & carbon footprint of travel and reduce 'wasted' or unnecessary visits.

A comprehensive travel plan was implemented including 65 scope items and 7 more to be completed as part of business as usual. Projects included building more on-site facilities for cyclists, encouraging walking and cycling, expanding free patient and subsidising staff bus transport, staff carpool programme and funding 'Go Well' through a parking charge of \$1/day. Success was measured by mode shift through annual travel surveys, customer parking complaints and patient and staff bus trips.

Hawkes Bay District Health Board found that by having a travel plan in place rather than just paid parking made the uptake much easier. They provided options to patients and staff and it helped explain what the parking fees were to be used for.

The program was successful, achieving an increase in both staff and patients opting for sustainable transport choices when travelling to the hospital.

### **Recommendation 3 - Commit to and implement a just transition by:**

- Committing to the co-design of climate and health policy with First Nations peoples, underpinned by genuine engagement and co-design principles. The Australian Government should seek to listen to and learn from First Nations Elders, Knowledge holders and communities about what the priorities are for tackling the health impacts of climate change
- Supporting and funding initiatives that recognise First Nations Knowledges, capacity and strengths, and empower First Nations communities to respond and build resilience to climate threats
- Developing policy and delivering funding to communities affected by a transition away from fossil fuel extraction, whilst delivering a moratorium on all new coal and gas projects
- Investing in the development of climate and health indicators under the Measuring What Matters Framework and Statement

#### **Climate change impacts on Aboriginal and Torres Strait Islander health and wellbeing**

Prior to colonisation, Australia consisted of more than 250 Nations representing a broad diversity of cultures and knowledges. Central to all Aboriginal and Torres Strait Islander cultures is the holistic nature of health and wellbeing. Good health is dependent on respectful and reciprocal relationships to Country, culture, spirituality, community and family. It is a cultural responsibility to look after and respect oneself (connection to body, mind and emotions), each other (family, kinship, community) and the environment (connection to Country). Aboriginal and Torres Strait Islander people had unfettered access to food and water within their traditional lands and managed these resources sustainably, taking cues from the environment and working to protect it for future times and generations. These traditional knowledges, developed through processes of observation, learning and adapting over millennia, have been transmitted through generations as lore and cultural practice, forming a code for maintaining balance with one another, with Country and other living beings.

*Credit: Discussion Paper. Prepared for the Lowitja Institute and the National Health Leadership Forum by Healthy Environments and Lives (HEAL) Network & Centre for Research Excellence in Strengthening Systems for Indigenous Health Care Equity (CRE-STRIDE)*

### **Recommendation 4 - Safeguard food security by:**

- Imbedding food security into Australia's food regulatory system including the Food Standards Australia and New Zealand Act 1991 and the Australian Dietary Guidelines
- Prioritising resilience, diversification and low carbon production for the agricultural sector

# Appendix 1: Members of the Climate and Health Alliance

## As at November 2023



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