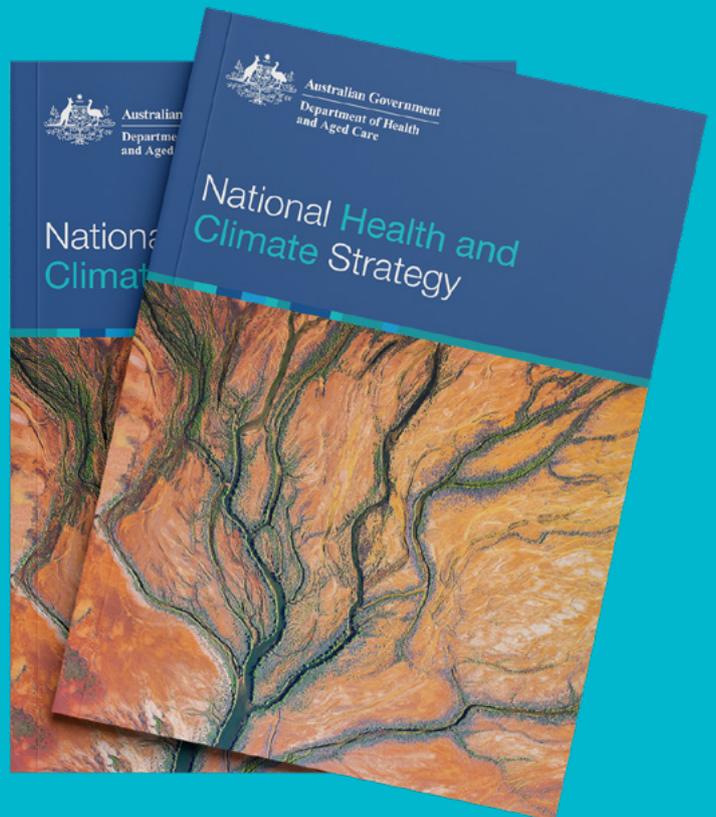


How the **National Health and Climate Strategy** supports health and saves lives

December 2023



About Climate and Health Alliance

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 (Appendix 1), representing healthcare professionals from a range of disciplines, as well as healthcare service providers, institutions, academics, researchers, and consumers.

Acknowledgements

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 First Nations ways of being and knowing in our work.

The Climate and Health Alliance would like to acknowledge the extraordinary work of the climate and health sectors — our member organisations, the health workforce, peak bodies for health, First Nations organisations, unions and other civil society supporters — in advocating for national action on climate and health. In particular, we would like to acknowledge the decades' long effort of CAHA's Founder Fiona Armstrong, whose leadership and tenacity was invaluable in bringing this issue into the spotlight.

The Climate and Health Alliance would also like to acknowledge the Hon. Ged Kearney MP, the Hon. Mark Butler MP, Madeleine Skellern and all the staff of the National Health, Sustainability and Climate Unit in the Department of Health and Aged Care for their commitment to safeguarding the health and wellbeing of current and future generations in the face of climate change.

Report contributors

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About the National Health and Climate Strategy

Challenges posed to human health by climate change are significant and accelerating, with 2023 having been declared the [hottest year on record](#). Climate change directly impacts human health, and increases both demand for health services and stress on the people and institutions providing those services.

It is clear that action on climate and health is hugely beneficial for social, environmental, cultural and economic outcomes. However, these benefits can only be achieved with urgent and decisive action, and the funding to execute it.

After over a decade of advocacy from the climate and health sectors, in August 2022, [Health Minister Mark Butler announced the Labor government's commitment to a National Health and Climate Strategy](#), and that the Strategy had the support of all state and territory Health Ministers.

Following a series of roundtables, and consultation on a draft strategy Australia's first National Health and Climate Strategy (the Strategy) was launched on 3 December 2023 by the Hon. Ged Kearney MP, Assistant Minister for Health and Aged Care at the 2023 United Nations Conference of the Parties (COP28) in Dubai. The Strategy was developed in "[recognition of the urgent need to address the health risks associated with climate change](#)...", marking a significant shift in Australia's domestic policy on the climate and health nexus.

Throughout the consultation processes, CAHA called for a [Health in All Policies](#) (HiAP), whole of government approach, where climate and health leadership is supported throughout all Commonwealth Government policy planning and promotes work of the state and territory governments. As per the CAHA-led '[Healthy, Regenerative and Just](#)' framework: '*Achieving a better future involves a clear-eyed look at current structural political, social, economic, environmental and public health challenges, identifying and implementing integrated strategies. The approach must be holistic. We must move beyond silos in terms of public dialogue, policy portfolios, investment strategies, political and business priorities, and leadership*'. This imperative requires a nationally coordinated approach, led by the Commonwealth and with the support of the Department of Health and Aged Care (the Department), to embed climate and health outcomes into the business of government. CAHA called for the Strategy to clearly outline how the Department will take a whole of government approach to safe-guarding health in the face of climate change. With the support of our members and allies, CAHA recommended this approach be coupled with tangible mechanisms for implementation, including science-based targets, governance structures and funding.

CAHA is pleased to see the Strategy has made significant progress towards that end, including:

- The four objectives — health system resilience, health system decarbonisation, international collaboration and health in all policies — which seek to take a whole of health system approach;
- The recognition of preventive health as a mitigation tool for reducing health sector emissions;
- The adoption of five principles — health equity and the right to health, One Health and Planetary Health, First Nations leadership, population health and prevention, and evidence-informed policymaking — which seek to take a holistic, rights-based approach to policy making;
- The recognition of colonisation as a driving factor in inequity faced by First Nations Peoples in Australia;
- Inclusion of actions related to specific aspects of the Strategy; and,
- Enablers that recognise key levers to successful implementation of the Strategy including workforce, research and governance.

In addition to the release of the Strategy, the Australian Government affirmed its commitment to addressing the climate-health nexus at COP28 by participating in the world's first [Climate-Health Ministerial](#) and being a signatory to the [COP28 UAE Declaration on Climate and Health](#). These actions sent a clear signal to the rest of the world that Australia is now back at the climate table with a clear, health-focused agenda.

Ahead of COP28, CAHA's policy report, '[A healthy climate for people and planet](#)', outlined a series of policy recommendations for how the Australian Government could restore its international reputation via some important domestic policy commitments.

CAHA is pleased to see several of these recommendations adopted via the Strategy, including:

- A commitment to the inclusion of health in Australia's next Nationally Determined Contribution;
- Joining the [Alliance for Action on Climate Change and Health](#);
- Inclusion of health in the National Climate Risk Assessment for the health;
- Development of the National Health Adaptation Plan; and
- Imbedding food security into the Australian Dietary Guidelines.

The Climate and Health Alliance would like to acknowledge the Hon. Ged Kearney MP, and the Hon. Mark Butler MP in fulfilling their election commitment to develop the Strategy. We look forward to continued collaboration and partnership.

CAHA would also like to acknowledge Madeleine Skellern and all the staff of the National Health, Sustainability and Climate Unit in the Department, for their hard work collaborating with stakeholders throughout the development process, and responding to experts so as to develop an evidence-informed Strategy.

With climate and health now firmly on the domestic and international policy agenda, it is crucial we maintain momentum through strong, ambitious and urgent implementation.



What's next for climate and health in Australia?

As 2023 draws to a close, and people from around the world return home from COP28, stakeholders are now turning their attention to what is next for climate and health in Australia.

CAHA looks forward to continuing to work closely with the Commonwealth Government to ensure the urgent and effective roll out of the ambitions of the Strategy. CAHA has completed an initial analysis of the Strategy to inform members and allies about what will be required and need to be prioritised for implementation.

CAHA collaborated with members and allies to co-design a series of metrics that could indicate how the Strategy addresses implementation, where the gaps are and what should be the focus for climate and health stakeholders in 2024. The metrics are focused on four priority areas:

- Embedding a **whole of government** approach to ensure a comprehensive Strategy, underpinned by social and environmental determinants of health
- Genuine inclusion that **prioritises First Nations** peoples in developing and implementing climate and health policy solutions
- An ambitious and comprehensive approach to **greening the health sector**
- Inclusion of **mechanisms to enable implementation** to meet the urgency of the climate and health crisis

CAHA acknowledges the wide variety of priorities within our membership — and the broader climate and health sectors — thus, where possible, metrics focus on broad mechanisms for successful implementation that would result in an impactful Strategy.

Scorecard on the Implementation of the National Health and Climate Strategy

CAHA has developed an initial scorecard assessing the inclusion of key themes for implementation within the Strategy. The purpose of the scorecard is to apply a simple traffic light rating that evaluates the ability for the Strategy to be successful if implemented in its current form. CAHA recognises processes are currently underway via the 2024/25 Commonwealth Budget to fund the implementation of the Strategy. CAHA will publish an updated scorecard mid-year to further track the implementation of the Strategy.

Scorecard Key



= Meets expectations



= Needs more detail



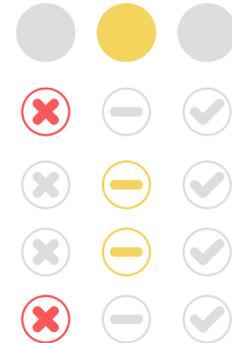
= Failed to address

Scorecard on Implementation of the National Health and Climate Strategy



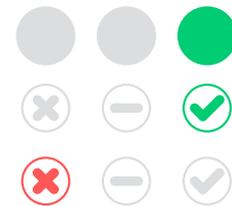
Whole of government approach.

- Establishes a cross jurisdictional, cross portfolio advisory board
- Includes governance arrangements
- Commits to health in all policies
- Includes health in climate impact assessments



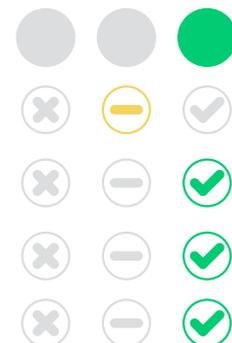
Prioritises First Nations peoples.

- Recognises First Nations peoples engagement
- Establishes and funds co-design governance structures



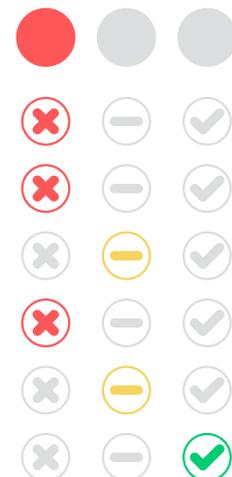
Greening the healthcare sector.

- Commits to a sector decarbonisation target
- Commits to international collaboration on decarbonisation
- Commitment to waste reduction
- Includes scope 1, 2, and 3 emissions



Mechanisms to enable implementation.

- Provides adequate government resources
- Publication of an implementation plan
- Commits to investing in implementation
- Funding for decarbonisation
- Funds climate and health research
- Includes consumers and vulnerable populations



For more information visit caha.org.au/nhacs

Figure 1: 'Scorecard on Implementation of the National Health and Climate Strategy'



Implementation of a ‘whole of government’ approach

CAHA has consistently advocated for the adoption of a whole of government, HiAP approach to the Strategy. All dimensions of climate change are interlinked with human health. Therefore, action to reduce the health risks from climate change requires working across all sectors and all levels of government. It is crucial the Department is a leading contributor to the development of national response to the climate crisis. The overall focus of the Strategy should be strongly directed towards reducing the current risks to population health from climate change, and to maximise the health co-benefits of carefully designed climate mitigation and adaptation actions.

How well does the Strategy implement a whole of government approach?



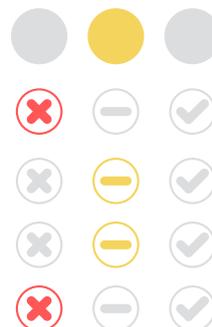
Whole of government approach.

Establishes a cross jurisdictional, cross portfolio advisory board

Includes governance arrangements

Commits to health in all policies

Includes health in climate impact assessments



Establishes a cross jurisdictional, cross portfolio advisory board



While the Strategy sets out its intention to cross-jurisdictional collaboration via Enabler 4 (collaboration and governance) and Action 7.5 (reviewing health and climate governance) and several actions that include working with state and territory jurisdictions, it does not commit to the establishment of a inter-jurisdictional, cross-portfolio advisory board or similar. Further, the Strategy does not make any direct commitment to cross-portfolio collaboration that would see health embedded into climate policies. In Actions 6.6-6.11, the Strategy does make a commitment to consider the health impacts of climate change in policy areas outside the Department, but it remains unclear how collaboration on these actions would occur.

Governance arrangements for all levels of government on the implementation of the Strategy



While the Strategy sets out its intention to cross-jurisdictional collaboration via Enabler 4 (collaboration and governance) and Action 7.5 (reviewing health and climate governance) and several actions that include working with state and territory jurisdictions, it makes no commitment or timeline for a commitment to establishing governance arrangements for all levels of government on the implementation of the Strategy. There are currently no public commitments to the implementation of the Strategy.

Commitment to health in all policies underpinned by equity, inclusion and intergenerational health



The Strategy includes significant commitment to HiAP in the activities of the Department and a number of key agencies. Objective 4 (Health in all policies) is to *'support healthy, climate-resilient and sustainable communities through whole-of-government action which recognises the relationship between health and climate outcomes'*. The Strategy connects these objectives to the five principles to *'help to ensure that action is informed by evidence, promotes linkages between human health and environmental health, and is undertaken in a culturally safe and just way'*. In particular, Principle 1 (Health Equity and the Right to Health) and the recognition of priority populations throughout the Strategy set the intention to embed equity, inclusion and intergenerational health in the implementation of the Strategy.

While there are several actions that are driven via other portfolio areas, the Strategy does not make any commitment to working across portfolio areas, which can ensure a holistic HiAP approach across government. The Strategy links many of its actions to the Australia Centre for Disease Control (CDC). However, with the establishment of the CDC still underway, it is unclear what structure the implementation of the Strategy can take. The Strategy does not include a recognition of fossil fuel extraction and dependency as the driving force behind ill health in the context of climate change.

Inclusion of health in impact assessments of infrastructure and energy planning



While the Strategy outlines the importance of climate and health risk assessments as an important tool (page 26), it does not commit the Department to supporting any portfolios in developing health risk assessments in climate policy. The Strategy, via Action 3.7 (Developing options for climate and health monitoring, data and indicators), outlines that it will *'explore options for developing a framework'*, however there is no mention of a health impact assessment. The Strategy does not include a recognition of fossil fuel extraction and dependency as the driving force behind ill health in the context of climate change, and makes no commitment to supporting health-informed policy development to phase out fossil fuels.



Implementation that prioritises First Nations peoples

Australia’s First Nations people are the longest continuing culture in the world, dating back over 65,000 years. Sovereignty over the land we call Australia has never been ceded. The rich and diverse Traditional Knowledge held by First Nations peoples is crucial to the successful implementation of the Strategy. CAHA strongly supports the prioritisation of First Nations peoples and recommendations from our First Nations members, allies and other First Nations peoples and organisations who contributed to the development of the Strategy. CAHA seeks to learn from First Nations peoples, and imbed Aboriginal and Torres Strait Islander ways of knowing and being in our work. The Australian Government should seek to listen to and learn from First Nations Elders, Knowledge holders and communities about what the priorities are for the implementation of the Strategy.

How well does the Strategy prioritise First Nations peoples?

	Prioritises First Nations peoples.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
	Recognises First Nations peoples engagement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Establishes and funds co-design governance structures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Recognises the importance of climate and health policy to First Nations peoples that is underpinned by genuine engagement and self-determination principles. 

The Strategy makes significant commitment to the co-design of climate and health policy with First Nations peoples. Principle 3 (First Nations leadership) clearly sets out commitments to work with First Nations peoples, and this is reinforced throughout the Strategy and in Actions 2.3, 3.4, 3.6, 6.7 and 6.10. The Strategy acknowledges colonisation as a determining factor of health outcomes related to climate change for First Nations peoples. The Strategy also recognises the importance of the inclusion of First Nations expertise and knowledge in international climate discussions.

Supports and funds initiatives that recognise First Nations Knowledges, capacity and strengths, and empower First Nations communities to respond and build resilience to climate threats with co-design principles 

While the Strategy recognises the unique impacts of climate change on First Nations peoples health and wellbeing, it makes no commitment to implementation, either by funding or the development of governance structures.



Enabling the greening of the health sector

CAHA strongly supports the inclusion of decarbonisation of the health sector as a fundamental activity of the Strategy. Implementation of decarbonisation policy should be fostered by the Commonwealth via funding and governance structures that can support state and territory jurisdictions. The prevention of disease and injury is the most certain way of mitigating the health sector’s environmental footprint, and should therefore be a central aspect of mitigation planning, and coupled with funding.

How well does the Strategy enable a greener health sector?



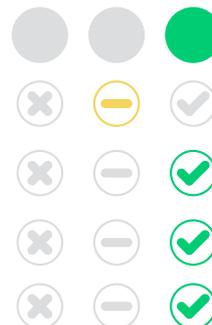
Greening the healthcare sector.

Commits to a sector decarbonisation target

Commits to international collaboration on decarbonisation

Commitment to waste reduction

Includes scope 1, 2, and 3 emissions



A decarbonisation target for the health sector and associated funding to execute



One of the clear focuses of the Strategy is to reduce emissions from the health sector. Objective 2 (build a sustainable, high-quality, net zero health system) clearly outlines the need for a low-carbon, high-value health system and there are a series of clear actions throughout the Strategy which would be effective if implemented. While the Strategy does commit to the development of ‘a health system decarbonisation roadmap, and as part of this negotiate an emission reduction trajectory for the health system’, the Strategy does not set a decarbonisation target for the health sector.

Commits to international collaboration on decarbonisation



The Strategy makes a significant commitment to build international collaboration on decarbonisation via Objective 3 (collaborate internationally to build sustainable, climate-resilient health systems and communities). The Strategy also sets out clear actions to deliver this objective including Action 5.2 (Collaborating to decarbonise international supply chains), Action 5.3 (Joining the Alliance for Transformative Action on Climate and Health) and Action 5.4 (Incorporating health consideration into Australia’s next Nationally Determined Contribution under the Paris Agreement).

Commitment to waste reduction throughout health services including single use equipment and food waste

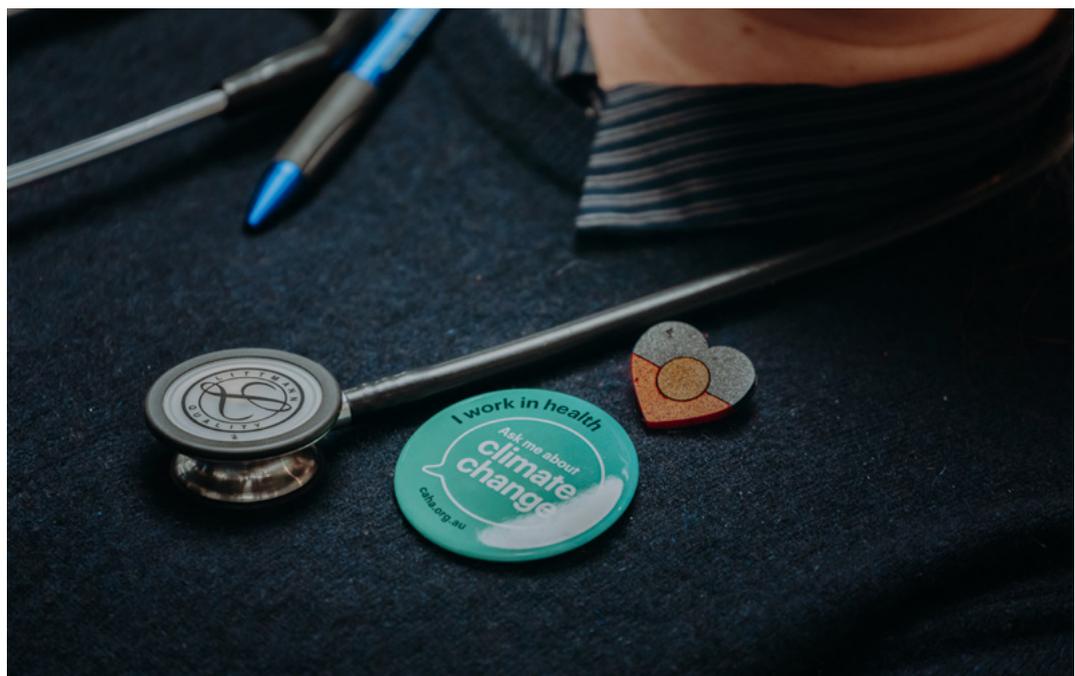


The Strategy makes significant commitment to waste reduction throughout health services. Waste reduction features throughout Actions 4.1 to 5.3, and pending their implementation, should result in significant emissions reductions.

Inclusion of scope 1, 2 and 3 emissions



The Strategy makes specific commitment to the inclusion of scope 1, 2 and 3 emissions in its ambitions for healthcare decarbonisation. The Strategy includes this commitment in Actions 4.1 to 4.4. The Strategy also recognises that a key challenge to reducing the full scope of emissions across the health sector will include how to ‘improve health, equity and patient experience, whilst reducing waste and emissions’.





Mechanisms to enable implementation of the Strategy

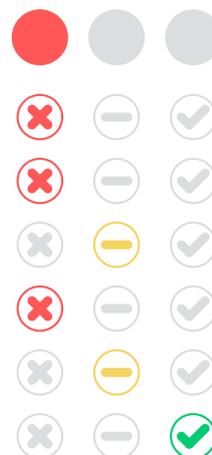
CAHA strongly supports the urgent funding and implementation of the Strategy, and recommends the Commonwealth Government commit to this. For the Strategy to be impactful, it must be a living document that is updated based on current evidence. The Strategy must also be implemented in its entirety, with funding and governance structures to ensure its success. Implementation should also set clear timelines for the achievement of goals and targets in the short-, medium- and long-term, and avoid the pitfalls of short-term political cycles.

How well does the Strategy commit to its implementation?



Mechanisms to enable implementation.

- Provides adequate government resources
- Publication of an implementation plan
- Commits to investing in implementation
- Funding for decarbonisation
- Funds climate and health research
- Includes consumers and vulnerable populations



A fully staffed and funded National Health, Sustainability and Climate Unit that is equipped to report on the efficacy and implementation of the Strategy



The Strategy does not make any commitment to staff or fund the National Health, Sustainability and Climate Unit as the primary agency through which the Strategy will be implemented, or any other agency.

Publication of an implementation plan that includes SMART goals, monitoring, evaluation and a sense of urgency



The Strategy does not make any commitment to fund the development of an implementation plan, nor have there been any public commitments to either developing governance structures or fund any actions that might come from the Strategy as it stands or via an implementation plan.

Investment in projects and systems needed for implementation of the Strategy including adaptation planning across the health sector, local government, industry and the community sector



The Strategy makes significant commitment to adaptation planning across the health sector, local government, industry and the community sector via Actions 3.1, 3.2, 3.3, 3.4, 3.5, 3.8, 3.9, 3.10, 3.12, 4.5, 5.3, 6.1, 6.2, 6.3, 6.4, 6.5, 6.7, 6.8, 6.9, 6.10, 6.11 and 7.1. The Strategy does not make any commitment to projects or systems needed for the implementation of the Strategy, nor has there been any public comment on investment in projects and systems needed for implementation.

Establishment of a funding program to support health system decarbonisation and climate change health risks through workforce development, promotion and dissemination of effective decarbonisation strategies, including upstream prevention



While the Strategy does include ambitions to address workforce development via Action 7.1 (Mobilising the health workforce to lead action on climate and health), and include the importance of upstream prevention, there are no funding commitments to decarbonisation efforts.

Funding for climate and health research that takes a holistic, systems view across portfolio areas impacted by climate and health i.e. Transport, Housing, Health, Indigenous Australians



The Strategy recognises the important role of research in the development of impactful policy via Enabler 2 (Research and Innovation). The Strategy makes commitments to this enabler through Action 7.2 (Scan of Australian health and climate research) and 7.3 (National Health and Medical Research Council Targeted Call for Research). The Strategy does not commit to funding climate and health research that takes a holistic, systems approach with a focus on areas across society impacted by climate change including transport, housing, health and First Nations peoples.

Inclusion of consumers, youth and priority populations in decision making and implementation



The Strategy has significant inclusion of the importance of policy solutions for priority populations including First Nations peoples and youth. Action 3.2 (Developing a National Health Adaptation Plan) specifically speaks to the importance of the inclusion of priority populations in risk assessments. Consumers are included in the Strategy via Enabler 4 (collaboration and governance) and in actions associated with decarbonisation planning for the health sector.

Climate and Health in 2024

The case for ambitious action on the climate-health nexus has never been more urgent. 2023 is officially the hottest year on record. Without rapid implementation of the National Health and Climate Strategy, climate change will overburden our health systems, compromise people's health and ultimately cost lives.

CAHA welcomes the launch of the Strategy, and congratulates the Hon. Ged Kearney MP and the dedicated team of the National Health, Sustainability and Climate Unit on their commitment to its development.

The COP28 UAE Declaration on Climate and Health — of which Australia is a signatory — stresses *'the importance of addressing the interactions between climate change and human health and wellbeing'*. With the world watching, and a bid to co-host COP31 with Pacific partners underway, Australia has the opportunity to be a global leader on climate and health. It's now the Commonwealth's moment to lose.

In 2024, it will be crucial for civil society to continue working with the Commonwealth, State and Territory governments to ensure the Strategy is implemented in its entirety. Without a commitment to funding or implementation, it remains unclear what impact the Strategy will have. To ensure its success, governance structures should be established with urgency and funding must be made available to support implementation.

The Commonwealth Government must also address the underlying driver of climate change — fossil fuel production.

There is little choice for our leaders but to step up and address the health effects of climate change with urgency. The 26 million people living in Australia today, and the generations of Australians to come, depend on it.

We look forward to ongoing engagement with members, allies and government stakeholders in the implementation of the Strategy, and will update this scorecard mid-year 2024.



Appendix

Our Members





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