Australian Government
Department of Health and Aged Care

NATIONAL HEALTH AND CLIMATE STRATEGY

Detailed submission form

This form allows you to provide responses to the full set of questions in the Consultation Paper available here.

Alternatively, you may wish to complete the briefer online survey available here.

Please submit this form in Word format to Health.Climate.Consultation@health.gov.au.

Respondent details

What is your name?
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What is your organisation?
Community industry Group

Have you read and agreed to the Privacy Statement? (NB we will not be able to use your submission unless you tick this box)
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Do you identify as Aboriginal and/or Torres Strait Islander? (Yes/No/Prefer not to say)
☐ Yes ☒ No ☐ Prefer not to say

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Questions for feedback from the Consultation Paper

Introduction

1. How could these objectives be improved to better support the vision of the Strategy?
Implement ambitious and targeted measures to swiftly reduce greenhouse gas emissions from the health system. This involves adopting renewable energy sources, improving energy efficiency, and promoting sustainable practices in healthcare facilities and operations.

Enhance the resilience of the health system and communities to effectively anticipate and respond to the health impacts of climate change. This includes integrating climate considerations into health infrastructure planning, emergency preparedness, and service delivery to ensure adaptive responses.

Foster collaboration and coordination across sectors such as public health, environment, and social welfare to maximise the synergies between climate and public health policies. By addressing social and cultural determinants of health, the adverse impacts of climate change on vulnerable populations can be mitigated.

Promote research and knowledge-sharing to better understand the intersection of climate change and health, identify emerging risks and develop and implement evidence-based strategies. This supports informed decision-making and targeted interventions.

Enhance public awareness and engagement through effective communication and educational campaigns, to empower individuals and communities to take sustainable actions. This includes promoting behaviour change, sustainable transportation, and eco-friendly practices.

Engage in international partnerships and agreements to address global climate change challenges, share knowledge, and leverage best practices. Active participation in international efforts enable Australia to have a broader impact and access valuable resources and expertise. |

2. How could these principles be improved to better inform the objectives of the Strategy?
Elevate the principle of First Nations leadership to empower First Nations communities and recognise the importance of their active involvement in decision-making processes regarding climate and health policy. This includes providing resources, support, and capacity-building opportunities to ensure their knowledge and experiences are valued and integrated into decision-making at all levels.

Expand the principle of tackling health inequities to explicitly address social justice. Acknowledge that marginalised communities and vulnerable populations are disproportionately affected by climate change and commit to addressing systemic inequities through targeted interventions. Promote equitable access to resources, services, and opportunities, considering the social determinants of health and addressing underlying structural factors contributing to health disparities.

Emphasise proactive prevention measures to mitigate the health impacts of climate change. Prioritise primary, secondary, and tertiary prevention strategies across the lifespan to reduce |

disease burden and enhance mitigation and adaptation efforts. Incorporate health promotion, education, and behaviour change initiatives to foster a culture of prevention.

Strengthen the principle of One Health by recognising the interconnectedness of human health, animal health, and ecosystem health. Promote collaboration among the health, environment, agriculture, and veterinary sectors to comprehensively address climate change impacts. Safeguard biodiversity, ecosystem services, and promote sustainable land and resource management practices.

Enhance evidence-informed policymaking by emphasising the importance of robust scientific evidence while embracing the precautionary principle. Acknowledge the need for proactive measures based on available evidence in the face of uncertainty. Prioritise research, monitoring, and data collection to improve understanding and decision-making regarding climate change and health.

Broaden partnership-based working to encourage inclusive and diverse multi-stakeholder collaboration. Foster meaningful engagement and active participation from government agencies, communities, patients, healthcare providers, research institutions, industry, non-profit organisations, and educational bodies. Facilitate knowledge exchange, co-design of interventions, and coordinated implementation of the Strategy across all levels of government and society.

3. Which of the various types of greenhouse gas emissions discussed above should be in scope of the Strategy's emission reduction efforts?

The National Health and Climate Strategy should encompass all categories of greenhouse gas emissions discussed in the paper to effectively reduce emissions. This includes addressing direct (Scope 1) and indirect (Scope 2 and Scope 3) emissions that occur within and outside the health system's boundaries. By addressing all sources of emissions, the Strategy can contribute comprehensively to national emission reduction targets and align with the commitment to achieve net-zero emissions by 2050.

Scope 1 Emissions: These emissions directly result from the activities of the health system and occur within its organisational boundaries. Examples include emissions from anaesthetic gases, diesel generators, pressurised metered dose inhalers used by patients, and fuel use in healthcare vehicles such as ambulances and patient transport. The Strategy should include measures to mitigate and reduce these direct emissions through improved energy efficiency, adoption of cleaner technologies, and sustainable practices within healthcare facilities.

Scope 2 Emissions: These are energy-related indirect emissions that occur outside the health system's organisational boundaries but result from the generation of electricity consumed by the system. This includes emissions from burning fossil fuels (such as coal and natural gas) at power stations to produce the electricity used in hospitals and other healthcare facilities. The Strategy should address scope 2 emissions by promoting the use of renewable energy sources, energy conservation, and energy efficiency measures within the health system.

Scope 3 Emissions: These are other indirect emissions that occur outside the boundaries of the health system but are influenced by its actions. This includes upstream emissions related to the manufacture of medical equipment used in hospitals and emissions from staff commuting to work. Downstream emissions, such as those from waste incineration, should also be considered. The Strategy should explore opportunities to reduce scope 3 emissions through sustainable procurement practices, promoting low-carbon alternatives, and waste management strategies.

Furthermore, the Strategy should account for emissions associated with patient and visitor transport, which may fall outside the traditional definition of scope 1, 2, and 3 emissions. These emissions should be addressed through initiatives that promote sustainable transportation options, public transit, active transportation, and telehealth services to minimise the carbon footprint of healthcare-related travel.

4. What existing First Nations policies, initiatives, expertise, knowledge and practices should the Strategy align with or draw upon to address climate change and protect First Nations country, culture and wellbeing?

To address climate change and safeguard the country, culture, and wellbeing of First Nations people and country, the National Health and Climate Strategy should align with and draw upon existing First Nations policies, initiatives, expertise, knowledge, and practices. This alignment ensures a culturally responsive and inclusive approach that respects and protects First Nations country, culture, and wellbeing in the face of climate change.

Recognise and respect the invaluable First Nations knowledge passed down through generations. Incorporate traditional practices, land management techniques, and sustainable resource use embedded in First Nations cultures to enhance climate change adaptation and mitigation efforts.

Align the Strategy with the principles and objectives outlined in the United Nations Declaration on the Rights of Indigenous Peoples UNDRIP (United Nations Declaration on the Rights of Indigenous Peoples | Division for Inclusive Social Development (DISD), which acknowledges the rights of Indigenous peoples to their lands, territories, resources, and self-determination. Implementing the Strategy in accordance with UNDRIP ensures a rights-based approach and meaningful engagement with First Nations communities.

Collaborate and partner with Indigenous-led climate change initiatives and organisations that have been working on addressing climate change impacts on Indigenous lands and communities. Foster knowledge exchange, support capacity-building, and amplify Indigenous voices and perspectives.

Incorporate and support traditional fire and land management practices, such as cultural burning, (Cultural burning practices in Australia - Background Paper.pdf (royalcommission.gov.au), which have proven effective in restoring and maintaining healthy ecosystems. Work with First Nations communities to revive and promote culturally appropriate land management techniques.

Align the Strategy with existing Indigenous health and wellbeing frameworks, such as the Aboriginal and Torres Strait Islander Health Plan (National Aboriginal and Torres Strait Islander Health Plan 2021–2031 | Australian Government Department of Health and Aged Care) and regional/community-specific frameworks. Emphasise holistic approaches, cultural safety, community engagement, and self-determination in addressing health and wellbeing disparities.

Adopt a collaborative and partnership-based approach with First Nations communities, engaging them as equal partners in co-designing and implementing climate change initiatives. Support Indigenous governance structures, build respectful relationships, and ensure decision-making power and control reside with Indigenous peoples.

Recognise and uphold the significance of land rights for First Nations peoples (Land Rights and Native Title | Common Ground). Support land rights and empower First Nations in land management decisions to preserve cultural practices, protect biodiversity, and mitigate climate change impacts.

Value and prioritise cultural resilience and community-led solutions in addressing climate change. Support community-led projects, knowledge exchange, and capacity-building to empower First Nations communities in developing and implementing climate change adaptation and mitigation strategies rooted in their unique cultural contexts.

5. What types of governance forums should be utilised to facilitate co-design of the Strategy with First Nations people to ensure First Nations voices, decision-making and leadership are embedded in the Strategy?

Governance structures should be approached with a commitment to cultural safety, respect for Indigenous protocols, and a genuine willingness to listen, learn, and act upon the insights shared by First Nations people. The governance structures should be flexible, inclusive, and adaptable to the diverse needs and aspirations of different First Nations communities across Australia. To facilitate co-design of the Strategy with First Nations people and ensure their voices, decision-making, and leadership are embedded, the following types of governance forums could be utilised.

Establish a dedicated First Nations Advisory Committee comprising representatives from diverse First Nations communities, organisations, and knowledge holders. This committee should have a formal role in shaping the Strategy, providing advice, and ensuring First Nations perspectives are integrated into decision-making processes.

Convene a national forum that brings together First Nations leaders, health experts, community representatives, and relevant stakeholders. This forum should provide a platform for sharing experiences, knowledge, and best practices related to Indigenous health and climate change, as well as an opportunity for direct input into the development and implementation of the Strategy.

Conduct regional and local consultation workshops that engage First Nations communities directly in the co-design process. These workshops should facilitate meaningful discussions, enable community members to share their experiences, insights, and priorities, and ensure their perspectives are reflected in the Strategy's development.

Organise cultural healing circles and storytelling sessions, guided by Indigenous protocols, to create a safe and culturally appropriate space for dialogue. These circles and sessions can foster trust, encourage open sharing of knowledge and experiences, and provide opportunities for First Nations peoples to express their aspirations and concerns regarding climate change and health.

Collaborate with existing Indigenous governance bodies at national, regional, and local levels. This can include partnerships with Indigenous Health Leadership Councils, Land Councils, and other representative bodies. By working closely with these entities, the Strategy can ensure that Indigenous governance structures are respected, and decision-making processes are guided by Indigenous principles and protocols.

Prioritise the engagement of Indigenous youth and Elders in the co-design process. Create specific platforms and forums that enable intergenerational knowledge exchange, value the perspectives of Elders, and empower young Indigenous leaders to actively contribute to the development and implementation of the Strategy.

Support Indigenous-led workshops and knowledge sharing sessions that focus on climate change, health impacts, and traditional practices. These sessions should provide opportunities for sharing traditional ecological knowledge, cultural practices, and community-led solutions, ensuring that Indigenous voices and expertise guide the Strategy's development.

Proposed Objective 1: Measurement

6. Beyond the schemes already noted above, is your organisation involved in any existing or planned initiatives to measure and report on health system emissions and/or energy use in Australia?

7. What additional data and information is required to support targeted emissions reduction efforts within health and aged care?

Comprehensive data on greenhouse gas emissions across all social welfare facilities (e.g., Housing & Homelessness Supported Accommodation settings and Disability group home settings), and not exclusively the health and aged care sector is crucial. This includes scope 1, 2, and 3 emissions data, covering energy consumption, water usage, waste generation, and transportation emissions. An accurate and up-to-date emissions inventory is essential for identifying emission hotspots and prioritising reduction efforts effectively.

Establishment of baseline data for emissions is vital to measure progress and evaluate the effectiveness of emissions reduction initiatives. This involves collecting historical emissions data, energy consumption patterns, waste generation rates, and other relevant metrics. Baseline data provides a reference point for comparison and enables the setting of realistic reduction targets.

Detailed information on energy consumption within healthcare facilities is necessary for identifying opportunities for energy efficiency improvements. This entails capturing data on electricity, natural gas, and other energy sources utilised in different areas of health and aged care settings. Energy consumption data can help pinpoint areas with high energy usage and prioritise energy-saving measures.

Data on water consumption within all social welfare facilities is important for identifying water conservation opportunities. Tracking water usage patterns, identifying water-intensive processes, and understanding peak consumption periods can inform the development of targeted strategies for water conservation and efficiency.

Data on waste generation rates and waste composition within healthcare facilities are vital for developing effective waste management strategies. Detailed information on the types and quantities of waste generated, including hazardous and non-hazardous waste, can guide efforts to reduce waste generation, promote recycling, and implement proper disposal practices.

Comprehensive data on the supply chain, including information on suppliers, manufacturers, and transportation methods, is essential for assessing the environmental impact of products and materials used in health and aged care settings. This data can help identify opportunities for sustainable procurement, assess the carbon footprint of products, and collaborate with suppliers to reduce emissions along the supply chain.

Data on patient and staff transportation patterns, including commuting and patient transport, is crucial for understanding the carbon footprint associated with travel. This data can inform efforts to promote sustainable transportation options, develop alternative transportation strategies, and measure the impact of transportation-related emissions reduction initiatives.

Access to data on emerging research, innovations, and best practices in sustainable healthcare is valuable for informing targeted emissions reduction efforts. Information on technological advancements, sustainable materials, energy-efficient equipment, and successful case studies can support evidence-based decision-making and guide the implementation of sustainable practices.

By collecting this additional data and information, social welfare facilities can gain a comprehensive understanding of their emissions profile, identify priority areas for reductions, and implement targeted initiatives to achieve significant emissions reductions.

Proposed Objective 2: Mitigation

8. What do you think of these proposed focus areas for emissions reduction? Should anything else be included?

The proposed areas of focus for emissions reduction in the Australian health system are comprehensive and encompass key sources of greenhouse gas emissions. They cover a wide range of sectors, including the built environment, travel and transport, supply chain, medicines and gases, waste, and prevention and optimising models of care. This holistic approach recognises the significant contribution of these areas to emissions and presents opportunities for implementing sustainable practices and improvements.

Addressing emissions in the built environment and facilities, including energy and water consumption, is crucial for enhancing energy efficiency, adopting renewable energy sources, and implementing sustainable water management practices. These actions align with existing policies that promote sustainable infrastructure and resource management in healthcare settings.

Efforts to tackle emissions from travel and transport, which encompass both patient and staff transportation, are essential. Promoting alternative transportation modes such as public transit, cycling, and telehealth services can significantly reduce the carbon emissions associated with healthcare-related travel. This aligns with existing initiatives that aim to reduce reliance on private vehicles and promote sustainable transportation options.

The supply chain is another critical focus area, considering emissions generated during the manufacturing, packaging, and transportation of medical supplies and equipment. Implementing sustainable procurement practices, prioritising suppliers with lower carbon footprints, and exploring local sourcing options can contribute to emissions reduction and align with existing policies promoting responsible resource management.

Actions relating to medicines and gases should include promoting sustainable practices in pharmaceutical manufacturing, optimising prescribing practices, and exploring alternatives with lower carbon footprints. This approach aligns with existing initiatives promoting responsible medication use and waste reduction in healthcare.

Waste management is a significant aspect of emissions reduction, with emissions potentially associated with waste incineration. Implementing sustainable waste management practices such as recycling, composting, and waste reduction measures can contribute to emissions reduction in the health system.

Prioritising prevention and optimising models of care can also have a substantial impact on emissions reduction. Emphasising preventive measures, health promotion, and effective disease

management can potentially reduce the need for resource-intensive interventions, leading to overall sustainability improvements in the health system.

While the proposed focus areas are comprehensive, it is important to consider the carbon footprint associated with food and catering services within healthcare facilities. Strategies promoting sustainable food choices, local sourcing, and waste reduction in food services can further enhance emissions reduction efforts in the health system.

In addition, attention should be given to the lifecycle assessment of healthcare infrastructure and equipment. Integrating sustainability considerations into the planning, construction, and disposal stages of healthcare facilities and equipment can further enhance emissions reduction efforts and contribute to a more sustainable and climate-resilient healthcare sector.

9. Which specific action areas should be considered relating to the **built environment and facilities (including energy and water)**, over and above any existing policies or initiatives in this area?

Implement energy efficiency upgrades in healthcare facilities, such as retrofitting buildings with energy-efficient lighting systems, optimising heating, ventilation, and air conditioning systems, and installing energy management controls. These measures can result in significant energy savings and emissions reduction.

Increase the integration of renewable energy sources, such as solar panels or wind turbines, into healthcare facility operations. This can involve conducting feasibility studies, securing financing mechanisms, and establishing partnerships with renewable energy providers to transition towards cleaner energy sources.

Implement sustainable water management practices within healthcare facilities. This includes installing water-efficient fixtures, such as low-flow faucets and toilets, adopting rainwater harvesting systems for non-potable water needs, and implementing water recycling and reuse systems where feasible.

Adopt smart building technologies and energy management systems that optimise energy consumption and track energy performance in real-time. These technologies can automate lighting, and other energy-intensive systems to reduce waste and improve overall energy efficiency.

Incorporate sustainable design principles into new healthcare facility construction or retrofitting projects. This includes passive design strategies, optimising insulation, maximising natural lighting, and utilising energy-efficient materials to minimise energy demands and emissions.

Establish mechanisms for monitoring and reporting energy consumption and greenhouse gas emissions from healthcare facilities. Regularly track and analyse energy data to identify areas of improvement, set targets for emissions reduction, and assess the effectiveness of energy efficiency initiatives.

Develop and implement behavioural change programs to engage staff and patients in energy conservation efforts. This can involve raising awareness, providing training on energy-efficient practices, and encouraging sustainable behaviours through incentives and recognition programs.

Conduct energy audits and retro commissioning of healthcare facilities to identify energy-saving opportunities and optimise existing systems. This process involves assessing equipment

performance, identifying inefficiencies, and implementing corrective measures to improve energy efficiency.

Green building certifications, such as LEED (Leadership in Energy and Environmental Design) (Leadership in Energy and Environmental Design (LEED) | Certified Energy) or Green Star (Green Star Rating System | Green Building Council of Australia (gbca.org.au)), for healthcare facility design and operations. These certifications provide frameworks and guidelines for sustainable building practices, helping to reduce energy consumption and emissions.

10. Which specific action areas should be considered relating to **travel and transport**, over and above any existing policies or initiatives in this area?

Promote and incentivise sustainable transportation options for staff, patients, and visitors. This can involve providing facilities for bicycle storage and encouraging cycling, supporting public transit use through discounted passes or shuttle services, and facilitating carpooling or ridesharing programs.

Expand the availability and utilisation of telehealth services to reduce the need for in-person visits and associated travel emissions. This includes investing in telehealth infrastructure, providing training and support to healthcare professionals, and raising awareness among patients about the benefits and availability of telehealth services.

Install electric vehicle (EV) charging infrastructure at healthcare facilities to encourage the adoption of electric vehicles by staff and patients. Collaborate with local authorities, EV charging service providers, and government initiatives to establish charging stations and facilitate the transition to cleaner transportation options.

Transition healthcare facility fleets, including ambulances and other patient transport vehicles, to electric or hybrid vehicles. Develop a strategy for fleet electrification, considering vehicle range requirements, charging infrastructure, and financial feasibility. Explore partnerships with vehicle manufacturers, government programs, or leasing options to support the transition.

Implement travel management policies that prioritise the use of low-emission transportation options. This includes establishing guidelines for staff travel, promoting the use of videoconferencing and online meetings as alternatives to travel, and considering emissions criteria when selecting transportation modes for patient transfers or referrals.

Develop initiatives to encourage sustainable commuting practices among healthcare staff. This can include providing incentives for using public transit or active transportation, facilitating flexible work arrangements or remote work options, and promoting carpooling or ridesharing programs among staff members.

Conduct education and awareness campaigns to promote sustainable travel choices among staff, patients, and visitors. Raise awareness about the environmental impacts of transportation emissions and provide information on sustainable transportation options available in the local area.

Collaborate with local transportation authorities, government agencies, and community organisations to enhance sustainable transportation options and infrastructure in the surrounding areas. Advocate for improved public transit services, cycling infrastructure, and pedestrian-friendly environments to facilitate sustainable travel.

11. Which specific action areas should be considered relating to **supply chain**, over and above any existing policies or initiatives in this area?

Develop and implement sustainable procurement practices that prioritise environmentally friendly and low-carbon products. This can involve establishing criteria for selecting suppliers based on their environmental performance, supporting suppliers with sustainable practices, and integrating environmental considerations into procurement policies and processes.

Engage with suppliers to promote emissions reduction and sustainability initiatives throughout the supply chain. Collaborate with suppliers to identify opportunities for reducing emissions, improving packaging practices, and optimising transportation coordination. Encourage suppliers to adopt sustainable manufacturing processes and reduce the carbon footprint of their products.

Explore opportunities for local sourcing of medical supplies and equipment to reduce emissions associated with long-distance transportation. Foster regional collaboration among healthcare facilities to aggregate purchasing power and negotiate contracts with local suppliers, promoting regional economic development and reducing emissions from global supply chains.

Conduct life cycle assessments of medical products to identify opportunities for emissions reduction and environmental improvements. Assess the environmental impacts associated with the entire life cycle of products, including raw material extraction, manufacturing, distribution, use, and disposal. Use the findings to inform procurement decisions and encourage suppliers to adopt more sustainable practices.

Optimise packaging practices to reduce material waste and associated emissions. Encourage suppliers to use environmentally friendly materials, minimise packaging size and weight, and explore reusable or recyclable packaging alternatives. Implement waste reduction and recycling programs within healthcare facilities to further minimise the environmental impact of packaging waste.

Implement carbon accounting and reporting systems to track emissions within the supply chain. Establish mechanisms for collecting emissions data from suppliers, calculating supply chain emissions, and reporting progress toward reduction targets. Use the data to identify emission hotspots and prioritise actions for emissions reduction.

Support innovation and research efforts to develop sustainable alternatives and technologies within the healthcare supply chain. Foster partnerships with research institutions, industry experts, and innovators to drive advancements in materials, manufacturing processes, packaging, and transportation logistics that result in lower emissions and improved sustainability.

Raise awareness among healthcare professionals and staff about the environmental impact of the supply chain and the importance of sustainable procurement practices. Provide training and resources to promote understanding and engagement in sustainable supply chain initiatives.

12. Which specific action areas should be considered relating to **medicines and gases**, over and above any existing policies or initiatives in this area?

Implement strategies to minimise medication waste, such as improving prescribing practices, optimising inventory management, and promoting patient adherence to medication regimens. This can help reduce the environmental impact associated with the disposal of unused or expired medications.

Incorporate sustainability considerations into medication procurement processes. Give preference to suppliers and manufacturers that demonstrate environmentally responsible practices, such as sustainable sourcing of raw materials, reduced packaging waste, and environmentally friendly manufacturing processes.

Promote the responsible use of inhalers, as they often contain potent greenhouse gases ([Asthma inhalers emit greenhouse gases, but that can change | World Economic Forum (weforum.org)](#)). Educate healthcare professionals and patients about proper inhaler use, including techniques to minimize waste and optimise dosing. Encourage the transition to low-global-warming-potential inhalers and facilitate their availability.

Monitor and track greenhouse gas emissions associated with the production, distribution, and use of pharmaceuticals and medical gases. Establish mechanisms to collect data on emissions, conduct life cycle assessments, and identify areas for emissions reduction within the medication supply chain.

Collaborate with pharmaceutical manufacturers and suppliers to drive sustainability improvements throughout the medication supply chain. Engage in dialogues, partnerships, and initiatives that encourage the adoption of sustainable manufacturing practices, reduced emissions, and responsible waste management.

Establish safe and convenient medication disposal programs to prevent the improper disposal of pharmaceuticals. Promote the proper disposal of medications through partnerships with pharmacies, community organisations, and waste management agencies. Encourage patients to return unused or expired medications for safe disposal.

Support research and development efforts to develop sustainable pharmaceutical alternatives and reduce the environmental impact of medication production and use. Invest in research initiatives that focus on green chemistry, sustainable packaging, and improved manufacturing processes with reduced energy consumption and waste generation.

Raise awareness among healthcare professionals, patients, and the public about the environmental impact of medications and the importance of sustainable medication practices. Provide education and resources on proper medication disposal, medication waste reduction, and the role of individuals in promoting sustainability in healthcare.

13. Which specific action areas should be considered relating to **waste**, over and above any existing policies or initiatives in this area?

Implement waste reduction and minimisation strategies throughout healthcare facilities. This can involve initiatives such as waste audits to identify sources of waste, implementing recycling programs, promoting the use of reusable products, and reducing unnecessary packaging.

Enhance recycling and waste diversion programs within healthcare facilities. Establish comprehensive recycling systems for common waste streams such as paper, plastic, glass, and metal. Explore opportunities for recycling medical equipment, batteries, and other specialised waste items. Collaborate with waste management providers to ensure proper recycling practices.

Implement composting programs to manage organic waste generated in healthcare facilities. This includes composting food waste from cafeterias, landscaping and green waste, and potentially even

certain medical waste items. Educate staff on proper segregation and composting practices to divert organic waste from landfills.

Develop and implement strategies to reduce the use of single-use plastics within healthcare facilities. This can involve promoting the use of alternatives such as reusable or compostable products, encouraging staff and patients to bring their own water bottles or containers, and phasing out unnecessary single-use plastic items.

Implement proper disposal and management practices for pharmaceutical waste. This includes establishing protocols for the safe collection and disposal of expired or unused medications, minimising the disposal of pharmaceuticals into waterways or landfills, and promoting take-back programs for proper medication disposal.

Enhance hazardous waste management practices within healthcare facilities. Ensure the proper segregation, storage, and disposal of hazardous materials, including chemicals, laboratory waste, and sharps. Implement training programs for staff to ensure compliance with regulations and safe handling practices.

Provide education and training programs for healthcare professionals and staff to raise awareness about proper waste management practices. Promote understanding of waste segregation, recycling protocols, and the importance of environmentally responsible waste disposal. Encourage staff to take an active role in waste reduction and sustainability efforts.

Conduct regular waste audits and monitoring to track waste generation, identify opportunities for improvement, and measure progress in waste reduction initiatives. Analyse data to inform decision-making, set targets, and implement targeted actions for waste reduction and diversion.

14. Which specific action areas should be considered relating to **prevention and optimising models of care**, over and above any existing policies or initiatives in this area?

Strengthen efforts to prioritise and promote preventive care throughout the health system. This includes promoting health screenings, vaccinations, health education, and lifestyle interventions to prevent the onset of diseases or manage conditions at an early stage. Invest in community-based prevention programs and initiatives to reach populations at risk.

Develop and implement integrated, multidisciplinary approaches to chronic disease management. Foster collaborations between primary care providers, specialists, and allied health professionals to provide comprehensive care and support for patients with chronic conditions. This can include care coordination, patient education, self-management programs, and remote monitoring technologies.

Expand the use of telehealth and remote care models to improve access to healthcare services while reducing the need for in-person visits. This includes implementing remote monitoring technologies, virtual consultations, and remote patient monitoring for chronic disease management and follow-up care. Develop reimbursement policies and infrastructure support to facilitate the widespread adoption of telehealth.

Promote the shift from fee-for-service models to value-based care models that prioritise quality outcomes and patient-centred care. Encourage the use of alternative payment models that incentivise preventive care, care coordination, and improved health outcomes. Support care models that integrate social determinants of health and address health disparities.

Intensify health promotion and education initiatives to empower individuals and communities to make informed decisions about their health. Develop culturally appropriate and targeted health promotion campaigns that address risk factors, healthy lifestyles, and preventive measures. Engage community organisations and stakeholders to support health education efforts.

Foster collaborative care models that leverage the expertise of various healthcare professionals. Implement team-based approaches, such as interdisciplinary care teams and care coordination, to optimise care delivery and improve patient outcomes. This includes promoting shared decision-making, care planning, and communication among healthcare providers.

Utilise health data analytics and evidence-based guidelines to inform decision-making and optimise models of care. Establish systems for collecting and analysing health data to identify trends, measure outcomes, and guide quality improvement initiatives. Use data to monitor population health trends, identify gaps in care, and implement targeted interventions.

Integrate sustainability considerations into infrastructure planning and facility design. This includes designing energy-efficient healthcare facilities, incorporating green spaces, optimising resource utilisation, and considering the environmental impact of construction and renovation projects.

15. What can be done to involve private providers within the health system in the Strategy's emissions reduction efforts?

Actively engage private providers through outreach efforts and establish collaborative relationships. This can involve initiating discussions, workshops, or conferences that focus on sustainability and emissions reduction. Encourage private providers to join working groups or task forces dedicated to addressing climate change and sustainability within the health sector.

Share best practices and success stories from within the health system or other private providers that have effectively implemented emissions reduction initiatives. Highlight the environmental and financial benefits achieved through sustainable practices and inspire private providers to adopt similar strategies.

Facilitate networking opportunities among private providers to foster knowledge sharing, collaboration, and peer learning. Create platforms or forums for private providers to exchange ideas, share challenges and solutions, and collectively work towards emissions reduction goals. Encourage public-private partnerships to support joint initiatives and leverage resources.

Recognise and reward private providers that demonstrate commitment and progress in emissions reduction efforts. Establish sustainability awards, certifications, or other recognition mechanisms to acknowledge their achievements. Consider providing financial incentives, grants, or tax benefits to incentivise private providers to invest in sustainable practices.

Encourage private providers to collect and report data on their emissions and sustainability efforts. Establish standardised reporting frameworks or guidelines to streamline data collection and ensure comparability. This enables private providers to monitor their progress, benchmark against peers, and demonstrate transparency in their emissions reduction initiatives.

Offer capacity building programs and training sessions to private providers on sustainable practices, emissions reduction strategies, and environmental management. Provide resources, toolkits, and

training materials to support private providers in implementing sustainability measures and integrating emissions reduction efforts into their operations.

Collaborate with industry associations and trade organisations representing private providers to promote emissions reduction efforts. Engage with these associations to advocate for sustainable practices, disseminate relevant information, and encourage their members to participate in emissions reduction initiatives.

Develop policies, guidelines, or regulations that encourage private providers to prioritise emissions reduction and sustainability. Provide clear guidance on emissions reporting requirements, energy efficiency standards, waste management practices, and other sustainability measures. Align regulatory frameworks with emissions reduction targets to create a supportive environment for private providers to act.

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16. Where should the Strategy prioritise its emissions reduction efforts?

   a. How should the Strategy strike a balance between prioritising emissions reduction areas over which the health system has the most direct control and prioritising the areas where emissions are highest, even if it is harder to reduce emissions in these areas?

   b. Which of the six sources of emissions discussed above (on pages 13 to 18 of the Consultation Paper) are the highest priorities for action?

In prioritising emissions reduction efforts, the Strategy should strike a balance between areas where the health system has the most direct control and areas where emissions are highest, even if they are more challenging to address.

The Strategy should prioritise emissions reduction efforts in areas where the health system has direct control and can implement changes easily. This includes focusing on internal operations, such as energy consumption in healthcare facilities, waste management practices, and transportation choices for staff and patients. By addressing these areas, the health system can lead by example, demonstrating its commitment to sustainability and reducing its own environmental footprint.

The Strategy should also prioritise efforts in areas where emissions are highest, even if they are more challenging to reduce. This may include emissions associated with medical supply chains, pharmaceuticals, anaesthetic gases, and other external factors. While these areas may require collaboration with suppliers, manufacturers, and other stakeholders, addressing high-emission areas is crucial for achieving significant overall emissions reductions within the health system.

The Strategy should consider the cost-effectiveness and potential impact of emissions reduction efforts in different areas. By conducting a cost-effectiveness analysis, the Strategy can prioritise actions that yield the greatest emissions reduction per unit of investment. This approach ensures efficient use of resources while maximising the overall impact on reducing emissions.

The Strategy should also consider co-benefits and health impacts associated with emissions reduction efforts. Prioritise actions that not only reduce emissions but also yield additional benefits, such as improved air quality, reduced waste, and enhanced public health outcomes. This aligns with the broader goals of the health system and enhances the overall sustainability and well-being of communities.

Engage stakeholders from the health system, industry, research institutions, and community organisations to identify key emission sources, potential mitigation strategies, and opportunities for collaboration. Foster dialogue and partnerships to ensure a comprehensive approach and to address emissions reduction efforts in areas that may require multi-sectoral cooperation.

Striking a balance between areas of direct control and high-emission areas acknowledges the need for both immediate action within the health system's sphere of influence and collaborative efforts to address broader emission sources. This comprehensive approach allows for targeted reductions, while also driving systemic changes that can have a significant impact on reducing emissions and contributing to the overall sustainability of the health system.

Determining the highest priorities for action among the six sources of emissions depends on several factors, including the specific context, local circumstances, and emission reduction potential.

17. What 'quick wins' in relation to emissions reduction should be prioritised for delivery in the twelve months following publication of the Strategy?

Prioritise energy efficiency upgrades in healthcare facilities, such as installing LED lighting, optimising air conditioning systems, and implementing smart energy management systems. These measures can yield immediate energy savings and reduce carbon emissions.

Accelerate the adoption of renewable energy sources, such as solar panels or wind turbines, in healthcare facilities. This can involve partnering with renewable energy providers or seeking funding opportunities to facilitate the installation of renewable energy infrastructure.

Implement initiatives to promote sustainable transportation options for staff, patients, and visitors. Encourage carpooling, provide incentives for using public transit, and support active transportation like cycling or walking. These actions can quickly reduce carbon emissions associated with transportation.

Establish waste reduction and recycling programs within healthcare facilities to minimise waste generation and maximise recycling rates. This can include proper segregation of waste streams, education and awareness campaigns, and engaging waste management partners for efficient disposal and recycling processes.

Develop and implement sustainable procurement policies that prioritise the purchase of environmentally friendly and low-carbon products and services. This can involve working with suppliers to identify sustainable alternatives and incorporating sustainability criteria into procurement decision-making processes.

Launch behaviour change campaigns to raise awareness and encourage sustainable practices among staff, patients, and visitors. Promote energy conservation, waste reduction, and sustainable transportation through educational materials, training sessions, and communication channels.

Expand the availability and utilisation of telehealth services to reduce the need for in-person visits and associated carbon emissions from patient travel. Provide training and support to healthcare providers to enable efficient and effective delivery of telehealth services.

Conduct audits and assessments of heating and cooling systems in healthcare facilities to identify energy-saving opportunities. Optimise temperature settings, upgrade insulation, and implement energy management controls to reduce energy consumption and emissions.

Implement water conservation measures, such as efficient irrigation systems, low-flow fixtures, and water recycling systems, to minimize water consumption and associated energy use for water treatment and distribution.

Promote the development of green spaces and biodiversity initiatives within healthcare facilities. This can involve creating gardens, planting trees, and preserving natural habitats on site, contributing to carbon sequestration and improving the overall environmental sustainability.

Proposed Objective 3: Adaptation

18. What health impacts, risks and vulnerabilities should be prioritised for adaptation action through the Strategy? What process or methodology should be adopted to prioritise impacts, risks and vulnerabilities for adaptation action?

Prioritise health impacts, risks, and vulnerabilities that disproportionately affect vulnerable populations, including Indigenous communities, low-income populations, the elderly, children, and individuals with pre-existing health conditions. These populations often face higher risks and have reduced capacity to adapt to the health impacts of climate change.

Identify and prioritise health impacts and risks associated with climate-sensitive diseases and conditions. This may include vector-borne diseases, heat-related illnesses, respiratory conditions aggravated by air pollution, mental health impacts, and waterborne diseases. Assess the potential increase in prevalence, severity, or geographic distribution of these conditions due to climate change.

Focus on health impacts and vulnerabilities related to extreme weather events, such as heatwaves, floods, droughts, and severe storms. Consider the potential health consequences, including injuries, heat-related illnesses, mental health impacts, displacement, and disruptions to healthcare services.

Address health impacts and vulnerabilities related to climate-induced infrastructure and service disruptions. This includes disruptions to power and water supply, transportation, healthcare facilities, and communication systems. Identify the potential consequences for health service delivery, access to care, and emergency response capabilities.

Prioritise health impacts and vulnerabilities related to food and water security. Assess the potential consequences of climate change on agricultural production, food availability, quality, and nutritional value. Consider the impacts of water scarcity, contamination, and disruptions on public health and the availability of safe drinking water.

Recognise the health impacts and vulnerabilities of coastal communities facing sea-level rise, coastal erosion, and increased frequency of extreme weather events. Consider the unique challenges faced by Indigenous communities in relation to their cultural connections to the land, reliance on traditional food sources, and impacts on mental and emotional well-being.

A participatory and evidence-based approach should be adopted by way of engaging a diverse range of stakeholders, including health professionals, community representatives, Indigenous leaders, policymakers, and researchers. Seek their perspectives and insights on health impacts and vulnerabilities, drawing upon their local and experiential knowledge.

In addition, by conducting vulnerability and risk assessments to identify and quantify the potential health impacts of climate change. This involves analysing current health status, demographic data, climate projections, and exposure assessments to determine the level of vulnerability and the likelihood and severity of health impacts.

Utilise a multi-criteria decision analysis framework to systematically evaluate and prioritise health impacts, risks, and vulnerabilities based on predefined criteria. This can involve considering factors such as severity, magnitude, equity implications, feasibility of adaptation measures, and the potential for co-benefits across multiple sectors.

Furthermore, collaborate with existing climate change adaptation initiatives, both at the national and international levels, to align priorities and leverage resources and expertise. This includes partnerships with climate change agencies, public health organisations, research institutions, and community-based organisations.

Lastly, establish a monitoring and evaluation framework to track the effectiveness of adaptation actions and regularly reassess priorities based on emerging evidence and changing climate scenarios. This iterative process allows for adaptive management and refinement of adaptation strategies over time.

19. Should the Australian government develop a National Health Vulnerability and Adaptation Assessment and National Health Adaptation Plan? If yes:
    a. What are the key considerations in developing a methodology?
    b. How should their development draw on work already undertaken, for example at the state and territory level, or internationally?
    c. What are the key areas where a national approach will support local/jurisdictional vulnerability assessment and adaptation planning?

a) What are the key considerations in developing a methodology?

The methodology should consider multiple factors contributing to health vulnerability, including socio-economic factors, demographic characteristics, health determinants, and climate projections. It should also incorporate indicators of adaptive capacity, such as healthcare infrastructure, emergency response capabilities, and community resilience.

The methodology should adopt a participatory approach, involving stakeholders from diverse sectors and levels of government. Engaging local communities, Indigenous peoples, healthcare professionals, researchers, and policymakers will ensure the assessment captures local knowledge, experiences, and priorities.

Foster interdisciplinary collaboration to combine expertise from various fields, including climate science, public health, social sciences, and environmental sciences. This collaboration will enable a comprehensive assessment of health vulnerabilities and adaptation strategies.

Utilise existing data sources and models to inform the assessment. This includes leveraging state and territory-level assessments, international research, and climate change adaptation frameworks. By building upon existing work, duplication of efforts can be avoided, and synergies can be maximised.

a) How should their development draw on work already undertaken, for example at the state and territory level, or internationally?

Analyse existing vulnerability assessments conducted by state and territory governments. Identify common methodologies, best practices, and lessons learned to inform the development of the national assessment. This collaborative approach will ensure consistency and harmonisation across areas.

Review international research and frameworks on health vulnerability and adaptation to understand global best practices. Draw upon methodologies, case studies, and tools developed by international organisations, such as the World Health Organisation (WHO), Intergovernmental Panel on Climate Change (IPCC), and other relevant research institutions.

Establish collaborative partnerships with international organisations, research institutions, and experts working on health vulnerability and adaptation. This can facilitate knowledge exchange, capacity-building, and the adoption of international standards and guidelines in the national assessment and plan.

b) What are the key areas where a national approach will support local/jurisdictional vulnerability assessment and adaptation planning?

Provides a consistent and standardised framework for vulnerability assessment and adaptation planning across all jurisdictions. This ensures comparability of data, methodologies, and outcomes, facilitating cross-jurisdictional coordination and knowledge sharing.

Allows for the pooling of resources, expertise, and data. It enables the sharing of best practices, tools, and adaptation strategies between jurisdictions, maximising efficiency and avoiding duplication of efforts.

Supports local/jurisdictional efforts by providing capacity-building initiatives, technical assistance, and training programs. This helps build the necessary skills and knowledge at the local level to undertake vulnerability assessments and develop effective adaptation plans.

Ensures policy alignment and coherence across jurisdictions. It facilitates the integration of health considerations into broader climate change adaptation policies and strategies, promoting a holistic and coordinated approach to addressing health vulnerabilities.

Encourages the sharing of data, information, and research findings among jurisdictions. This enhances the evidence base for vulnerability assessments, promotes data interoperability, and facilitates the development of targeted adaptation strategies.

20. Would there be value in the Australian government promoting a nationally consistent approach to vulnerability assessment and adaptation planning for the health system specifically, for instance by issuing guidance and associated implementation support tools for states, territories and local health systems? If yes, what topics should be covered to promote a nationally consistent approach? What examples of existing guidance (either from states/territories or internationally) should be drawn from?

There would be value in the Australian government promoting a nationally consistent approach to vulnerability assessment and adaptation planning for the health system. Issuing guidance and providing associated implementation support tools can help standardise practices, ensure consistency, and facilitate effective adaptation planning across states, territories, and local health systems.

The following topics could be covered to promote a nationally consistent approach:

Providing guidance on -

- the methodology for conducting vulnerability assessments, including the selection of indicators, data sources, and analytical frameworks. This should encompass the identification of climate-sensitive health impacts, consideration of socio-economic factors, and assessment of adaptive capacity.
- data collection, including the types of data to be gathered, data sources, and approaches for data analysis. This can involve methods for assessing climate projections, health outcome data, demographic information, and socio-economic data to inform vulnerability assessments.
- engaging stakeholders throughout the vulnerability assessment and adaptation planning process. This includes strategies for involving Indigenous communities, healthcare professionals, policymakers, community representatives, and other relevant stakeholders. Emphasise the importance of inclusive and culturally appropriate engagement practices.
- effective risk communication and health messaging strategies to ensure the dissemination of accurate and accessible information. This can include guidance on conveying the health risks of climate change, promoting behaviour change, and addressing public concerns related to climate-related health impacts.
- developing and implementing adaptation plans, including identifying priority actions, setting targets, and monitoring progress. This should encompass strategies for integrating adaptation into existing health policies and programs, identifying co-benefits, and ensuring equity considerations.
- monitoring and evaluating the effectiveness of adaptation measures. This includes establishing indicators, data collection methodologies, and frameworks for assessing the success of adaptation actions. Encourage iterative learning and adaptive management approaches.

Examples of existing guidance that can be drawn from include:

The Climate Change and Health Adaptation Planning Guide by the Australian National Health and Medical Research Council (NHMRC) National Climate Resilience and Adaptation Strategy 2021-2025 - DCCEEW provides a comprehensive framework for planning adaptation strategies in the health sector.

Drawing from existing guidance documents developed by state and territory governments, such as the Victorian Climate Change Adaptation Plan for the Health Sector (Adaptation Action Plans

(climatechange.vic.gov.au)) or the Queensland Health Climate Change Adaptation Plan ([Climate adaptation | Queensland Climate Action (des.qld.gov.au)](des.qld.gov.au)).

Reference international guidance, such as the World Health Organisation's (WHO) "Health and Climate Change: Toolkit for Implementation" ([Climate Change and Health (who.int)](who.int)) or the United Nations Framework Convention on Climate Change (UNFCCC) "Adaptation Knowledge Portal" UNFCCC Adaption Knowledge Portal) for insights on best practices and methodologies.

21. What immediate high-priority health system adaptation actions are required in the next 12 to 24 months?

Ensure that vulnerable populations, particularly low-income households, and older people, have access to affordable heating options during the colder months. Subsidise energy costs, provide energy-efficient heaters, and implement targeted support programs for those at risk of energy poverty.

Implement targeted outreach programs to identify and support vulnerable individuals, such as older people living alone, those experiencing homelessness, and low-income households. Provide information and resources on cold weather risks, preventive measures, and available support services.

Develop and implement heatwave preparedness plans within healthcare facilities and communities. Raise awareness about heat-related health risks, establish cooling centres, train healthcare professionals on heat illness management, and ensure adequate resources for heatwave response and patient care. Issue timely and accurate cold weather health advisories to the public, with a focus on vulnerable populations. Include information on preventive measures, cold-related health risks, and available support services. Collaborate with meteorological agencies and public health authorities to ensure effective communication and coordination.

Enhance emergency response protocols to effectively address health impacts associated with extreme weather events. Develop and test emergency response plans, strengthen coordination between healthcare facilities, emergency services, and public health agencies, and ensure the availability of medical supplies, equipment, and personnel during emergencies. Strengthen the capacity of healthcare facilities, especially those serving vulnerable populations, to respond to the health impacts of cold weather. Develop cold weather response plans, ensure adequate heating systems, and train healthcare staff to identify and address cold-related health conditions.

Build resilience in the health system to withstand and adapt to climate-related disruptions. Assess and strengthen the resilience of healthcare infrastructure, ensure backup power supply, develop contingency plans for service interruptions, and incorporate climate resilience considerations into facility design and maintenance.

Strengthen mental health support systems to address the psychological impacts of climate change. Train healthcare providers to recognise and respond to climate-related mental health issues; integrate mental health services into disaster response plans; and promote community-based mental health support networks. Enhance healthcare services to address the specific health needs arising from cold weather, such as respiratory illnesses, cardiovascular conditions, and injuries due to slips and falls. Increase healthcare capacity, ensuring timely access to medical care, and provide targeted education and resources to healthcare professionals.

Enhance vector-borne disease surveillance, prevention, and control measures by monitoring changes in the geographic distribution and prevalence of vector-borne diseases; implementing targeted vector control strategies; and promoting public education on personal protective measures.

Provide capacity-building initiatives and training programs for healthcare professionals to enhance their understanding of climate-related health risks, adaptation strategies, and the integration of climate change considerations into clinical practice and public health programs.

Engage and educate communities on climate-related health risks, promoting behaviour change, and fostering community resilience. Conduct public awareness campaigns, providing educational materials, and work with community leaders and organisations to empower individuals and communities to act.

Support research efforts and strengthen surveillance systems to monitor climate-related health impacts. This includes studying the epidemiology of climate-sensitive diseases, assessing the effectiveness of adaptation measures, and developing early warning systems for climate-related health threats. Undertake research and data collection initiatives to better understand the specific health impacts of cold weather on vulnerable populations, including low socioeconomic demographics and older people.

Foster collaboration and partnerships among health agencies, research institutions, community organisations, and other sectors to address climate-related health impacts holistically. This involves sharing best practices, leveraging resources, and engaging in joint initiatives to enhance the health system's adaptation capacity. Collaborative efforts can include conducting community outreach, establishing temporary shelters, and organising community events to raise awareness and promote cold weather preparedness. Encourage the development and expansion of social support networks for vulnerable populations during the cold weather period. This should involve community initiatives, volunteer programs, and partnerships with social service organisations to aid with heating, transportation, and social connection for those in need.

Initiate and advance vulnerability assessments and adaptation planning processes to identify specific vulnerabilities and prioritise adaptation actions in line with local contexts and needs.

Proposed Objective 4: Health in All Policies

22. What are the key areas in which a Health in All Policies approach might assist in addressing the health and wellbeing impacts of climate change and reducing emissions?

Integrating health considerations into energy and environmental policies can promote the transition to renewable and clean energy sources, reduce greenhouse gas emissions, and mitigate the health risks associated with pollution and climate change. This approach can lead to improvements in air quality, reduce respiratory illnesses, and minimise the health impacts of extreme weather events.

Incorporating health considerations into transportation policies can encourage the development of sustainable and active transportation options, such as public transit, cycling infrastructure, and pedestrian-friendly environments. By prioritising active transportation and reducing reliance on

fossil-fuelled vehicles, this approach can improve air quality, enhance physical activity levels, and reduce traffic-related injuries and fatalities.

Considering health and wellbeing in urban planning and infrastructure policies can lead to the creation of healthier and more sustainable communities. This includes designing neighbourhoods that promote walkability, access to green spaces, and the availability of essential services. By creating healthier environments, this approach can improve mental health, increase physical activity, and enhance overall quality of life.

Integrating health considerations into agricultural and food policies can support sustainable and climate-resilient food systems. This includes promoting sustainable farming practices, reducing food waste, and supporting local and nutritious food production. A Health in All Policies approach in this area can contribute to improved food security, nutrition, and reduced greenhouse gas emissions from the food sector.

Incorporating health considerations into disaster preparedness and emergency management policies is essential for effectively responding to climate-related emergencies. This includes developing robust public health response plans, ensuring access to healthcare services during emergencies, and addressing the specific health needs of vulnerable populations. By integrating health into emergency management, this approach can save lives, reduce injuries, and enhance community resilience.

Implementing education and awareness initiatives that integrate climate change and health messaging into school curricula, public campaigns, and community programs can enhance public understanding of the health impacts of climate change and foster sustainable behaviours. By promoting climate literacy and empowering individuals to act, this approach can drive behaviour change, promote resilience, and contribute to emissions reduction efforts.

23. What are the most effective ways to facilitate collaboration and partnerships between stakeholders to maximise the synergies between climate policy and public health policy? What are some successful examples of collaboration in this area?

Create dedicated platforms or working groups that bring together stakeholders from climate and public health sectors, including government agencies, health departments, environmental organisations, research institutions, community groups, and advocacy organisations. These platforms provide opportunities for regular communication, knowledge sharing, and coordinated action.

Encourage interdisciplinary collaboration and knowledge exchange between experts from climate science, public health, epidemiology, environmental health, and other relevant fields. This facilitates a holistic understanding of the links between climate change and health and promotes the development of evidence-based policies and interventions.

Encourage joint research initiatives and data sharing between climate and health sectors. This collaboration can help generate evidence on the health impacts of climate change, identify vulnerable populations, and develop effective interventions. Sharing data, expertise, and research findings enables informed decision-making and strengthens the scientific basis for policies and actions.

Invest in capacity-building initiatives to enhance the understanding of climate change and health interactions among professionals in both sectors. This can involve training programs, workshops,

and knowledge exchange activities that empower stakeholders to integrate climate and health considerations into their work.

Involve communities, including vulnerable populations, in the decision-making process and implementation of climate and health initiatives. Collaborative partnerships with community-based organisations, non-governmental organisations, and local stakeholders can ensure that interventions are context-specific, culturally appropriate, and address community needs. This approach also enhances community ownership and resilience.

Foster international collaboration and knowledge exchange to learn from successful examples and share best practices. Global networks, partnerships, and agreements provide platforms for cross-border collaboration on climate and health issues. Examples include the World Health Organisation's Climate and Health Country Profiles and collaborations under the United Nations Framework Convention on Climate Change.

EXAMPLES:

The Climate and Health Alliance (CAHA) (Climate and Health Alliance (caha.org.au)) in Australia brings together health professionals, organisations, and advocacy groups to promote action on climate change and health. CAHA facilitates collaboration, education, and advocacy efforts to influence policy and practice.

The Lancet Countdown on Health and Climate Change (The Lancet Countdown on health and climate change) is a global collaboration between academic institutions and international organisations. It tracks progress on climate change and its health impacts, generating evidence and providing recommendations for policy and action.

The Global Climate and Health Alliance (GCHA) (Home - The Global Climate and Health Alliance) is a coalition of health organisations worldwide that advocate for climate action and the protection of public health. GCHA fosters collaboration, knowledge sharing, and joint advocacy efforts to promote the health benefits of climate action.

The Partnership for Resilience and Preparedness (PREP) (Partnership for Resilience and Preparedness (prepdata.org)) is a collaboration between governmental, non-governmental, and private sector organisations. It aims to enhance climate resilience by improving access to data, tools, and knowledge, supporting decision-making, and promoting coordination among stakeholders.

Enablers

24. How could these enablers be improved to better inform the objectives of the Strategy? Should any enablers be added or removed?

1. Encourage medical training institutions and other education and training institutions to ensure the impacts of climate change on health form part of the training curriculum for all health care professionals:

Enhance the specificity of this enabler by providing clear guidelines and recommendations on the inclusion of climate change and health topics in the curriculum. This can ensure consistency across institutions and promote comprehensive understanding among healthcare professionals.

2. Conduct a comprehensive scan of current research activities pertaining to climate change and health:

Specify the scope and methodology of the research scan to ensure a thorough assessment of existing research. This can involve considering various sources, such as academic literature, reports, and ongoing research projects, to identify gaps, emerging trends, and areas requiring further investigation.

3. Increase public awareness of the health impacts of climate change to empower individuals and communities to take actions to reduce emissions and build climate resilience:

Enhance this enabler by incorporating targeted communication strategies to reach diverse populations, including vulnerable and marginalised communities. Consider using various channels, such as social media, community engagement events, and partnerships with local organisations, to disseminate information effectively.

4. Establish governance structures – both cross-jurisdictional and beyond government – to facilitate regular collaboration with all stakeholders (and in particular First Nations representatives) to build ownership and facilitate working partnerships where required to plan and deliver shared commitments to reduce emissions and strengthen climate resilience:

Provide specific guidance on the composition, roles, and responsibilities of governance structures to ensure meaningful engagement and representation of stakeholders, including First Nations stakeholders. Consider mechanisms for decision-making, conflict resolution, and long-term sustainability of these governance structures.

5.1.1 Establish agreed indicators to monitor the key deliverables for the Strategy:

Specify the process for developing indicators, ensuring they are measurable, relevant, and aligned with the objectives of the Strategy. Involve key stakeholders in the selection and refinement of indicators to ensure their usefulness in tracking progress and informing decision-making.

5.1.2 Provide regular reports on progress against the objectives of the Strategy:

Clarify the frequency, format, and dissemination channels for the annual reports to ensure transparency and accountability. Consider including qualitative and quantitative data, case studies, and success stories to provide a comprehensive overview of progress and challenges faced.

Additionally, it may be beneficial to consider Facilitating partnerships between researchers, policymakers, and practitioners to promote the exchange of knowledge, best practices, and innovative solutions related to climate change and health. This can involve establishing research networks, funding opportunities for collaborative projects, and platforms for sharing research findings and lessons learned.

25. For each of these enablers:
    a. What is currently working well?
    b. What actions should the Strategy consider to support delivery?

a) What is currently working well:

Encourage medical colleges and education institutions to include climate change and health in the training curriculum. Institutions have already recognised the importance of climate change and health and have started integrating related topics into their curriculum. Some institutions have developed specific courses, workshops, or modules on climate change and health, providing students with relevant knowledge and skills.

Conduct a scan of current research activities pertaining to climate change and health. There is ongoing research on the health impacts of climate change, and various organisations and research institutions are actively studying this intersection. Existing research scans provide valuable insights into the current state of knowledge and help identify research gaps and areas for future investigation.

Increase public awareness of the health impacts of climate change. Public awareness campaigns and initiatives have been conducted to raise awareness about the health impacts of climate change. Collaborations between health organisations, environmental groups, and community organisations have helped reach diverse audiences and disseminate information effectively.

Establish governance structures for collaboration and partnerships. Some governance structures, such as committees, advisory groups, or task forces, have been established to facilitate collaboration and partnerships among stakeholders. These structures have enabled engagement and input from various sectors, including First Nations, and have supported the development of shared commitments and actions.

Establish indicators to monitor the key deliverables for the Strategy. Some initiatives have identified and implemented indicators to track progress and measure the effectiveness of climate change and health interventions. These indicators provide valuable data and insights for decision-making, accountability, and continuous improvement.

Provide annual reports on progress against the objectives of the Strategy. Annual reporting allows for transparency and accountability, providing an opportunity to share achievements, challenges, and lessons learned. Reports facilitate communication and engagement with stakeholders and can drive ongoing support and commitment to the Strategy.

b) What actions should the Strategy consider to support delivery?

Provide guidelines and resources to support the integration of climate change and health topics into curricula, ensuring consistency and quality across institutions.

Offer training and professional development opportunities for educators to enhance their knowledge and capacity to teach climate change and health effectively.

Coordinate and collaborate with research institutions to ensure comprehensive coverage and avoid duplication of efforts.

Identify research gaps and priorities to guide future research funding and initiatives.

Develop targeted communication strategies tailored to diverse populations, including specific messaging for different age groups, cultural backgrounds, and geographic locations.

Collaborate with community organisations, media outlets, and influential figures to amplify the message and reach a broader audience.

Ensure the inclusion of diverse stakeholders, including First Nations stakeholders, in governance structures to ensure representation and inclusion.

Establish clear roles, responsibilities, and decision-making processes within the governance structures to facilitate effective collaboration and decision-making.

Collaborate with relevant stakeholders to develop robust indicators that align with the objectives of the Strategy.

Ensure indicators are measurable, relevant, and aligned with national and international standards to enable meaningful tracking of progress.

Develop clear reporting guidelines and templates to ensure consistency and facilitate meaningful comparisons over time.

Incorporate qualitative and quantitative data, case studies, and success stories to provide a comprehensive overview of progress and impact.

Thank you for taking the time to complete this survey – your feedback is greatly appreciated! Please submit this form in Word format to Health.Climate.Consultation@health.gov.au.