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## From the President

13 August 2021

Professor Euan Wallace AM  
Secretary of the Department of Health  
Department of Health  
50 Lonsdale Street  
MELBOURNE VIC 3000

Via Email: [Environment@health.vic.gov.au](mailto:Environment@health.vic.gov.au)

Dear Professor Wallace

### **Health and Human Services Climate Change Adaptation Action Plan 2022-2026**

The Royal Australasian College of Physicians (RACP) commends the Victorian Government's development of draft climate change adaptation plans in line with the *Climate Change Act (2017)*. Climate change is a national public health emergency.<sup>1</sup> Urgent action needs to be taken to mitigate climate change and adapt to unavoidable impacts.

The RACP trains, educates and advocates on behalf of over 18,863 physicians and 8,830 trainee physicians, across Australia and Aotearoa New Zealand. The RACP represents a broad range of medical specialties including general medicine, paediatrics and child health, cardiology, respiratory medicine, infectious diseases, neurology, oncology, public health medicine, occupational and environmental medicine, palliative medicine, sexual health medicine, rehabilitation medicine, geriatric medicine, and addiction medicine.

Beyond the drive for medical excellence, the RACP is committed to developing health and social policies which bring vital improvements to the wellbeing of our patients and the wider community. One of our priority policy areas is climate change and health, for which we have developed three position statements that may be of interest: [Climate Change and Health](#),<sup>2</sup> [Environmentally Sustainable Healthcare](#)<sup>3</sup> and the [Health Benefits of Mitigating Climate Change](#).<sup>4</sup>

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<sup>1</sup> Royal Australasian College of Physicians (RACP). Leading medical group declares public health emergency and calls national strategy to tackle climate change media release [internet]. Sydney: RACP; 2019. Available from: <https://www.racp.edu.au/news-and-events/media-releases/leading-medical-group-declares-public-health-emergency-and-calls-for-national-strategy-to-tackle-climate-change>

<sup>2</sup> Climate Change and Health Position Statement (2016) RACP. [https://www.racp.edu.au/docs/default-source/advocacy-library/climate-change-and-health-position-statement.pdf?sfvrsn=5235361a\\_5](https://www.racp.edu.au/docs/default-source/advocacy-library/climate-change-and-health-position-statement.pdf?sfvrsn=5235361a_5)

<sup>3</sup> Environmentally Sustainable Healthcare Position Statement (2016) RACP. [https://www.racp.edu.au/docs/default-source/advocacy-library/environmentally-sustainable-healthcare-position-statement.pdf?sfvrsn=2834361a\\_4](https://www.racp.edu.au/docs/default-source/advocacy-library/environmentally-sustainable-healthcare-position-statement.pdf?sfvrsn=2834361a_4)

<sup>4</sup> Health Benefits of Mitigating Climate Change Position Statement (2016) RACP. [https://www.racp.edu.au/docs/default-source/advocacy-library/health-benefits-of-mitigating-climate-change-position-statement.pdf?sfvrsn=3d34361a\\_5](https://www.racp.edu.au/docs/default-source/advocacy-library/health-benefits-of-mitigating-climate-change-position-statement.pdf?sfvrsn=3d34361a_5)

## **General comments on the Health and Human Services Climate Change Adaptation Plan 2022-2026 (the Plan)**

While the RACP is broadly supportive of the Plan, it would benefit from more specific and measurable actions. For example, the timing of all actions is described as 'ongoing' during the lifetime of the plan (2022-2026). This does not give a sense of how actions will be programmed or when progress can be expected to be realised. It is also unclear how many of the actions are new, or part of existing programs of delivery, and if there is any increased funding associated with the Plan. This is important because in order to effectively address climate impacts, increased action and resources are needed.

The monitoring and evaluation framework should be developed as a priority and include clear and robust reporting frameworks that will enable the identification of gaps and areas for further improvement, as well as the wider adoption of localised successes.

While this is an adaptation plan, it should include greater integration with mitigation planning, including the health co-benefits of reducing greenhouse gas emissions. The Plan should include the health impacts of fossil fuels, as part of the assessment of the health impacts of climate change.

While it is pleasing to see that there are multiple agencies contributing to actions within the Plan, an overarching requirement for other departments to have to consider climate change and sustainability in their decision making would be a helpful in driving additional climate action.

In addition to the above, we have provided some further specific comments below.

### **Specific comments**

- Aboriginal and Torres Strait Islander people are expected to disproportionately experience the health impacts of climate change and this should be recognised in the Plan, alongside the importance of Aboriginal and Torres Strait Islander leadership in developing culturally safe and appropriate climate responses in Aboriginal and Torres Strait Islander communities. Learning from Indigenous knowledge also has the potential to further enhance community adaptation plans.
- Action 12 should explicitly mention extreme heat and air pollution, as important focuses of public health campaigns, in addition to the campaigns already listed.
- Action 14 should also account for the characteristics of the local health services, in addition to localised climate impacts and population characteristics.
- The Plan should incorporate greater acknowledgement of the potential impacts on workforce, as well as infrastructure. This is especially relevant to rural areas, which already experience health workforce shortages and, in many instances, are more exposed to climate-related risks<sup>5</sup>.
- The Plan should fund and incentivise climate adaptations with the health sector and related services, in addition providing advice to local health service boards, as described in Action 4.
- The Plan should require the establishment and enhancement of early warning systems to ensure community and health and human services preparedness for climate impacts.

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<sup>5</sup> [https://www.thelancet.com/journals/lanph/article/PIIS2542-5196\(21\)00028-0/fulltext](https://www.thelancet.com/journals/lanph/article/PIIS2542-5196(21)00028-0/fulltext)

Early warning systems are critical to mobilising responses to extreme weather events, and other climate-related risks, such as infectious disease outbreaks. This involves ensuring real-time data monitoring, and effective communication to health services, community services, emergency responders and the community. Early warning systems should be integrated with pre-existing public health response plans and climate adaptations to maximise preparedness and reduce negative impacts on population health and health system.

- The Plan makes very limited reference to green spaces. Publicly available green spaces play a critical role in counteracting the urban heat island effect and providing cool spaces for those who are vulnerable to extreme heat. This is especially important for those sleeping rough and experiencing insecure or unsafe home environments. It is very important that these spaces be accessible to all people, and those most in need of accessing them on days of extreme heat are not “moved on.” Beyond adaptation to rising temperatures, urban green spaces improve a wide range of health, social and environmental benefits.
- In many cases smaller health and community services will have the least resources to develop climate change adaptation plans. These services, including community health centres, public housing, general practitioners, pharmacies and family violence support centres, often play an important role in public health responses, especially in rural areas. As part of the adaptation plan, specific attention should be dedicated to supporting these organisations to adapt to climate change and ensuring they are included in broader climate and emergency planning.
- Concurrent efforts to reduce health and socio-economic inequities must occur concurrently to reduce population health vulnerability to climate change. This should be more explicitly addressed in the plan.

Thank you for the opportunity to comment on the *Health and Human Services Climate Change Adaptation Action Plan 2022-2026*.

Should you require any further information about this matter, please contact Kristin Renzenbrink, Policy and Advocacy Officer at [REDACTED].

Yours sincerely



Professor John Wilson AM