Paris Agreement Submission 19

Committee Secretary
Joint Standing Committee on Treaties
PO Box 6021
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Canberra ACT 2600

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06 October, 2016

# Re: Submission to JSCOT Inquiry on the Paris Agreement

To whom it may concern,

Please find below the submission of the Australian Medical Students' Association (AMSA) regarding the Paris Agreement.

AMSA is the peak representative body for medical students in Australia. AMSA connects, informs and represents the 17,000 students studying at each of the 20 medical schools in Australia by means of advocacy campaigns, events, community and wellbeing projects, and the production of a range of publications.

As a student-run volunteer organisation for future health professionals, we remain deeply concerned about the health impacts of anthropogenic climate change. We support the recommendations of the Paris Agreement, and encourage the Australian government to implement legislation ensuring that we meet our commitments as a signatory of this treaty.

This submission draws upon evidence from various external organisations and experts to highlight the need for a national climate and health strategy.

We would like to thank you for conducting this inquiry and look forward to hearing your recommendations.

Yours sincerely,

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### **Executive Summary of Submission:**

AMSA calls upon the Australian Government to:

- 1. Implement legislation ensuring it meets its Paris Agreement commitments
- 2. Develop and implement a National Strategy for Climate, Health, and Well-being
- 3. Consider the implications to health when implementing climate mitigation policies
- 4. Recognise the health benefits of climate mitigation and adaptation

### Introduction:

The UN Climate Change Conference of the Parties (COP21) was a landmark occasion that provided a strong plan for combating climate change in the 21st century.

The preamble to the Paris Agreement specifically refers to the consideration of "rights to health", which AMSA feels may be impeded should action not be taken to meet the commitments. The agreement also "recognizes the social, economic and environmental value of voluntary mitigation actions and their co-benefits for adaptation, health and sustainable development." As a signatory to the agreement, Australia has committed to keeping greenhouse gas emissions to 26-28% below 2005 levels by 2030.

It is well established that climate change is one of the defining health issues and greatest global health threats of the 21st century, currently responsible for 400,000 deaths per annum. There is evidence that it gives rise to severe global health risks, for example, by changing patterns of disease, causing water and food insecurity, creating vulnerable shelter conditions, driving extreme climatic events, and fuelling unstable population growth and migration. [1, 2] On the other hand, The Lancet has also identified that climate change adaptation and mitigation could be the greatest global health opportunity of the 21st Century. [3] Robust climate change policy is likely to see reductions in respiratory tract infections, heart disease, stroke, breast cancer, lung cancer and dementia, whilst improving air quality and the range of healthy food available to Low and Middle Income Countries (LMICs). [4]

# Meeting our obligations as a signatory to the Paris Agreement:

The Paris Agreement recognises that the costs and obligations associated with climate change must be shared equitably between parties globally. As a signatory to this treaty, our legislation should be amended to reflect the changes required to mitigate the harms of greenhouse gas emissions. AMSA believes that it is important for the Australian government to recognise and act in alignment with the internationally agreed objective of limiting the average global surface temperature increase to 1.5 degrees celsius above pre-industrial levels.

Australia's current Direct Action Plan has been independently reviewed as "inadequate" [5]. Australia has also seen strong growth in black coal electricity generation, increasing Australia's carbon emissions by 4.2 per cent since July 2014. A review of current legislation, with consideration of forecasting of the effects of these policies, is required to ensure Australia is on track to meet the targets outlined in the Paris Agreement.

As such, the Australian government should proactively take measures and restructure current policies to achieve a reduction in greenhouse gas emissions at a minimum of 26-28% from 2005 levels by 2030 in accordance with their Intended Nationally Determined Contribution.



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There are a range of effective mitigation techniques supported by strong empirical evidence that the Australian government may consider, including (but not limited to):

- Investment in renewable energy technologies, such as wind and solar, over coal to reduce the burden of respiratory and cardiovascular diseases
- Carbon pricing mechanisms and emissions trading schemes to promote energy efficiency
- A moratorium on new coal mines and coal-fired power plants.
- Carbon capture and storage
- Investing in public transport and active transport infrastructure (e.g. cycling paths) to reduce car use and promote active living
- Re-forestation and increased green spaces to decrease air pollution, increase physical activity, and improve mental health
- Subsidising sustainable agricultural methods and moving away from monocultures and industrial agriculture

# A National Strategy for Climate, Health, and Well-being:

The evidence linking climate change to the health of Australians has been well-established. Despite this, there is no national framework to manage the health impacts of climate change. Given the proven deleterious effects that pollution, adverse weather events, and mining have on Australians, it remains crucial for the health impacts to be considered by policy-makers when reviewing climate change policy.

AMSA believes a national strategy on climate, health, and well-being is required to not only ensure that Australia meets its obligations but to also safeguard against the real and present dangers of climate change. A national strategy will facilitate successful collaboration between the state and federal governments, the health sector, and ensure that the health of Australians is a priority when discussing environmental policy.

This national strategy should include policies to improve the preparedness and ability of the health sector to deal with the impacts of climate change, through the establishment of a national agency responsible for coordinating and implementing this process. Key functions that the national strategy would encompass include:

- Risk evaluations of the impact of climate change on health
- The development of health impact assessments to determine the consequences of climate policy on health
- Consultation during state and federal policy development
- The delivery of community educational campaigns linking the impacts of climate change to Australian and Global health

This strategy has been developed by the Climate and Health Alliance (CAHA) as part of their 2013 election consultation process. AMSA is proud to support CAHA's National Strategy for Climate, Health and Well-being, of which more details may be found in their 2016 Discussion Paper. [6]

## **Conclusion:**

Medical students recognise that climate change critically influences the health and wellbeing of Australians and as such it must be placed at the centre of Australia's environmental legislation. By implementing the aforementioned recommendations and developing a National Strategy for Climate, Health and Well-Being, the Australian Government will show leadership, uphold the Paris Agreement and act in the best interests of its constituents. Failure to act on climate change will be detrimental for the health of all Australians, particularly the most vulnerable, whilst strong and decisive action stands to enhance health, now and in the future.



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- 2. Hajat S, Vardoulakis S, Heaviside C, Eggen B. Climate change effects on human health: projections of temperature-related mortality for the UK during the 2020s, 2050s and 2080s. Journal of Epidemiology and Community Health. 2014.
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