



19 June 2024

Dr Kimberly Humphrey  
Public Health Medical Consultant and Climate Change Lead  
Health Protection and Regulation  
South Australian Department for Health and Wellbeing

Via email: [public.health@sa.gov.au](mailto:public.health@sa.gov.au)

Dear Dr Humphrey,

**RE: SA Health Climate Change Framework**

The Public Health Association of Australia (PHAA) is recognised as the principal non-government organisation for public health in Australia working to promote the health and well-being of all Australians. It is the pre-eminent voice for the public's health in Australia and seeks to drive better health outcomes through increased knowledge, better access and equity, evidence informed policy and effective population-based practice in public health.

We thank you and SA Government for the opportunity to comment on this draft framework. This consultation is aligned with multiple policy position statements in relation to climate change, including Safe climate(1), Climate Disruption, the Food System and Food Security(2), Climate Refugees(3) and Low Emissions and Active Transport(4).

PHAA commend SA Government for taking this important step as the Health Climate Change Framework, if adequately resourced and monitored could provide a logical pathway to reduce climate change impacts on health and empower communities to adapt and build resilience to climate-related health conditions. The four goals reflect the vision and mission of the framework, nonetheless, we would like to highlight that translating evidence into best practice is a crucial element of success for the proposed framework.

PHAA's responses to the questions are provided below:

**In response to question one: What is missing?**

We have identified that the following are missing from the SA Health Climate Change Framework.

1. The SA Health Climate Change Framework should be guided by **evidence-based practice**. The framework should also include **a research component** that would provide recommendations for evidence-based practice and evaluation of sustainability. This should also include the conduct of empirical research to collect first-hand evidence and develop evidence-based guidelines and suggestions to assist design and implement green information technology and green information systems.(5)

2. The Framework would benefit from the inclusion of **surveillance systems targeting climate-sensitive diseases** and their risk sources.(6)
3. The framework lacks a **monitoring system**. A monitoring system needs to be in place at or before commencement to ensure that each Priority Action Area is on track, milestones are being met, and projects reach the goals within the timeline. This will also ensure that each component of the Priority Action Areas is broken down into specific milestones, making them more actionable and achievable.
4. The framework should address climate change **impacts on food system and food security and promote sustainable diet**.(7)
5. SA Health must actively support, enable, and emphasise a ‘bottom-up’ approach in the ‘Leadership and Governance’ by promoting community partnership to create ownership, commitment, for climate action among diverse communities. The Framework would benefit from a **comprehensive, transdisciplinary, multi stakeholder approach** where all sectors, disciplines and stakeholders are involved in mitigating climate change and its impacts.
6. It is imperative to direct attention towards not only understanding the causes and effects of climate change but also **towards providing education and training for end consumers and communities to cultivate conscientious and efficient behavioural patterns**. As recommended by Vaughter in 2016, it is crucial to implement strategies aimed at fostering critical thinking leading to decisive action.(8) This entails engaging children and youth in effecting long-term transformations, while also involving adults and communities for more immediate results. Moreover, as climate change has various impacts and varying levels of contribution among end consumers to tackle its consequences, it is important to find engaging strategies that can effectively promote behavioural changes.(9)
7. The Framework **must include disadvantaged populations**, including culturally and linguistically diverse populations (CALD), children, refugees to assist address health inequities resulting from the consequences of climate change. In the light of Australia's multicultural makeup, it is essential to devise specific strategies aimed at engaging vulnerable segments of the population, including international students, CALD migrants, refugees, and residents of remote areas. These tailored strategies should be designed to mitigate the impact of climate change and to deliver targeted educational initiatives that empower and mobilize these groups as effective change agents.(10)
8. The framework currently lacks details in **utilising technology** e.g., types, strategies such as use of data science and artificial intelligence and would benefit from its inclusion (5)
9. The SA Health Climate Change Framework **should be aligned with the relevant United Nations Sustainable Development Goals (SDGs)**.(11) The Climate Change Framework has synergies with the SDGs, including SDG 3, Good Health and Wellbeing and 13, Climate Action. Aligning with the SDGs ensures consistency with global priorities, aligns with stakeholder expectations that organisations will align with the SDGs and ensures that the framework contributes to broader social and environmental impacts promoting wellbeing and environmental health.

### **In response to question two: What can be improved?**

In addition to the inclusion of the above details, a key improvement that could be made to the SA Health Climate Change Framework is to provide **more detail and state the specific actions to be taken and by whom** (e.g. SA Health, or key-stakeholders or a combination. Commonly the actions listed under the Priority Action Areas are broad statements – e.g. “Promote the waste hierarchy – refuse, reduce, reuse, recycle; identify opportunities to minimise waste during clinical procedures,

and embed principles of circular healthcare by using less raw materials and minimising waste.” More detail needs to be included in how for example the hierarchy will be promoted, how opportunities will be identified, and how these principles will be embedded. Providing more specific detail under each of the Priority Action Areas would make the item more actionable and achievable.

**In response to question three: Does this framework provide the necessary level of ambition?**

this framework is ambitious. However, this level of ambition is necessary and appropriate as significant action is required to adapt to and mitigate climate change and its impacts on human health. We believe the ambitions of this framework are achievable with coordination and collaboration from all stakeholders and consumers.

**In response to question four: Are the Priority Action Areas appropriate?**

The Priority Action Areas in the SA Health Climate Change Framework are appropriate. The identified eight key priority action areas are in line with the purpose of this framework and they help to structure the framework to achieve the four goals.

**In response to question five and six:**

**Five: Do you have any further points that you think should be listed under the 'How Can We Accomplish This' section of each goal?**

**Six: Do you have any case studies from your area that could be used to highlight excellent work already occurring?**

there are some relevant and useful case studies and information for improving the framework.

- In 2021, the Emergency Department (ED) at Fiona Stanley Hospital in Western Australia launched a program to enhance waste management and recycling efforts and educate staff to minimize wasteful practices (Eco Warriors). The program included the introduction of bins made from recycled materials, as well as training and educational interventions.(12)
- Hunter Hospital, in NSW, has implemented a climate sustainability strategy to achieve carbon and waste neutrality by 2023. The case study shows specific actions implemented and measured yearly, with the opportunity to adjust goals based on short-term and long-term results. For example, reducing carbon emissions by 2,700 tons yearly by installing the world's most extensive solar panel system.(13)
- Apollo Hospital Groups in New Delhi, India, is committed to monthly tracking of water withdrawals, total greenhouse gas emissions, waste generation, and corresponding emissions in 40 facilities. The case study demonstrates the effective use of technology for tracking using an in-house tool that includes a dashboard, tracking, and report links.(14)
- WIPO GREEN Database of Innovative Technologies and Needs. The WIPO GREEN database is a free, solutions oriented, global innovation catalogue that connects needs for solving environmental or climate change problems with tangible solutions.(15)
- The Climate Information Portal developed by the Swedish Meteorological and Hydrological Institute offers various tools and guidance for utilising climate data and modern technology to improve climate change adaptation and mitigation.(16)
- Implementing systems to track the carbon footprint in healthcare may help SA Health estimate its greenhouse gas footprint and develop, track, and evaluate actions towards achieving Net Zero emissions by 2050.(17) The Sustainability Accelerator Tool, developed by

the International Hospital Federation in collaboration with Deloitte's Geneva Sustainability Centre is designed to assess and report the performance of healthcare facilities in their journey towards sustainability and achieving Net Zero emissions.(18)

The PHAA appreciates the opportunity to make this submission. Please do not hesitate to contact me should you require additional information or have any queries in relation to this submission.

Yours sincerely,

Professor Jacquie Bowden



PHAA Branch President (SA)  
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## References

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