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Department of Health
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RE: INVITATION TO PROVIDE A WRITTEN SUBMISSION TO THE CLIMATE HEALTH WA INQUIRY

I congratulate the Minister for Health and the WA Government in conducting the WA Climate-Health Inquiry. Given climate change is not a priority of the current Australian Federal Government, initiatives and political commitments in responding to climate change and health at a state level is crucial for health of Australian people. I am very pleased to have the opportunity to make this submission to the Inquiry.

I am a senior epidemiologist with more than 15 years’ experience on conducting research on climate change and population health in Australia and internationally. In collaboration with the Lancet Countdown on climate change and health, I co-lead the Australian Countdown project to track the national progress on climate change and health research in Australia. The first national report includes 41 indicators from 5 sections on risks and vulnerability, adaptation, mitigation, finance, and public and political engagement, which was published on the Medical Journal of Australia in 2018 (https://www.mja.com.au/journal/2018/209/11/mja-lancet-countdown-health-and-climate-change-australian-policy-inaction). I also led the development of the associated Brief for Australian policymakers, based on the key findings from both the national and global report (http://www.lancetcountdown.org/media/1394/2018-lancet-countdown-australia-policy-brief-final-for-upload.pdf).

I would like to highlight the key gaps as well as policy recommendations that are relevant to WA from the Australian Countdown team.

1. Temperature, rainfall, and tidal level play an important role in transmission of infectious diseases in WA. More resources (funding and human resources) should be allocated to strengthen monitoring and early warning systems for climate-sensitive infectious diseases to inform necessary preparation of public health systems.

2. There is limited city-level health risk assessment in WA. More State-wide research funding should be allocated to support evidence-based decision making, given the lack of research funding on climate change and health from both NHMRC and ARC.

3. Metropolitan Perth had more than 300 premature deaths due to PM2.5 in 2015, which number was the third highest after Sydney and Melbourne. There is a strong need to accelerate decarbonisation of WA’s energy sector, which requires strong political and financial commitments to achieve phase-out of coal-fired electricity generation. In 2016-17, WA has the most growth in energy use and nearly all of this growth was in the mining sector.
4. WA should provide adequate funding and support to statewide active transport initiatives (including public transportation, cycling, and walking) in order to capitalise on the environmental, health and economic benefits of a more active population and a less polluting transport system.

I am also a Board member of Climate and Health Alliance (CAHA) and Global Climate and Health Alliance. I strongly support the additional recommendations from the CAHA submission.

I would be happy to contribute further by presenting at the public hearings or other opportunities to inform policy making in order to protect health of people in WA.

Yours sincerely,

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