

## Climate Health WA Inquiry

### About your submission

Are you responding on behalf of an organisation or group?

No

Yes

If yes, please identify the organisation:

### Your contact details

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### Publication of submissions

Submissions will be published with the name of the submitter unless otherwise indicated below. Do you consent to be identified in the published submission?

Yes, I / my organisation agree to be identified

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### Terms of Reference

You are encouraged to address at least ONE of the Terms of Reference as listed below. Please select which item/s you will address:

1. Establish current knowledge on the implications of climate change for health in Western Australia (WA) and recommend a framework for evaluating future implications.

2. Identify and recommend a program of work to manage the implications of climate change for health in WA, which will protect the public from the harmful health impacts of climate change.

3. Identify and recommend a program of work to manage the implications of climate change for health in WA, which will strengthen the preparedness and

resilience of communities and health services against extreme weather events, with a focus on the most vulnerable in the community.

4. Identify and recommend a program of work to manage the implications of climate change for health in WA, which will reduce the contribution of WA health services to climate change and other detrimental impacts.

5. Identify and recommend a program of work to manage the implications of climate change for health in WA, which will enable WA Health services to implement change, including energy efficiency, to a more sustainable model.

6. Evaluate the likely benefits (health and wellbeing, social and economic) arising from climate change mitigation strategies, with a focus on WA health services.

7. Define the role of the Department of Health in leading public policy on climate change and health.

8. Recommend the Terms of Reference, scope and preferred methods for undertaking a climate change vulnerability assessment for the health sector.

9. Recommend the Terms of Reference, scope and preferred methods for developing a Climate Change Adaptation Plan for the health sector.

### Submissions response field

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### Gender, health and climate change

#### Introduction

There is comprehensive evidence from research across Australia and internationally that existing gendered inequalities are exacerbated under climate change, and that the implications of climate change are differentiated for women, men and non-binary folks (see, for example, Alston 2011; Alston & Whittenbury 2013; Parkinson et al. 2015). Gender inequality is a social determinant of health, and therefore it is vital to adopt a gendered lens when considering the social risks and responses to climate change. Furthermore, an intersectional approach is also necessary, understanding that gender intersects with other characteristics to determine a person's vulnerability to climate change, such as age, Indigeneity, race, sexuality, ability, rurality, and income level. The research shows that climate change entrenches gender inequality and traditional gender roles, and in Australia, advantage and privilege under climate change is most often held by people who are male, heterosexual, white, English-speaking, able-bodied, high income-earning and residing in well-resourced urban communities.

#### Gendered impacts of climate change

Some of the documented gender-differentiated health impacts of climate change in Australia are shared as follows. It is reasonable to expect that documented

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gendered experiences of climate change in other parts of Australia are likely to also occur in Western Australia.

#### *Men's violence against women*

Evidence suggests that there is increased men's violence against women during and after climate events in Australia, including physical, verbal, sexual, financial, psychological and emotional abuse (Alston 2012, 2013; Anderson 2009; Parkinson & Zara 2013; Parkinson et al. 2015; Sevoyan *et al.* 2013; Whittenbury 2013). Furthermore, Parkinson et al.'s (2015) research following the Black Saturday fires found that women already experiencing violence are at greater risk of violence during and after the disaster. There is also significant pressure on women to ignore or forgive men's violence (Parkinson & Zara 2013), with heightened excuse-making and legitimisation for men's violence against women (Parkinson et al. 2015), reflecting perpetrator-excusing attitudes. Importantly, Parkinson and Zara (2013) argue that this is a poorly researched topic in Australia.

#### *Economic tensions*

Economic difficulties from drought and other disasters combined with traditional caring responsibilities widens economic inequality between men and women, and increases women's risk of poverty (Alston 2007; 2009; 2011; 2012; Anderson 2009; Boetto & McKinnon 2013; Parkinson, Farrant & Duncan 2015; Whittenbury 2013). Existing economic inequality between women and men in Australia is entrenched due to climate events, as Alston (2007) states, 'wealth is significantly linked to one's capacity to adapt to or withstand climate change events; and labour force participation and land ownership have a critical impact on the consequences for women and men' (p.30). Single parent households, generally headed by women, experience increased economic tensions under climate change (Sevoyan *et al.* 2013).

Economic difficulties due to drought and subsequent debt are common (Anderson 2009), and has caused many women farmers to source off-farm income to generate income, in addition to increased on-farm work along with childcare, household and community responsibilities (Alston 2007, 2009, 2011, 2012; Boetto & McKinnon 2013; Whittenbury 2013). Women also assume the majority of caring responsibilities for children and elders, resulting in difficulties escaping bushfires and other climate events, fewer economic resources for adaptation to climate change and less access to private transport to escape or evacuate during disasters (Parkinson et al. 2015). Research suggests that farm women affected by drought are overworked, alienated and unable to participate in community activities and organisations, with limited visibility in drought imagery, discourse and agricultural policy (Alston 2007, 2009, 2012; see also Whittenbury 2013). Some farming men are also migrating away for work (Whittenbury 2013), and some farming couples and families involuntarily separate to earn income off-farm (Alston 2006, 2007, 2011, 2013; Whittenbury 2013). There is increased risk of marital conflict and marriage breakdown due to climate events (Alston 2011; Parkinson et

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al. 2015), and Alston (2006) also reports that some women experience difficulty managing interpersonal relationships. Furthermore, farming men in drought-affected areas have increased workloads and are increasingly socially isolated working on the farm, with reduced community participation (Alston 2007, 2009, 2011; Alston & Kent 2008; Alston & Whittenbury 2013; Boetto & McKinnon 2013; Whittenbury 2013) and increased feelings of alienation and mistrust (Alston 2011).

#### *Mental health*

Women and men have varied relationships and attachments to place, which connects to wellbeing (Alston 2013). Climate events such as drought have significant negative mental health impacts on women and men. Some reported impacts on men include increased stress and pressure, disrupted sleep, lack of energy and motivation, decreased sexual appetite, increased depression, suicidal ideation and grief and loss, experience social isolation, anxiety, and increased smoking and drinking (Alston 2006; 2007; 2009; 2011; 2012; 2013; Alston & Kent 2008; Alston & Whittenbury 2013; Anderson 2009; Boetto & McKinnon 2013; Bryant & Garnham 2015; Guiney 2012; Parkinson et al. 2015; Whittenbury 2013). Some authors report high rates of suicide of farming men (Alston 2012; Boetto & McKinnon 2013; Guiney 2012; Parkinson et al. 2015) although Guiney's (2012) analysis of coronial findings from farming suicides in Victoria 2001-2007 suggest that there was not an increase in farming suicides during the drought period, but this does not mean that suicide risk did not increase. Reported mental health impacts of drought on women include stress, anxiety, depression, post-natal depression and grief and loss (Anderson 2009; Alston 2011; Boetto & McKinnon 2013; Stehlick et al. 2000).

#### *Health management*

Research also suggests that during climate events such as drought in Australia, men ignore their own health, and women also ignore their own health while monitoring and holding themselves responsible for the health and wellbeing of their partner, families and communities (Alston 2009, 2012; Alston & Kent 2008; Alston & Whittenbury 2013; Boetto & McKinnon 2013; Whittenbury 2013). For example, a woman in Alston's (2006) study noted that her experience of cancer was not a priority in the context of the drought, and her position was subordinate to the farm.

#### *Embodiment of climate change*

Women also experience risks during pregnancy in climate event (Alston 2013; Parkinson et al. 2015). During climate events, pregnant women experience heightened risks from increased stress, lack of access to nutritious food and higher likelihood of violence (Parkinson et al. 2015). Alston (2013) also identifies that women's embodiment of climate change adds to their vulnerability through

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violence, loss of family planning support, unwanted pregnancy, lack of hygiene products and loss of clothing and belongings.

Studies also report increased physical ailments of farming men in drought-affected communities (Bryant & Garnham 2015), related to men undertaking physically demanding tasks, often in isolation and with increased risk of injury (Whittenbury 2013).

#### *Substance misuse*

Several authors also report increased drinking and smoking amongst men affected by drought (Alston 2012; Bryant & Garnham 2015).

#### *Mortality*

In their summary of the Australian literature, Parkinson et al. (2015) recognise greater risk and mortality for woman than men in heatwaves, and greater risk and mortality for men than women in bushfires. It is suggested that women are more likely to evacuate a fire risk area because they lack knowledge about fighting fires (Erikson et al. 2010), but Tyler and Fairbrother (2013) argue that the higher men's death toll in bushfires is perhaps due to men choosing to 'stay and defend'.

#### *Specific groups*

- During and after disasters, trans\* people can experience disrupted access to regular hormone replacement (Gorman-Murray *et al.* 2018).
- Language barriers, lack of weather acclimatisation and adaptation, and wearing climate-inappropriate clothing can have differentiated impacts on women and men of culturally and linguistically diverse backgrounds particularly newly arrived migrants impact (Hansen *et al.* 2013, Sevoyan *et al.* 2013). Furthermore, during climate events, lack of local language and cultural knowledge also limits access to information, community activities and social support networks that generally advantage non-CALD communities (Sevoyan *et al.* 2013, Bell and Blahski 2014).
- Climate-induced changes to identity and place has been known to cause sadness and 'solastalgia' (distress from environmental change) for Torres Strait Islander women (McNamara & Westoby 2011)
- During the 2011 Queensland floods, LBGTI people reporting experiencing stress, anxiety and depression, fears of, or actual experience of, prejudice and/or abuse, and reluctance to seek mainstream emergency services due to fears of lack of safety, accessibility and inclusivity in heteronormative spaces that privileged non-LGBTI peoples (Gorman-Murray *et al.* 2017). A key issue for LGBTI people is that some Australian governments outsource emergency response and recovery arrangements to faith-based Christian organisations with legal exemption from anti-discrimination protections (Dominey-Howes *et al.* 2016).

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- People with disability are at heightened risk from climate events, especially extreme heat and cold (Walker 2015, Hughes *et al.* 2016) and during severe emergency evacuation procedures, particularly children with disability (Boon *et al.* 2008). Challenges also arise regarding the care of people with disability before, during and after extreme events (Bell and Blahski 2014). Women with disability are at even greater risk of violence than other women.
- Older Australians are vulnerable to climate events such as bushfires due to reliance on others to evacuate, and heat waves due to declining physical and cognitive health, tendency to overdress, lack of thirst, limited transport and fear of high power bills (Horton *et al.* 2010, Hansen *et al.* 2013, Sevoyan *et al.* 2013); especially First Nations elderly people with chronic illnesses such as kidney disease (Sevoyan *et al.* 2013).
- Climate events can cause child health risks such as overheating, dehydration, vector-borne diseases and mental health concerns (Sevoyan *et al.* 2013, Parkinson *et al.* 2015, Hughes *et al.* 2016). Disaster evacuation centres with shared sleeping areas and volunteer carers also pose child protection risks (Bell and Blahski 2014).

### Causes of gendered injustice under climate change

It is argued that during and after climate events, hegemonic masculinity moulds and reinforces traditional gender roles and unequal power (Erikson *et al.*, 2010). For example, in times of extreme financial burden due to drought, farming men feel a sense of 'emasculatation' as they experience a loss of provider role (Whittenbury 2013, p.211). Similarly, women's work in disasters, such as caring for families and reconstructing communities, is often overlooked while men's work in rebuilding is celebrated (Parkinson *et al.* 2015). Additionally, hegemonic forms of rural masculinity leads farming men to be stoic and avoid seeking help when their health is at risk, resulting in significant mental health concerns (Alston 2012; Alston & Kent 2008). Bryant and Garnham (2015) suggest that drought threatens men's masculine subjectivity and sense of worth when they fail to fulfill socially-expected roles of 'heroes' and 'battlers'. Alston (2012) also argues that women unwittingly foster traditional masculinity by supporting and monitoring their husbands while failing to address their own needs and failing to identify the impacts of men's responses on themselves.

Research also indicates that some impacts of climate change unsettle and threaten traditional gender relations between women and men in Australia, such as women undertaking new roles, women's economic participation, and the erosion of the position and status of farming men (Alston & Kent 2008; Alston & Whittenbury 2013; Stehlick *et al.* 2000). Yet, it is argued that women don't necessarily experience increased power in these circumstances as patriarchal power relations still dominate, and women do not have equal power in decision-making (Alston & Whittenbury 2013). There is, however, some evidence to suggest that gender equal responses to climate change (that emphasize equal

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participation and rights of people of all genders) foster greater wellbeing for women and men. For example, in their study of gendered experiences of drought in 1995-1997, Stehlick and colleagues (2000) established that, 'couples who shared the burden through mutual decision-making found their partnership strengthened and supported, and their personal response to the disaster became less overwhelming' (p.42).

#### **Research regarding gender and climate change**

Dr Naomi Godden is a social work academic at Edith Cowan University on the South West campus. She undertakes research regarding the social justice and gendered implications of climate change in WA, Australia and internationally. She is currently undertaking research with organisations in the WA community sector to support the mainstreaming of climate justice and gender into the policies and programs of WA social justice organization. Dr Godden has also undertaken research regarding the structural barriers to women's participation in climate decision-making in Australia (publication forthcoming).

#### **A gender just approach to climate health in WA**

A gender equal approach to climate change requires that research, policy, and practice transform unequal constructions of femininity and masculinity by challenging the dominant system of patriarchy that subordinates marginalized peoples and the planet. This can be assisted by women's equal involvement in climate change leadership and decision-making at individual, household, community, organizational, and structural levels, to challenge hegemonic norms that predominantly place men in positions of power and influence (Connell & Messerschmidt 2005) and support co-creation of gender-equal climate responses.

*Recommendation 1: That women, men and non-binary folk in all their diversities are equally included in all levels of government and community decision-making and co-design of climate change and health policies, programs and interventions.*

*Recommendation 2: That the WA Department of Health mainstreams climate justice and gender across all its policies, programs and interventions to ensure that the health needs of all people in all their diversities are met.*

*Recommendation 3: That WA Department of Health funds research about the gendered impacts of climate change in WA, and integrates the findings into climate health policies, programs and interventions.*

*Recommendation 4: That men's violence against women is recognised as a priority health concern under climate change in WA, and that funding is made available for adequate and effective interventions to protect women from violence during and after climate events and to change men's behaviours.*

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*Recommendation 5: That staff within the WA Department of Health are adequately trained and resourced to recognise and appropriately respond to men's violence against women during and after climate events.*

*Recommendation 6: That the health needs of trans\* peoples are understood and catered for during climate events, including access to hormone replacements.*

*Recommendation 7: That the management of emergencies is not outsourced to faith-based organisations that may be exempt from anti-discrimination policies.*

*Recommendation 8: That WA Department of Health employs place-based climate justice workers who understand the complex and intersecting injustices under climate change and are adequately resourced to respond to the health needs of diverse peoples and communities.*

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