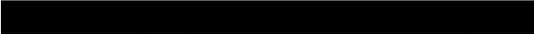


SUBMISSION CLIMATE HEALTH INQUIRY

INTRODUCTION & EXECUTIVE SUMMARY

 is making this submission to the Climate Health Inquiry from the perspective of  experience in matters of public interest environmental law and the regulation of the resources sector. While we do not assume any expertise in regards to public health policy, we recognise the significant body of scientific literature, both local and global, proving the negative health consequences of climate change, and the interconnection between the health sector and many other governmental and industrial sectors.

Therefore, the focus of this submission addresses the third aspect of the Terms of Reference (defining the role of the Department of Health (**DoH**) in leading public policy on climate change and health) with regard to making policy recommendations to both DoH itself, and other departments.

Specifically, the submission will address the role of the regulation of greenhouse gas emissions and fracking in mitigating climate change and subsequently alleviating climate health issues, as well as other general strategies DoH might employ to do so.

BACKGROUND

As acknowledged above, Western Australia, much like the rest of the world, is vulnerable to unprecedented local and public health risks due to the steadily warming climate.¹ Globally, climate change and its impacts will have adverse effects on land, food and fresh water availability and quality, air pollution levels, extreme weather event risks, and numerous other environmental and social factors.² This will subsequently increase the risk of a number of physical and mental illnesses, including cardiovascular disease/heart failure, heatstroke, malnutrition, water-and-air-borne diseases,³ anxiety and depression.⁴

In the United States, clean energy and transportation policies (if implemented) are estimated to prevent nearly 295,000 premature deaths.⁵ Closer to home, climate health impacts are already being felt, with increased climatic rainfall and subsequent drinking water contamination leading to nearly 5,500 residents in Havelock North, New Zealand, falling ill with campylobacteriosis.⁶

On the other hand, climate mitigation strategies are predicted to have an overall positive and immediate effect on population health. These include improved air quality, new agricultural practices

¹ Department of Health WA, *Health impacts of climate change: Adaptation strategies for Western Australia* (Report, 2007) p. 5.

² Intergovernmental Panel on Climate Change, *Special Report: Global Warming of 1.5°C* (Report, 2018) Chapter 1.

³ European Academies Science Advisory Council, *The imperative of climate action to protect human health in Europe* (Policy Report, June 2019) p. 14.

⁴ Alistair Woodward, 'How climate change affects the building blocks for health', *ABC News* (26 October 2017) <<https://theconversation.com/how-climate-change-affects-the-building-blocks-for-health-86202>>.

⁵ Drew T. Shindell, Yunha Lee and Greg Faluvegi, 'Climate and health impacts of US emissions reductions consistent with 2°C' (2016) 6 *Nature Climate Change* 503-507.

⁶ Department of Internal Affairs (NZ), *Government Inquiry into Havelock North Drinking Water* (Report, 2017).

leading to better diet-based health,⁷ promotion of active transportation leading to increased physical health,⁸ as well as decreased risk of negative impacts resulting from sudden environmental, social and residential change.

Climate mitigation strategies and planning have often proved insufficient for public health institutions in the European Union to effectively combat climate change and its health effects, however. The European Academies Science Advisory Council recommended that public health institutions also educate and communicate the impact of climate change on human health, which in turn will both increase the effectiveness of mitigation strategies, and combat misinformation and obfuscation of climate change issues by other vested interests like the resources industry.⁹

RECOMMENDATIONS

HEALTH CONSIDERATIONS IN ENVIRONMENTAL IMPACT ASSESSMENTS (EIA)

The WA Environmental Protection Authority (**EPA**) has established that interference to health and welfare from issues such as noise, odour and dust is a chief consideration in determining the environmental impact of a project.¹⁰ The EPA has further qualified that it needs to take a “holistic approach to human health to which EIA of significant proposals and schemes can contribute by ensuring that human health is not materially affected by the development activity.”¹¹

In line with these guidelines, [REDACTED] recommends that DoH liaise with the EPA to ensure that when undertaking EIA for proposals with significant GHG emissions, the EPA consults with DoH on the likely contribution of significant proposals to WA’s impact on climate change and subsequently on public health. Where DoH considers this contribution to be material, it should advise that the EPA recommend against the relevant proposal, and where it considers the contribution to be minor, it should advise the EPA of potential health risks and recommend mitigation strategies that can be implemented to avoid and manage them.

HEALTH CONSIDERATIONS IN GREENHOUSE GAS EMISSION REGULATION

Scientific literature as it stands has noted the impact of greenhouse gas emissions on climate change both globally and locally. In WA it has been established that greenhouse gas emissions have contributed to decreased rainfall in WA’s South-West, increasing average temperatures (between 0.1 and 0.2 C° per decade since 1950), and increasing sea surface temperatures (by 0.6 C°).¹² If concentrations of greenhouse gases continue to increase it is predicted climatic drying and warming in WA’s South-West will increase, leading to permanent drying and subsequent loss of freshwater ecosystems, affecting health, recreation and the Australian way of life.¹³

⁷ European Academies Science Advisory Council, *The imperative of climate action to protect human health in Europe* (Policy Report, June 2019) p. 34.

⁸ T. Xia et al. ‘Traffic-related air pollution and health cobenefits of alternative transport in Adelaide, South Australia’ (2015) 74 *Environ Int* 281-290.

⁹ European Academies Science Advisory Council, *The imperative of climate action to protect human health in Europe* (Policy Report, June 2019) p. 49.

¹⁰ Environmental Protection Authority, *Environmental Factor Guideline – Social Surroundings* (Guideline, 2016).

¹¹ Environmental Protection Authority, *Environmental Factor Guideline – Human Health* (Guideline, 2016).

¹² Independent Scientific Panel Inquiry into Hydraulic Fracture Stimulation in WA, *Final Report to the Western Australian Government* (Report, September 2018) p. 365.

¹³ Chambers et al, ‘Climate change and Western Australian aquatic ecosystems; Impacts and adaptation responses’ (2013) National Climate Change Adaptation Research Facility.

CLIMATE CHANGE-RELATED LITIGATION AND LIABILITY

Internationally, there continues to be a rise in litigations associated with climate change¹⁷. Such litigation has included legal challenges to governments and private entities both on the basis of alleged failures to carry out legal duties to mitigate climate change, and on the basis of harm suffered from the impacts of climate change. The scope and frequency of climate change related litigation is likely to continue to grow, and may extend to lawsuits founded on the basis of harm suffered as a result of impacts to health. [REDACTED] notes that proactive strategies and measures to mitigate both the causes of climate change and the attendant risks to public health associated with climate change can ameliorate risks of liability in the event of climate change litigation, and recommends that DoH adopt such proactive measures and strategies, and assist other agencies in doing so.

¹⁷ Grantham Institute, *Global trends in climate change litigation: 2019 snapshot* (Report July 2019)