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Australian Climate Leadership in 2026: COP-Out or Step-Up for Health?

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ABSTRACT

The world is on the brink of tipping points for climate disaster and transformative action. Decisions taken now will shape the health of millions. So, will the Australian Government use its COP31 Presidency of Negotiations to prioritise the health of current and future generations and champion the end of fossil fuels? Despite recent positive shifts in some areas of climate policy, Australia's status as the world's third largest exporter of fossil fuels means strong pressure must be applied from the health professions to maximise political, social and economic progress towards a health-focussed transition to a sustainable society.

JEL Classification: Environment and public health, Global health, Health services administration

1 | Introduction

Climate change is the greatest health threat we face [1]. Global average temperature rise has almost breached the 1.5°C limit identified in the Paris Agreement to avoid severe climate impacts [2] and overshooting this is now inevitable [3]. Climate-driven devastation, displacement and disease are now regular occurrences, amplifying pre-existing inequities within and between populations and undermining the health and well-being of current and future generations [4–6]. The health of all people is at risk, in Australia and globally. Young children, older adults and those experiencing poverty, homelessness and pre-existing mental or physical health conditions face increased risks [1, 4–6]. Air pollution from burning fossil fuels is estimated to be responsible for one in five deaths globally [7].

Indigenous peoples and inhabitants of low-lying Pacific nations are among those most severely impacted [5, 6, 8]. In Australia's remote interior, water scarcity and extreme heat threaten to displace Aboriginal communities from traditional homelands [6]. Pacific islands and Zenadth Kes (the Torres Strait) are already experiencing sea-level rise, erosion and flooding, with saltwater inundation compromising fresh water supplies and crop yields [5, 6, 8]. In 2025, 280 visas were issued for citizens of Tuvalu to relocate to Australia [9], following Papua New Guinea's Carteret atolls, which were the first to be evacuated because of climate change [10]. The physical and mental health impacts of displacement are compounded by spiritual and cultural dislocation from Country [6, 10].

Indigenous and Pacific leadership has consistently articulated climate change as a health, cultural and sovereignty crisis,

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challenging dominant technocratic framings within global climate negotiations [6, 10].

2 | The State of Global Climate Action

The global response, centred on the United Nations Framework Convention on Climate Change (UNFCCC) Conference of the Parties (COP), has been inadequate to meet the scale and urgency of the health crisis [11]. Greenhouse gas emissions and atmospheric concentrations of carbon dioxide continue to reach record levels [2, 3].

In November 2025, COP30 achieved modest incremental gains. In the context of the United States' second Paris Agreement withdrawal, and broader geopolitical uncertainty, the endurance of multilateralism and reaffirmation of commitment to limit average global warming to 1.5°C were significant. Other outcomes included increased financing to support climate-impacted countries and adaptation planning [12]. However, 2 years after 197 countries endorsed the COP28 United Arab Emirates Consensus call for 'Transitioning away from fossil fuels in energy systems, in a just, orderly and equitable manner' [13], the COP30 Global Mutirão included no mention of fossil fuels or mechanisms to achieve this transition [12]. Governments' emission-reduction policies—assuming full implementation—are projected to limit warming to 2.8°C [3], a scenario that would drive ecological devastation and widespread poverty, displacement, conflict and mortality [14]. Warming could be greater, as every increment increases the risk of tipping points [3, 14].

3 | Increasing Focus on Health

Over recent years, there has been increasing recognition that a stable climate is a fundamental pre-requisite to human health and well-being [4, 15]. COP26 launched the Alliance for Transformative Action on Climate and Health (ATACH) network of the World Health Organization (WHO), which aims to advance climate-resilient and low-carbon health systems and now includes over 100 member countries. COP28 hosted an inaugural health day and produced the Declaration on Climate and Health, endorsed by 150 countries [15].

At COP30, the Belém Health Action Plan (BHAP) was endorsed by over 30 countries, including Australia. The BHAP seeks to strengthen collective action and governance to equip health systems to prevent, detect and respond to escalating climate-health risks, especially in low- and middle-income countries. It outlines a comprehensive suite of health adaptation actions, spanning surveillance and monitoring; evidence-based policies, strategy and capacity-building; and innovation, production and digital health, with reporting to the WHO and USD 300 million in philanthropic implementation support [16].

The actions advanced through ATACH and the BHAP are necessary and welcome; however, in the context of ongoing fossil fuel proliferation, health systems will not be equipped to manage the escalating health burden [4, 14].

4 | Drivers of Climate Health Action: Beyond COP

In response to glacial formal COP progress, over 80 countries signed the Belém Declaration on the Transition Away from Fossil Fuels at COP30, and Colombia and the Netherlands co-hosted the first Just Transition Away from Fossil Fuels International Conference in April 2026 [17]. These developments seek to accelerate phasing out of fossil fuels.

Economic arguments for the energy transition continue to strengthen. In 2024, global installed capacity for renewable energy generation overtook that of non-renewables for the first time [18]. Renewable energy generation continues to reduce in cost and expand exponentially, leading to accelerating reductions in emissions intensity [18]. The least costly electricity generation mix for Australia is based on solar and onshore wind [19]. Massive increases in global electricity investment have been dominated by renewable energy generation and grid transition (including battery storage) and continue to drive progress towards realising the energy transition [18].

The renewable transition is expected to increase energy security. Russia's invasion of Ukraine and the current Middle East conflict have demonstrated the risks arising from concentrated dependence on fossil fuel export countries. Moving away from energy systems that require ongoing fuel importation reduces supply risks. Diversification of transition metals supply chains will be important to mitigate new energy security vulnerabilities [20].

Alongside economic shifts, a recent ruling of the International Court of Justice is expected to increase legal pressure on states to act consistently with the Paris Agreement, limiting warming to 1.5°C. The International Court of Justice concluded that states have binding obligations 'to ensure the protection of the climate system and other parts of the environment from anthropogenic greenhouse gas emissions'. Critically, these obligations include both domestic and export-focussed activities, incorporating fossil fuel production, consumption, exploration licences and subsidies [21]. This ruling is likely to prompt renewed legal challenges within and between countries and may influence the appeal by Torres Strait Islander Elders against the Australian Federal Court's finding that, despite climate change posing an existential threat, government policy falls outside its jurisdiction [22].

5 | COP31: Australia's Role

Australia and Türkiye share responsibilities for COP31. Australia is President of Negotiations, holding 'exclusive authority' over negotiations until COP31 concludes. Türkiye, as COP President, will host the COP31 World Leaders Summit and lead the Action Agenda [23], which mobilises voluntary actions from nations, subnational governments, business and civil society to advance emissions reduction, climate adaptation and transitions to sustainable economies [16]. A Pacific Island country will host the Pre-COP meeting, with Australia, Türkiye and Pacific Island countries collaborating on the Action Agenda, including a session on climate finance for Small Island Developing States [23].

Australia, the world's third largest exporter of fossil fuels, has historically sought to water down ambition in international climate negotiations. Since the change in federal government in 2022, Australia has engaged more constructively, including announcing more ambitious emission reduction targets of 43% by 2030 and 62%–70% by 2035, relative to 2005 levels, as interim targets towards net zero by 2050. Critically, these targets only apply to domestic emissions [24]. Australia's total greenhouse gas emission footprint, including fossil fuel exports, is more than triple the domestic emissions [25].

Australia was among the signatories to the Belém Declaration on the Transition Away from Fossil Fuels; however, within hours, the Prime Minister confirmed this did not require coal or gas export reductions [26]. Simultaneously, the Australian Government has continued to approve new and expanded fossil fuel projects [27].

Regarding national health policy, the Australian Government is a member of ATACH, has adopted a National Health and Climate Strategy [28] and is working to implement the strategy's actions [29]. In 2021–2022, the healthcare sector was responsible for 23.5 million tonnes of carbon dioxide equivalent, representing 5.4% of domestic greenhouse gas emissions [30].

6 | What Successful Australian Leadership Would Look Like at COP31

A just transition to a decarbonised global economy represents the most important preventive health intervention of our time. A successful political outcome at COP31 requires a clear commitment and roadmap on fossil non-proliferation and phase-out [11, 31]. Further delay will result in avoidable loss of life and jeopardise the rights of peoples to remain on traditional homelands, including for Aboriginal and Torres Strait Islander and Pacific peoples [4–6]. Advancing policies that support the economic transition, including ending fossil fuel subsidies and increasing clean energy investment, is essential to address this goal [4, 18].

Increased funding to support adaptation and mitigation in the Pacific is another critical benchmark of success. Pacific leaders have proposed a 100% Renewable Pacific Partnership as a potential COP31 signature initiative. This would require USD 1 billion investment, saving USD 6 billion annually in diesel imports alone, while improving energy access and security, reducing pollution-related harms and stimulating economic growth [32].

Throughout COP31 negotiations, it will be essential to ensure Pacific and Indigenous voices are meaningfully included. Outcomes must reflect the needs of people facing imminent climate-related risks [6, 10]. This must incorporate moving away from international climate negotiations as industrialised capitalist colonial processes, to a rights-based approach that promotes self-determination and justice by ensuring full and effective participation of Pacific and Indigenous leaders, concrete action to limit overshoot and rapidly return to a 1.5°C trajectory and drawing on traditional Indigenous knowledges to reshape international climate negotiations around reciprocal relationships with nature [33]. Recognising the enduring statehood and

identity of forcibly displaced communities and resourcing their adaptation is essential [10]. Achieving this requires curbing the influence of fossil fuel lobbyists, who represented one in 25 participants at COP30 and whose interests continue to undermine health [11].

Continuing to promote climate resilient, low-emissions health systems will deliver tangible benefits [4]. Expanding participation in the BHAP and ATACH and supporting knowledge-sharing, capacity-building and regional collaboration will strengthen resilience [4].

7 | The Role of Health Professionals

Across personal and professional spheres, health professionals have a powerful role in advancing a just transition to a healthy and sustainable future. As trusted voices, they are well-placed to communicate decarbonisation as an urgent health intervention [34]. As misinformation and disinformation proliferate, this role is critical [4].

COP31 is critically important for Australian health professionals. The most effective contribution is sustained political advocacy for the non-proliferation and phase-out of fossil fuels. This requires applying pressure on government to deliver health-protective outcomes and holding it accountable if it fails to do so [35]. Key strategies include highlighting harms by communicating attributed disease burden and narrative experiences of caring for individuals impacted by climate change and pollution to disrupt the social licence of fossil fuel companies and calling for a public health response [34, 35].

Advocating through climate-focussed health advocacy organisations, health services and professional representative organisations can magnify impact, foster connectedness and sustain individual resilience [4]. Alongside advocacy, continued local and national action to respond to climate impacts and build resilience is essential. Transforming the health sector to be environmentally sustainable will reduce avoidable harm from emissions and waste and can help catalyse broader societal change. This entails reducing low-value care, promoting preventive activities and reducing the emissions of high-value care [36]. Addressing individual carbon footprints reduces emissions and role models behaviour change. Living car-free, changing to an electric vehicle, reducing air travel, utilising household renewable energy and consuming a plant-based diet are effective strategies [37]. Decarbonisation measures are most effective when leveraged to build a broader movement of advocacy for wider economic transition to renewable energy [34, 35].

Health sector responses must be guided by allyship with Aboriginal, Torres Strait Islander and Pacific peoples [6, 10]. Health education and training must adapt to equip the workforce for these emerging health challenges [4].

Progress at COP31 could steer society towards health-focussed sustainability and avert substantial loss of life. The health profession must mobilise to meet this moral and political imperative.

Author Contributions

Catherine G. A. Pendrey: conceptualisation, writing – original draft, writing – review and editing. **Angie Bone:** conceptualisation, writing – review and editing. **Aletha Ward:** conceptualisation, writing – review and editing. **Francis Nona:** conceptualisation, writing – review and editing. **Michelle Isles:** conceptualisation, writing – review and editing. **Paul M. Kelly:** conceptualisation, writing – review and editing. **Nicholas J. Talley:** conceptualisation, writing – review and editing.

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