Advancing the Australian global health community's commitment to climate change and global health

Angie Bone^{1,*}, Prabhleen Kaur^{2,*} ⁽¹⁾, Anthony Capon¹, Vivian Kwang-wen Lin³, Sione Tu'itahi⁴, Kathryn Bowen⁵, Nick Watts⁶, Jane RW Fisher⁷ ⁽¹⁾, Paul J Stewart⁸, Helen Evans⁹, Selina Namchee Lo^{2,9}

he Australian Global Health Alliance, on behalf of the Australian global health community, stands united, deeply concerned about the health impacts of climate change across the world. The Alliance is the member-based peak body for Australian global health organisations, with a mandate to strengthen the global health ecosystem through national and global connections, supporting research and innovation and creating platforms to engage the global health community with government, the private sector, and the arts (https://ausglobalh ealth.org/about-us/). Since its establishment in 2016, the Alliance is currently the only OECD country global health alliance with a commitment to First Nations global health equity as part of its foundational mandate. The current strategic focus of the Alliance is on healthy equity overall, planetary health, gender equality, and First Nations global health.

The Alliance recognises the convergence of human-induced climate change with other human-induced global challenges — economic inequities, disease pandemics, biodiversity loss, environmental catastrophes, and geopolitical conflict — all of which have an impact on human health. This is a poly-crisis with the complex and interconnected risks of climate change posing significant challenges to society.

We acknowledge that a key driver underlying these crises is an anthropocentric worldview that places human needs above those of nature. Yet, the health of people and the health of the planet are deeply enmeshed — humanity is a part of nature and not apart from nature.

We are already witnessing the impacts of climate change on people's physical and mental health resulting from extreme weather events, and damage to the natural and human systems on which our health relies. The World Health Organization estimates that between 2030 and 2050, climate change is expected to cause about 250000 deaths per year from malnutrition, malaria, diarrhoea, and heat stress.¹ Climate change worsens food and water insecurity, changes infectious disease patterns, exacerbates chronic disease, and causes loss of homes and livelihoods, all leading to more illness and death. It also adds strain to health care systems continuing to deal with the effects of the COVID-19 pandemic.²

Low and middle income countries, especially in the Asia– Pacific region, bear the brunt of climate change impacts, despite contributing fewer emissions than high income nations. Australia's Pacific Island neighbours in particular face substantial ramifications relative to the emission-heavy Global North.³ Climate change amplifies existing health inequities, including gender-based inequities, and threatens to undo progress made in strengthening health systems in our region and globally.¹ Tackling climate change not only safeguards our planet's future but also brings about many co-benefits for health and wellbeing. For example, a transition away from fossil fuel combustion to renewable energy generation could save over one million lives per year from reduction in outdoor fine particulate (particles <2.5 μ m aerodynamic diameter, PM_{2.5}) pollution alone.⁴ Healthy sustainable diets⁵ and greater use of walking, cycling and public transport⁶ could reap physical and mental health benefits.

Our response to climate change also presents an opportunity to reconnect our understanding of the indivisibility of human health with the health of the planet, as First Nations peoples have known for millennia, and to strengthen our resolve to protect and restore the foundations of health — our natural environments.

Even if the current Paris Agreement nationally determined contributions and long term net zero targets are fully achieved, global mean temperatures are expected to increase by 1.7–2.1°C.⁷ The Intergovernmental Panel on Climate Change has shown that accelerated action is needed to cut global emissions by almost half by 2030 if warming is to be limited to 1.5°C above pre-industrial levels, as well as to adapt to the climate change that is already locked in.³

This is a critical decade for action. The multifaceted challenges we face demand a collective effort on an unprecedented scale. It is imperative that we act swiftly, drawing from the wealth of scientific evidence available, to address these challenges.

We possess the expertise to assess the health impacts of climate change, develop strategies for resilience, and advocate for policies that prioritise both planetary and human wellbeing. For example, there is good evidence that cheaper and lower carbon cooling strategies, such as the use of electric fans rather than air conditioning, have the potential to reduce negative health outcomes in many high temperature environments.⁸ This exemplifies how research can pave the way for innovative interventions that serve both our immediate health needs and the long term sustainability of our planet.

To drive transformative change, our policies must be codesigned and foster community-led responses, build capability and capacity, ensure policy coherence, leverage financial instruments effectively, and incentivise progress. These efforts must be woven into the fabric of our institutions, particularly training of the current and future health workforce, promoting skills for sustainability and resilience, as well as interdisciplinary connections, to instil a climate change and health lens across all sectors. By reorienting our systems now, for the sake of our planet and our health, we can set the stage for a legacy that benefits both the current and succeeding generations.

*Equal first authors.

¹Monash Sustainable Development Institute, Monash University, Melbourne, VIC. ² Australian Global Health Alliance, Melbourne, VIC. ³ University of Hong Kong, Hong Kong, ⁴ Health Promotion Forum of New Zealand, Auckland, NZ. ⁵ University of Melbourne, Melbourne, VIC. ⁶ Centre for Sustainable Medicine, National University of Singapore, Singapore, ⁷ Monash University, Melbourne, VIC. ⁸ Lowitja Institute, Melbourne, VIC. ⁹ Nossal Institute for Global Health, University of Melbourne, Melbourne, VIC. ⁸ Lowitja Institute, Melbourne, VIC. ⁹ Nossal Institute for Global Health, University of Melbourne, VIC. ⁸ Selinanamchee.lo@unimelb.edu.au • doi: 10.5694/mja2.52166

With the United Nations Climate Change Conference of the Parties (COP28) being held in late November and early December 2023 — the first ever COP with a dedicated health day and climate and health ministerial meeting — we welcome the increased focus of the international community on the health implications of climate change. We look forward to progress on priority policy and investment actions for health systems, and funding commitments to fill the finance gap for international development work in climate and health. We note that recent assessments have found that only 2% of climate adaptation funding and 0.5% of multilateral climate funding has been explicitly allocated for human health.⁹

Using the holistic framework of the Sustainable Development Goals (https://sdgs.un.org/goals), we recognise that we must transform one of our greatest global health threats into our greatest global opportunity.

Presently, Australia is in a unique position to leverage its influence and align efforts in global health with the opportunities that responding to the climate change crisis provides. Australia must align its actions with its stated commitments, ensuring that its approach, across all sectors and international endeavours, incorporates a robust climate change and health perspective.

Guided by the understanding that our collective efforts can drive meaningful change, we present the following recommendations for the Australian global health community (including government, private sector, and civil society partners) as actionable steps towards a more sustainable and resilient future.

- Centre and connect voices from the Global South, in particular those of Pacific and Indigenous communities, to our responses to climate change and health. Empower their leadership, for instance through leveraging platforms and donor resourcing.
- Shift worldviews to recognise that as we act to protect our planet, we protect ourselves. Incorporate planetary health perspectives in all policies, programs and global health investments and legal instruments, fostering policy coherence and cross-sectoral partnerships.
- Take action to minimise harm to people and the planet at all levels, in recognition of the need for large scale systems transformation, and the power of multiple, and smaller scale community-led responses to drive positive change.
- Shift investments away from fossil fuels and rapidly accelerate transition to renewable energy.
- Enhance capacity building for sustainable and climateresilient health systems by identifying specific capabilities required, and mapping and nurturing the current and future workforce for health in the Asia–Pacific region. Emphasise ongoing education and training, including establishing

global fellowships and exchange programs for early career researchers and practitioners.

- Strengthen climate financing mechanisms and increase the share for actions devoted to improving and protecting people's health. Enhance countries' capacity and capability to access these funds.
- Advocate for the Australian Government to uphold all international treaties and conventions, including the human rights to health and a clean, healthy and sustainable environment. These international commitments must be mirrored in Australia's domestic policies, reflecting a coherent and unwavering dedication to global health and environmental sustainability.

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- World Health Organization. Climate change. 12 Oct 2023. https://www.who. int/news-room/fact-sheets/detail/climate-change-and-health (viewed Oct 2023).
- 2 Romanello M, Di Napoli C, Drummond P, et al. The 2022 report of the Lancet Countdown on health and climate change: health at the mercy of fossil fuels. *Lancet* 2022; 400: 1619-1654.
- 3 Intergovernmental Panel on Climate Change. AR6 synthesis report: climate change 2023. https://www.ipcc.ch/report/sixth-assessment-report-cycle/ (viewed Sept 2023).
- 4 McDuffie, EE, Martin, RV, Spadaro, JV et al. Source sector and fuel contributions to ambient PM2.5 and attributable mortality across multiple spatial scales. *Nat Commun* 2021; 12: 3594.
- 5 Willett W, Rockstrom J, Loken B, et al. Food in the Anthropocene: the EAT–*Lancet* Commission on healthy diets from sustainable food systems. *Lancet* 2019: 393: P447-P492.
- **6** Glazener A, Sanchez K, Ramani T, et al. Fourteen pathways between urban transportation and health: a conceptual model and literature review. *J Transport Health* 2021; 21; 101070.
- 7 UNFCCC Secretariat (UN Climate Change). Technical dialogue of the first global stocktake. Synthesis report by the co-facilitators on the technical dialogue.
 8 Sept 2023. https://unfccc.int/documents/631600 (viewed Oct 2023).
- 8 Jay O, Capon A, Berry P, et al. Reducing the health effects of hot weather and heat extremes: from personal cooling strategies to green cities. *Lancet* 2021; 398: 709-724.
- 9 World Health Organization. 2023 WHO review of health in nationally determined contributions and long-term strategies: health at the heart of the Paris Agreement. Geneva: World Health Organization, 2023. https://iris.who.int/handle/10665/372276 (viewed Oct 2023). ■