

14 November 2021

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Department of Premier and Cabinet
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Dear Ms Russell

Re: Draft Climate Change (State Action) Bill 2021

Thank you for the opportunity to comment on the Climate Change Amendment Bill 2021.

I attach a copy of the AMA Tasmania submission into the Jacobs Review for your information and background as well as provide some specific comments about the draft bill on behalf of AMA Tasmania's members, whom we have consulted.

While we welcome the bill and the action the government is taking on climate change, we believe that this bill is too broad and is a missed opportunity to provide a comprehensive framework within which government, business and the community can operate that transcends changes in government. To take the steps needed to reduce greenhouse emissions, reduction targets for 2030 should be mandated and enforceable and cover public and private sectors. Unfortunately, current approach to climate change is restricted to policy, like the last six iterations, which have achieved nothing (actual emissions are increasing), and restricted to the government sector only.

1) The Bill should declare climate change as a medical emergency.

AMA Federal and AMA Tasmania have both joined international organisations like the British and American Medical Associations in declaring climate change a medical emergency. We believe the impact of climate change on the health of Australians is so great, that more action must occur to reduce greenhouse emissions and quickly. We urge the State Government to also make such a declaration to help harness collective action to reduce greenhouse emissions, with this bill being the prime opportunity to do so.

Doctors are already seeing the effects of climate change in patients. The elderly are particularly affected by increasing summer temperatures, over many more days. The risk of bush fire is very real, with most summers experiencing some level of bush fire activity, which affects air quality and in turn is affecting people's health, for example, people with respiratory conditions struggle to breathe and

pregnant women risk having premature and lower weight babies if exposed to bushfire smoke for prolonged periods of time.

We are also seeing the emergence of 'climate change refugees', that is people moving to cooler climes like Tasmania to avoid rising temperatures. That in turn is placing housing pressures in markets like Hobart and Launceston, inevitably displacing people and forcing up rates of homelessness. It is no longer uncommon to find a homeless person sleeping in shop doorways in the CBD of Hobart. We know the health outcomes for people without the basics of a roof over their head is less than those with stable accommodation.

2) There is no mention of 'health' within the bill.

a. Health of Patients is missing:

As health professionals concerned about the impact of climate change on the health and well-being of our patients, it is disappointing at best and alarming at worst, not to see any mention in the objectives of protecting the health of Tasmanians, even though climate change represents the biggest threat to the health of the Tasmanian community. The only mention of 'health' in the fact sheet refers to 'improving public health, security, and wellbeing outcomes in changing climate.' We would urge at the very least the objectives refer to responding to the physical and mental health impacts of climate change on individuals and communities.

Climate and Health Alliance recently released a paper Healthy, Regenerative and Just https://www.croakey.org/wp-content/uploads/2021/10/caha-framework-2.0-D5.pdf that provides for a Framework for a National Strategy on Climate, Health and Well-being for Australia. The NHS has laid out a roadmap for making the health sector more sustainable and the Federal Government launched a detailed road-map for addressing the health risks of climate change four years ago - *The Framework for a National Strategy on Climate, Health and Well-being for Australia.* However, we still have no national strategy on climate, health and wellbeing, leaving the door open for Tasmania to develop its own under this bill.

b. Health sector is missing:

The health sector is not directly mentioned alongside industry, agriculture etc and yet it should be. The health sector is a substantial greenhouse gas emitter and having this legislated would allow further pressure to be placed on all hospitals, public and private, and other health workplaces to set and achieve emission reduction KPIs and to help drive change within our workplaces.

3) The target within the bill is not ambitious enough to force changes in behaviour to reduce emissions.

AMA Tasmania commends the government in taking a step further on climate change by setting a target of net zero, or lower, greenhouse gas emissions in Tasmania by 2030. However, we do not think this legislation goes far enough, after all, this target has already been met over the past six of seven years and therefore will not drive meaningful change.

Added to this, the bill fails to set any sector targets allowing some bigger polluters to ride off the back of those with no or lesser emissions like Hydro Tasmania. We would prefer to see all sectors set an achievable emissions reduction target that is reported against publicly on an annual basis.

4) Responsibility is not shared across government with Heads of Agency not being held accountable through the bill for achieving a reduction in emissions in their departments.

We say this because, while the Minister must prepare a climate change action plan at least every five years (s.5A) (1)), a statewide climate change risk assessment at least every five years (s5B(1)) and consult with business and industry representatives to develop sector-based emissions reductions and resilience plans (s.5C(1)), there is no mention of heads of agency being held legislatively responsible to ensure that each department has its own climate change plan with mitigation measures clearly articulated and actions taken to reduce emissions.

Secretaries of each department must be made responsible and accountable for actions taken in their respective areas, otherwise the Climate Change Minister risks being provided with token support, sufficient to provide a high-level plan, with high level targets.

5) Five years is too long between climate change action plans

The draft act requires a climate change action plan 'at least every five years'. AMA Tasmania is concerned that this may be too long between plans. Plans need to be accessible, responsive, and adaptive to changing circumstances. A five year policy cycle combined with a four year government cycle is not necessarily helpful in the rapidly changing world, particularly as there is no longer a Climate Action Council to oversee the implementation of the plans and this bill does not reintroduce such a body.

6) The draft bill lacks any 'teeth'

Strong and clear legislation would help to build confidence that for many in the community is lacking in government being committed to addressing climate change in a meaningful way and not just with platitudes. To do this, the Act needs to have real teeth, that is, penalties for not complying with Climate Change action plans within government and Government Business Enterprises and emission reduction and resilience plans for industry.

7) The Bill is too broad and lacks sufficient direction

AMA Tasmania believes it would strengthen the bill if it was to specify what measures must be undertaken, for example,

- i. All emissions and waste contributions need to be assessed and publicly disclosed for all sectors as well as the plans to reduce them or offset them with valid and auditable offset strategies.
- ii. Mandating actions towards a circular economy with minimum waste. For example, in Australia we sent more than 7 million kilograms of construction waste to landfill in 2014-15. In contrast, San Francisco has introduced strict civil and criminal penalties to curb the city's four construction waste streams. No construction or demolition debris can be taken to landfill or put in the garbage. This puts the responsibility on industry to conserve resources. Should this model be phased in, it would see every sector of society adapting and moving away from current levels of waste.

In the case of the health sector, which based on analysis in comparable countries like the United Kingdom, contributes around 7-8% of greenhouse emissions mainly through hospitals. Importantly, a model for substantial emissions reductions has been developed in the UK by the NHS, which has also delivered substantial savings. However, to help

address this, there should be mandated audits of waste and progressive targets to move away from for example, single use plastics and metals. A great deal of work has been done in this area, for example by Health Care Climate Action group, who have prepared a Road Map for Health Care Decarbonisation. https://healthcareclimateaction.org/fact-sheets/ In the case of food packaging, there should be a legislated framework to move away from single use plastics. In hospitals where this has been done rigorously, it has been found that re-using and recycling has been cheaper financially without even considering the environmental benefits. As these measures become necessary, design improvement will follow. https://www.abc.net.au/news/2019-07-13/war-onwaste-hospital-waste-australia-recycling/11306376.

Mandating recycling with targets would also foster innovation and investment in various new technologies including for example quite small scale options that would allow for domestic and business waste to be recovered into oil, aluminium and 3D printer feedstock. https://www.abc.net.au/news/2018-03-17/waste-could-become-fuel-source-in-big-australiasfuture/9550082 5).

Whatever initiatives that are pursued with recycling, including e-waste, however, it is critical that we do not try to offshore our problems to less advantaged nations. We must see this an opportunity for investment and production here in Tasmania and more broadly Australia, with Government helping to incentivise such investment if that is required.

8) Require the Health Sector to be included in any future planning for natural disasters.

The impact of climate change on the physical and mental health of individuals and communities and the capacity of the workforce and health infrastructure including hospitals to deal with it, are all important. Therefore, the health sector should be represented at the table in planning for the enormous changes that are going to be forced upon us by the climate emergency. The health sector has a lot to offer in a planned response to deal with issues from climate distress in our young people (now at 86% according to recent research by Unicef) to increased demand on primary and acute health services, including worsening health outcomes from lack of suitable housing or affordable heating and cooling.

Health is a foundational society asset and climate change and associated harms are its biggest threat. The health sector should be represented at every point in planning for climate change. As floods, fires, droughts, heat waves, storms, sea-level rise, population pressures and other related factors occur, the health sector needs to be positioned to meet these challenges, many of which have very long-running effects. The framework for dealing with all this this should be included in a Climate Change Bill. Indeed, you would think fostering adaptation, one of the goals of the act, would require health planning and input. Thus, disaster planning should include the health sector.

9) Bill lacks tangible targets

The draft bill lacks any tangible targets that we must all strive to achieve such as a target to ban the sale of new fossil fuel consuming cars in Tasmania. Just recently, the United Kingdom announced a ban on petrol and diesel consuming new cars from 2030. In Australia, we lack a sensible national policy pushing vehicle manufacturers to have lower emissions standards, and for fuel to have higher quality standards, as every other OECD country has done, let alone banning new sales of fossil fuel consuming vehicles. As it is, Australia remains the dumping ground of large dirty vehicles which promise to leave an unacceptable number of Tasmanians, particularly the poorer, with stranded assets and without access to reasonably priced electric vehicles that should be available.

10) A word of caution

As doctors, we acknowledge that we are a part of a privileged white collar professional group and we need to be mindful that not all people can be doctors or nurses or teachers. We recognise that we need industrial processes to live our lives and grow into the future and we need to acknowledge that these are going to have negative environmental effects. What is important is that we mitigate, offset and minimise them but it is inevitable that we will need them and we are all guilty in their existence. We must therefore not demonise or stigmatise people that work in those industries given we ourselves are reliant on them. If we are focused on health then we should also acknowledge the mental health impacts that this demonisation causes as well as the negative mental and physical health impacts of losing these industries and jobs has for people in these areas.

AMA Tasmania also recognises that how we achieve our goals is important. We must be careful in achieving an environmental goal that we do not create other social problems that also impact negatively on people's health and well-being. Therefore we believe that it is imperative that for every policy decision made to reduce carbon emissions, a plan is made to counter any negative effects, that is, for example, ensuring assistance is available for low income Tasmanians to manage the transition from petrol to electric cars knowing that the price of electric cars is out of reach for most if not all low income people and there is a risk the cost of petrol will go up as demand and supply changes with the shift away from petroleum.

The adverse impact on energy costs of policy decisions also need to be mitigated for those Tasmanians who already struggle with energy costs (lighting, heating and transportation). We must also not reduce employment opportunities given the central role of employment in providing income, structure, purpose, social connection and self-esteem, without growing jobs in new similar industries and helping people to transition across. Neither do we want to see our natural assets and scenic amenity degraded because of an explosion of wind farms or the like.

The re-introduction of a Climate Change Council would provide a forum in which these complex issues could be discussed by government, non-government, community and industry representatives and measures recommended to government to help mitigate any negative consequences.

Conclusion

This Bill is an opportunity for true leadership to be shown. It is an opportunity for all sides of politics to come together and tackle this issue together. Afterall, this is an issue that is not going to go away. It is a challenge that will transcend all governments, whatever their colour, for generations to come. Thus, Tasmania needs a multi-partisan effort to deal with climate change. We need a detailed plan of how to decarbonise and facilitate a just transition that does not leave the vulnerable behind. We need more legislated direction than this bill currently provides if we are truly to decrease our greenhouse emissions in a meaningful and sustainable way.

Thank you once again for the opportunity to comment on the draft bill.

Kind regards

Dr Helen McArdle

President AMA Tasmania

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