Submission on the summary framework for consultation:
DRAFT State Public Health Plan 2019-2024

June 2018
Background

Doctors for the Environment Australia (DEA) is an independent self-funded, non-government organisation of medical doctors and students in all Australian States and Territories. DEA works to address the diseases - local, national, and global - caused by damage to our natural environment. We are a public health voice in the sphere of environmental health with a primary focus on the health harms of pollution and climate change.

DEA’s responses to the summary framework

DEA is pleased to comment on the Summary framework for consultation: Draft State Public Health Plan 2019-2024, with responses to sections of the framework provided below.

Message from CPHO (p2)
DEA supports the need for the new Plan to have ... “clear vision and goal, improved measurability, clearer articulation of the roles and commitments of a broad range of public health partners and increased consideration of governance structures for implementation and monitoring.”

Introduction (p3)
DEA welcomes the opportunity to provide feedback on the structure and content of this Plan. DEA is willing to work with SA Health in developing more specific actions under the priority areas, particularly in relation to climate change and human and environmental health.

Landscape of Public Health (p5)
The “Preventable disease and injury” column is exclusively focused on “medical conditions” (chronic and communicable diseases). The new Plan provides an opportunity to emphasise the significant health co-benefits of urgent and aggressive responses to climate change for most/all of these medical conditions.

The Plan also provides an opportunity to highlight the role of environmental factors more generally in the development and hence prevention of disease and injury, and associated opportunities for health and wellbeing through care of natural and built environments.

Principles of the SA Public Health Act 2011 (p6)
These form a useful framework for the new Plan. From the perspective of the health impacts of climate change as well as the health co-benefits arising from responses to climate change, all these principles are especially relevant.
Priority populations (p7)
DEA supports the public health approach to priority populations. Those listed in this document (along with other population groups, such as older people and young children) are particularly vulnerable to the health impacts of climate change.

State Public Health Plan 2019-2024 Framework (p8)
DEA supports the explicit inclusion of the Principles in this framework outline.

**Vision** – include the word “environment” as essential to a healthy community.

**Goals** – there is no explicit reference to the environmental determinants of human health, however these could be included in the two goals. The goals are also an opportunity to highlight future health threats (such as those posed by climate change) and hence the need for a sustainable and resilient health system.

**Priorities** – as detailed in our Submission on the 2013 State Public Health Plan (Submission to the Government of South Australia: SA Health on the Review of the State Public Health Plan – South Australia: A Better Place to Live, Doctors for the Environment Australia, February 2018) a strategy that only addresses adaptation to climate changes will be inadequate. Active and urgent measures to mitigate the causes of climate change (greenhouse gas emissions in particular) are essential to any public health plan that seriously intends to promote, protect, prevent and progress human and environmental health in the context of the greatest public health threat facing the planet.

DEA is particularly concerned that the draft framework makes no mention of the importance of including mitigation alongside adaptation.

Feedback from stakeholders on the 2013 State Public Health Plan indicated that climate change should be a cross-cutting priority rather than a separate “one amongst other” priority.

Beyond mitigation and adaptation, also missing is the need for sustainability in the health system, with *greening* measures a key opportunity for the health sector to lead by example and promote sustainable, climate-resilient and future-proof actions in all facets of South Australian society.

**Outcomes** need to include measures of environmental health that directly impact on human health, and of climate-sensitive health outcomes (for example, morbidity/mortality attributable to air pollution or heat exposure).

Other suggested measures include those of health system/sector resilience in the face of climate change, and those of sustainability practices that promote both human and environmental health.
Vision (p9)
Elements of the Vision fit well with a public health response to climate change (well-designed places that make it easy for people to be active ... easy to walk or cycle ... and access public transport) but this can and should be expanded to make explicit reference to a healthy environment.

Goals and Priorities (p10)
See comments above on the overall framework (p8).

Roles (p11)
DEA is encouraged to see a broad range of public health partners mentioned, including non-government organisations, with more detail necessary in the new State Public Health Plan. There also needs to be a connection made with public health partners elsewhere in Australia, in the region and globally, as the impacts of climate change on human health do not stop at the SA border!

In addition, strong links with other sectors (e.g. energy, transport, environment, education) are necessary to address key determinants of health, including environmental determinants. Also, ongoing collaboration with research and academic communities is essential to ensure that emerging challenges are met with evidence-based responses.

Promote: create healthier neighbourhoods and communities (p12)
See comment above about including “environment” explicitly in this statement.

The content of this page is supported by DEA but needs to be broadened to include, for example, the important role of the natural environment in promoting human health. In addition, the current content implies an urban setting or at the least an emphasis on urban settings, with consideration of rural environments also necessary.

Another important consideration is the promotion of climate change mitigation and sustainable practices in the health and other sectors, with associated health co-benefits.

Protect: protect against public and environmental health risks and adapt to climate change (p13)
DEA supports the content in this section, but see comments above in relation to re-structuring the framework to make climate change a cross-cutting priority, and to the comments on including mitigation in the public health response.

DEA particularly supports the application of a ‘climate change/sustainability lens’ to all new plans, policies and strategies, but again this should not be confined solely to efforts to ‘protect’ health, but instead applied to all faces of health system function.
Also critical is the protection of natural environments to ensure human health, including actions to protect biodiversity, air quality, and food and water security.

**Prevent: prevent chronic disease, communicable disease and injury (p14)**
See comments above about making explicit the health co-benefits of responding to climate change on chronic and communicable disease prevention. This is a further argument to support the case for climate change being a cross-cutting priority in the new Plan.

**Progress: further develop and maintain the state-wide public health system (p15-16)**
DEA supports the inclusion of this priority which can be viewed from a cross-cutting climate change perspective, as many of the enablers, including the “health in all policies” approach, require a fit-for-purpose state-wide public health system. See also the comments above about the need to link the state-wide system to others systems in Australia, the region, and globally to address the health impacts of climate change.

In line with climate change as a priority cross-cutting issue, the development of a sustainable and climate-resilient health system is a key opportunity for progress, with a “climate and health in all policies” approach across all health and other sector activities key to promoting environmental and human health.

**Implementation and Governance (p17)**
Please see comments under Progress in relation to the state-wide public health system.

Also, a comprehensive strategy for resourcing the State Public Health Plan 2019-2024 will of course be critical. In particular, the Plan requires a funding approach which allows for regular review of public health spending requirements in the context of overall health needs, especially given the central role of public health in ensuring the wellbeing of all South Australians. Also necessary is consideration of the human resources and associated expertise required for successful implementation of the Plan, and the potential financial benefits of ‘greening’ the health sector, for example through use of renewable energy sources and sustainable procurement practices.

**Monitoring and Reporting (p18)**
DEA acknowledges that this section will be developed in detail in the new Plan, and as noted above, relevant indicators for mitigation of and adaptation to climate change must be included. The development of indicators for health system sustainability is also encouraged.

**Additional elements (p19)**
DEA supports this approach – a “simpler” Plan with ready online access to supporting documents.
Conclusion

As stated in our February 2018 Submission, DEA members in South Australia, with access to DEA’s expert Scientific Committee, are willing to provide input to the Chief Public Health Officer during the drafting of new State Public Health Plan, including contributions towards the development of monitoring and evaluation indicators.