

Priorities for planetary health equity in Australia

Much evidence exists showing the very real threats to human survival, premature deaths and poor health outcomes from the nexus between the impacts of climate change and economic and social inequities.^{1,2} Given this crisis of planetary health equity — defined here as the equitable enjoyment of good health in a stable Earth system — preventive action is needed to address the common underlying drivers of climate change and health inequities. These drivers are located within the consumptogenic system, which is the web of institutions, actors, policies, commercial activities and norms that encourages and rewards the exploitation of natural resources, production of fossil fuels, and hyperconsumerism of fossil fuel-reliant goods and services, which results in environmental degradation, climate change, and social and health inequities.² In this perspective article, we relay the urgency — identified by researchers, senior bureaucrats, politicians, former business leaders and civil society groups in a Planetary Health Equity Hothouse Policy Symposium³ — for transforming the consumptogenic system, with a focus on economic models, policy coherence, and advocacy. We highlight the opportunities for the health sector to provide leadership in these issues.

Health sector leadership

The health sector has an important leadership role in pursuit of planetary health equity. Unfortunately, an analysis of Australian parliamentary and bureaucratic engagement on health and climate change in 2021 found marginal and superficial engagement at the national level, although states and territories have led the way with more and better targeted engagement.⁴ However, change is afoot; the increasing attention to these issues in Australia can be seen as the Honourable Ged Kearney, Assistant Minister for Health and Aged Care, launched Australia's National Health and Climate Strategy⁵ in December 2023 on the world stage at the 28th Conference of the Parties (COP28), the decision-making body of the United Nations Framework Convention on Climate Change (UNFCCC), on the first ever Health Day. Having a health and climate strategy for Australia provides an important signal from government that these issues are connected and require action. The Strategy also provides an authorising environment and framework for the bureaucracy to now work through. It is also excellent to see First Nations peoples, health equity and a right to health so centrally positioned. However, as a wealth of evidence shows, addressing health inequities requires structural reform, not just climate adaptation that is about helping communities to survive — important as that is. Unfortunately, the health in all policies objective of the strategy misses the opportunity to tackle the common structural drivers of health inequities and climate change: to do

that would require climate change mitigation across sectors, especially energy. The National Health and Climate Strategy fails to recognise fossil fuel extraction as a driving force of health outcomes. Moving forward it will be vitally important that the mitigation focus of the strategy moves beyond the health care system. Energy policy is health policy. Equity-focused energy policy will reduce health inequities in Australia and globally.

Economic drivers of planetary health equity

Economic growth models lie at the core of the consumptogenic system. Policy makers and the Australian public tend to assume that economic growth is unilaterally a good thing. However, modern Australian growth, as measured by gross domestic product, raises a number of planetary health equity challenges. Australian growth has been driven primarily by asset- and credit-financed consumption.⁶ Rising property prices and a liberal credit regime underpin Australia's growth model. Policies that enable this scenario are supported by a coalition of interests from the finance, insurance, real-estate and construction sectors, organised labour in the construction sector, and Australians with property assets. The political influence of these actors can be seen in the similarity of both Labor and Coalition governments' housing and credit market policies. Although this scenario has delivered economic gains for some, it has also generated widespread economic⁷ and health inequities⁸ and is fundamentally incompatible with Australia's climate objectives.

In response to the economic roots of these contemporary challenges, the movement for a wellbeing economy is agitating for an economy in service of human and planetary health.^{9,10} The work of this movement demonstrates that a more inclusive and sustainable economy that prioritises activities because they meet the needs of people and planet, not growth for its own sake, is both possible and desirable. To achieve planetary health equity, economic policy must be designed in a way that ensures a fair social foundation, economic environments operating within the ecological ceiling, and a normative shift away from harmful consumptogenic systems.¹¹ Although it is early days, there are signs of an embrace of new economic ideas and policy directions developing through the adoption of wellbeing budget principles and frameworks at the Commonwealth level and in some state and territories across Australia.¹²

Policy coherence and planetary health equity

In addition to economic policy, climate change policy, particularly mitigation policy, that advances rather than undermines health goals provides another opportunity to promote planetary health equity.

Sharon Friel¹

Katherine Trebeck²

Nicholas Frank¹

Sandro Demaio^{3,4}

Megan Arthur¹

Chelsea Hunnisett⁵

Francis Nona⁶

¹ Planetary Health Equity Hothouse, Australian National University, Canberra, ACT.

² Edinburgh Futures Institute, University of Edinburgh, Edinburgh, UK.

³ Victorian Health Promotion Foundation (VicHealth), Melbourne, VIC.

⁴ University of Melbourne, Melbourne, VIC.

⁵ Climate and Health Alliance, Melbourne, VIC.

⁶ Carumba Institute, Queensland University of Technology, Brisbane, QLD.

sharon.friel@anu.edu.au

However, climate policy progress in Australia has been hampered by the dominance of short term national economic security discourse¹³ and by corporate influence in climate change and energy policy making.¹⁴ These political economy and commercial interest factors have also been identified as undermining and obfuscating the consideration of health co-benefits in the development of mitigation policies in Australia.¹⁵

Countries' Nationally Determined Contribution (NDC) reports, which identify their climate action commitments and inform negotiations at COP (the formal meeting of the UNFCCC parties), provide important indications of what policies governments consider to be important for climate change mitigation, including wider impacts on social and health outcomes. COP28 announced various pledges and initiatives. Estimates suggest that only one-quarter of the total emissions savings that could be achieved by the COP28 pledges and initiatives are additional to existing government NDCs.¹⁶ The Healthy NDC Scorecard¹⁷ assesses the extent to which national governments' climate commitments address important health dimensions of climate change impacts and actions. Historically, Australia has performed among the lowest in the world. As Australia prepares its updated NDC for submission in 2025, the Climate Change Authority's broad consultative approach and attention to wellbeing indicators provide hope for a more progressive approach commensurate with the scale of intersecting crises of climate change, social and health inequities. Proactive and ongoing input from the health community to the Climate Change Authority's work will be essential to the successful embedding of planetary health equity considerations into the Australian NDCs, which could in turn support other countries to commit to much greater ambition in their NDCs.

Thwarting extinction: making it happen

Participants at the Planetary Health Equity Hothouse Symposium repeatedly called for leadership from the health sector, government, international organisations, businesses and civil society groups. The role of government is to protect, promote and assure the health of their citizens and the Earth system. With the election of the Albanese government in 2022, progress has been made on addressing the fundamental drivers of planetary health equity, yet there is still a long way to go to thwart extinction. The increased ambition of 43% emissions reduction below 2005 levels by 2030 is a great start, but if we are serious about sticking to the Paris Agreement, we need a target that commits to 75% reduction in emissions below 2005 levels by 2030 and net zero emissions by 2035.¹⁸ Fossil fuels must be phased out. Given what we know about the commercial determinants of health,¹⁹ government must implement mandatory regulation of markets to mitigate harms and promote human and planetary wellbeing through more investment in renewable energy sources. This is not an easy sell and will require mass mobilisation of civil society to get it done.

There is hope. At the international level, although the recent COP28 negotiations left much to be desired, two of the authors (CH and FN) were present and saw thousands of people from all around the world motivated towards a single goal: to turn the tide of climate change. Australian First Nations peoples travelled to speak to ancient Indigenous Knowledge and wisdom that preserves and protects Country; young people spoke to world leaders about the fear they hold for the future; Australian doctors and nurses travelled to educate policy makers on the importance of addressing the health impacts of climate; and activists risked their freedom to shout loudly about the contradiction of a petrochemical state leading the world's most important climate change negotiations.

In Australia, we cannot stand still and wait for the international community to embrace a bold agenda. The direct and indirect health burdens associated with climate change will continue to worsen. The health community must urge the Minister for Health to use their political capital created through the launching of the health and climate strategy at COP28 and help their ministerial colleagues see that the actions in their portfolios matter for human health and health equity. The choices that Cabinet and the Minister for Climate Change and Energy make will determine the health, wellbeing and, ultimately, the survival of Australians and our regional neighbours.

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