CAPHIA

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Written submission in response to

NATIONAL HEALTH AND CLIMATE STRATEGY Consultation Paper

ABOUT CAPHIA

The Council of Academic Public Health Institutions Australasia (CAPHIA) is the peak organisation that works to advance public health education and research. CAPHIA leads and represents public health in universities throughout the Australasian region. Across our 39 member institutions, we represent thousands of public health educators, researchers, workforce developers and students. CAPHIA delivers professional development programs, advocates for academic public health and actively contributes to local and global partnerships and networks.

SUBMISSION FOCUS

CAPHIA's submission focuses on our core expertise: public health education, research and workforce development. As such, we primarily address consultation questions relating to the proposed "Workforce, Leadership and Training" enabler of the National Health and Climate Strategy.



Response to the: National Health and Climate Strategy Consultation Paper

ABOUT CAPHIA:

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CAPHIA acknowledges the Traditional Custodians of the country throughout Australia and their connections to land, sea, and community, and recognise their past and ongoing contributions to the generation of knowledge systems. We work in partnership with First Nations people across Australasia to promote quality, culturally safe education in public health. CAPHIA also recognises the critical role First Nations knowledge plays in our health and prioritises the teaching of their knowledge, perspectives, and leadership to enact a sustainable and equitable future (2).

SUBMISSION FOCUS:

CAPHIA's submission focuses on our core expertise: academic public health. As such, we address Enabler 1, which pertains to workforce, leadership, and training. More specifically, our response centres around Enabler 1.1. which moves to *"encourage medical colleges and other education and training institutions to ensure the impacts of climate change on health form part of the training curriculum for all health care professionals."*

INTRODUCTION:

As outlined in the Consultation process, community input including diverse perspectives, experiences and knowledge of all stakeholders is essential in developing the *National Health and Climate Strategy.* As CAPHIA membership represents 33 Australian universities and two affiliate institutional members, we set the standard for academic public health curricula and are well placed to make recommendations on education and training requirements of the health workforce.

We welcome the opportunity to share our perspectives and recommendations to build our desired future state: a sustainable, appropriately resourced, and highly educated health workforce to best support the aims of the *National Health and Climate Strategy*. We look forward to enacting the mechanisms and recommendations outlined below with you.

CAPHIA RESPONSE:

General feedback

CAPHIA recognises the crucial role education plays in creating a sustainable and equitable future (2); and we support the submission's active focus on partnering with First Nations peoples to harness their deep knowledge, ways of being, and ways of doing to help create a healthier future and a healthier planet.

We also applaud the inclusion of a Health in All Policies approach to holistically monitor and assess the impact of decisions on the public's health and on climate and intervene where necessary to achieve the Strategy.

The impact of climate on health is core to the public health curriculum including:

- **One health and planetary health** which emphasises the complex intersection between the earth and people, and the co-benefits of improvements in each (e.g., improvements in the health of people can reduce hospital admissions and decrease the carbon cost of primary care) (3, 4)
- **The social determinants of health** which are integral in determining a person's individual susceptibility to the health impacts of climate change (e.g., numerous social determinants can impact heat vulnerability which is a known risk-factor of cardiovascular disease) (5, 6)
- **The commercial determinants of health** which often serve to worsen existing health inequalities in relation to climate change (e.g., ongoing Cobalt mining operations in a number of low-income nations) (7)

24. How could these enablers be improved to better inform the objectives of the Strategy? Should any enablers be added or removed?

Recommendation 1. E1.1 reworded to "Invest and embed climate and health competencies in all clinical specialist training and certification programs, and in continuing professional development and re-certification programs".

Clinicians at all stages of their career require capability development and upskilling. Focusing only on the future workforce may have a translation-to-practice lag of a decade.

The current wording of Enabler 1.1. focuses on *emerging* medical practitioners which misses the opportunity to engage with current specialists, many of whom are in senior roles and leadership positions within their respective hospital and health service. This has the potential to create a substantial lag in the translation of education into standard clinical practice. Climate and Health education should be integrated into the already mandated professional development that these senior clinicians complete on an annual basis.

Recommendation 2. Add new objective E:1.2 "Invest and support a climate and health competency uplift for the whole public health workforce".

The workforce required to address the climate crisis is the public health workforce – not just the medical workforce.

The proposed *Health and Climate Strategy* aims to protect the health and wellbeing of Australians from the effects of climate change – this is public health. The conversation needs to be reframed to reflect this, including investment in the workforce required to enact the Strategy.

Therefore, it needs to be clearly acknowledged that the public health workforce is far broader than medical specialists. Focusing only on medical professionals is harmful as it ignores the many and varied professionals who address the health of Australians through a variety of health promoting and enabling strategies, and development of healthy environments and systems where we live and work.

As the peak body for academic public health in the region, we define public health as a broadranging speciality that may be strengthened by a diversity in skills, backgrounds, and perspectives to CAPHIA response to National Health and Climate Strategy Consultation, July 2023

better reflect and serve populations and citizens (8). The Public Health workforce comes from a variety of backgrounds including, but not limited to:

- "Educators, researchers and evaluators
- Epidemiologists and biostatisticians
- Policy writers and program designers
- Allied health professionals
- Lawyers, ethicists, urban planners, and engineers
- Clinicians and practitioners
- Health, community, and industry workers, including health promotion practitioners, as well as managers, leaders, and advocates" (8).

Thus, each of these professions and specialists can positively contribute to the Health and Climate Strategy and should be included in the enabling workforce.

The limited scope outlined in Enabler 1.1 misses a key opportunity to uplift the entire health workforce to improve our climate and the health of local and global populations. Medical specialists and other clinical healthcare providers are an important component of the public health workforce. However, frontline clinicians primarily focus on treating the consequences of suboptimal health systems and environments, rather than preventing poor health outcomes by designing health-promoting and health-enabling systems and environments. Investing in health-promotion and illness-prevention pays significant dividends over time and delivers the best return on investment in health (9). Thus, investing in those who specialise in preventive health and health promotion will create the upstream change required for our shared vision of a healthy planet and a healthy Australia.

Recommendation 3: Add new objective E1.3: "A scan of current education and training activities and resources pertaining to climate change and health."

As with Enabler 2: Research, it is advised to identify and collate education and training activities and resources which exist across the diverse spectrum of public health and in climate-focused social impact organisations.

Providing a 'hub' or similar central facility to access these resources will enable individuals and organisations to upskill in an area they need, and enhance uptake of existing resources, reducing waste and replication.

CAPHIA response to 25 – Workforce, Leadership and Training Enabler

a) What is currently working well?

Climate and Health is a public health issue and needs to be reframed as such. Climate and health impacts all communities and individuals locally and globally. A well-funded, thoughtful, and systematic approach is required to make rapid and meaningful impact to mitigate and adapt to the climate crisis.

Climate and health competencies are already taught in public health curricula across Australasia. This is working well within the limited funding provided to public health education. Investment is required to deliver targeted education, training, and resources to upskill the public health workforce to ensure they have the capability and capacity to deliver the Strategy. Refer to recommendations below for specifics.

b) What actions should the strategy consider to support delivery?

Recommendation 4: Develop a Climate and Health Workforce Capability Development Grant to genuinely invest in this key enabler.

The aims of the Health and Climate Strategy will not be realised without additional investment in our public health workforce.

The climate crisis requires urgent and significant investment to mitigate against collapse of our global ecosystem (10).

Workforce is a crucial enabler in a healthier planet and healthier Australia. Enablers require investment to succeed.

As we have previously called for, the Australian Public Health workforce requires investment (11). Thus, urgent workforce development investment is needed to achieve the Health and Climate Strategy.

"Encouraging" change within existing structures and funding envelopes is insufficient to enact real change. Most specialist colleges are well funded and able to include these knowledge, skills and capabilities in their existing training and continuing professional development programs. The same cannot be said for all associations, colleges and other non-profits and charities focusing on the capability development of those actively improving the health and climate. To do so it is recommended that the government develop a Health and Climate Workforce Capability Development Grant to genuinely invest in this key enabler. This Grant could encourage innovative approaches through collaborations between entities to optimise the impact of workforce development initiatives, accelerating progress on the Health and Climate Strategy.

Recommendation 5: Invest in the upskilling of the Public Health Workforce: Fund the development of micro-credentials and short courses on OneHealth, health systems and addressing the Sustainable Development Goals

As advised in our submission in response to the *Roles and Functions of an Australian Centre for Disease Control* (12), government-funded short courses and micro credentials are a practical and efficient mechanism to quickly upskill, cross-skill and develop knowledge and capabilities. Contemporary Public Health essentials include "awareness of wider global health considerations, e.g. One Health principles, climate change, economic inequities, trade, and health" (13). As public health education continually evolves and develops in line with research innovation and best practice, policy and practice must be informed by this most up to date knowledge and research. Hence, we recommend including additional government funding for the continued professional development, education, and training of Public Health Practitioners to achieve the Health and Climate Strategy deliverables.

As outlined above, the whole health and public health workforce requires education and/or upskilling to deliver the Health and Climate Strategy.

Comprehensive integration of climate change education across the public health workforce is required, beyond that provided to specialist doctors in training.

Recommendation 6: Decision makers require fundamental public health education to address the climate crisis and create a healthier Australia.

Health and climate decision makers require (at a minimum) rudimentary education in public health to understand the relationship between climate and health, and the impact of their decisions on both the climate, and the health of the populations they serve. As advocated by the Global Network for Academic Public Health (13), decision makers require a basic understanding of public health including "the principles of One Health, recognizing the connection between the health of people, animals, and the environment". By understanding the essentials of public health, the Australian Government can better serve its communities, prevent, and respond to public health emergencies (including the climate crisis), adapt health services to meet urgent needs, and avoid exacerbation of health inequities.

CONCLUSION:

CAPHIA supports the broad directions of the *National Health and Climate Strategy Consultation Paper.* However, as the peak academic public health body setting public health education standards in Australasia, we are keen to ensure the consultation paper encompasses the whole public health workforce with comprehensive integration of climate change education.

As outlined in our aforementioned recommendations, we firmly advocate that the entire public health workforce has the potential to contribute to the Health and Climate Strategy and should be provided with development and upskilling opportunities accordingly. To ensure this education is robust, significant investment by the Government is required to collate existing resources and address current gaps. We propose that short courses and micro credentials are a practical and efficient mechanism to quickly upskill and cross-skill individuals from across the public health workforce, at all stages of their career. Similarly, climate change decision makers require upskilling in rudimentary public health principles to ensure they can better serve their communities.

CAPHIA appreciates the opportunity to make this submission, contributing to the conversations to date and assisting in the development of a robust *National Health and Climate Strategy*. Please contact us should you require any additional information or have any queries in relation to this submission.

Reburn Ivens

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In adjoin

Holly Donaldson Executive Director, Council of Academic Public Health Institutions Australasia (CAPHIA)

On behalf of the CAPHIA Board of Directors.

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