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THE EVIDENCE IS IN – CLIMATE CHANGE IS A SERIOUS GLOBAL THREAT TO HUMAN HEALTH

AMA President, Dr Andrew Pesce, today urged the Australian delegation to the Copenhagen climate talks to convince world leaders to implement plans to deal with the serious threats that climate change poses to human health globally.

Dr Pesce said that the AMA position is that failure to achieve significant reductions in greenhouse gas emissions on a global basis is likely to result in significant public health concerns.

The health effects of climate change include increased heat related illness and deaths, increased food and water borne diseases, and changing patterns of diseases. In addition to their impact on health infrastructure and services, extreme events such as droughts, flooding and storms could be responsible for death and disease.

“It is the AMA’s view that climate change is a significant worldwide threat to human health that requires urgent action,” Dr Pesce said.

“We recognise that human activity has contributed to climate change.

“While the Copenhagen talks will be about carbon emissions and targets and helping developing countries, equal emphasis must be directed to equipping the health systems of the world to cope with the extra health burden created by climate change.

“Plans to deal with that burden should be put in place immediately, and Copenhagen is the perfect place to implement the strategies.

“Climate change will dramatically alter the patterns and rate of spread of diseases, rainfall distribution, availability of drinking water, and drought.

“In Australia, we are already experiencing weather extremes with prolonged drought in some areas and severe storms and floods in others. There are predictions of longer term effects such as rises in sea levels, increases in sea surface temperature, coastal erosion and contamination of estuaries. International research shows that the incidence of conditions such as malaria, diarrhoea, and cardio-respiratory problems is likely to rise.

“All these events will affect the health of Australians and the health of the people in other countries in our region. As a wealthy developed nation, Australia must show leadership in responding to climate change and its impact on human health.

“World leaders must not only discuss the causes, they must also start planning for the health effects. It is important that a global action plan on climate change and health emerges from the Copenhagen summit,” Dr Pesce said.

The AMA released a Position Statement on Climate Change and Health in 2004, which was updated in 2008, and can be found at www.ama.com.au/policy/climate-health. At its Annual General Meeting in New Delhi in October 2009, the World Medical Association (WMA) approved a new Declaration on climate change and health, which is at www.wma.net

In relation to climate change and health, the AMA believes that:

- because climate change involves potentially serious or irreversible harm to the environment and to human health, it is essential to adopt mitigation strategies that reflect a precautionary approach even where uncertainties may exist in relation to scientific evidence,
- failure to achieve significant reductions in greenhouse gas emissions on a global basis is likely to cause significant public health problems,
- effective measures for improved energy efficiency, clean energy production and other emission reduction measures are likely to contribute to reducing the health impacts of climate change, and
- economic assessments of the costs and benefits of mitigating climate change must incorporate the predicted public health costs of unmitigated climate change.

Further, a National Strategy for Health and Climate Change should be developed and implemented to ensure that Australia can respond effectively to the health impacts of gradual climate change, extreme events, and to people's medium to long-term recovery needs. That strategy should incorporate the following:

- localised disaster management plans for specific geographical regions that model potential adverse health outcomes in those areas and incorporate appropriate localised health and medical response measures, including for people who have been evacuated or relocated, temporarily or permanently,
- strong and active communication linkages between hospitals, major medical centres and local weather forecasters and emergency response agencies (in at – risk locations) to maximise timely responses and efficient use of health resources in extreme weather events,
- measures targeted to the needs of certain vulnerable population groups (older Australians, children, Indigenous communities, members of remote communities),
- measures to address health and medical workforce needs in rural and remote communities, particularly in mental health services,
- enhanced awareness among doctors and health professionals of the potential consequences on mental health of extreme weather events and disasters,
- development of effective interventions to address mental health issues arising from extreme events, including those involving mass casualties and from longer-term changes, including drought,
- programs to improve the education and awareness of health professionals about the links between health and climate change, and their understanding of the risks of new vector-borne diseases and their health impacts,
- measures to prevent exotic disease vectors from becoming established in Australia and nationally coordinated surveillance for dangerous arboviruses, with public education programs promoting mosquito avoidance and measures to prevent mosquito/arthropod breeding, and
- preparedness to deal with the temporary and permanent dislocation of people due to climate-related physical events and economic conditions.

9 December 2009

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