

Canterbury

District Health Board

Te Poari Hauora o Waitaha

Submission on Climate Change Response (Zero Carbon) Amendment Bill

To: Select Commission

Submitter: Canterbury District Health Board

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Community and Public Health
C/- Canterbury District Health Board
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Proposal: The purpose of this bill is to provide a framework by which New Zealand can develop and implement clear and stable climate change policies that contribute to the global effort under the Paris Agreement.

SUBMISSION ON CLIMATE CHANGE RESPONSE (ZERO CARBON) AMENDMENT BILL

Details of submitter

1. Canterbury District Health Board (CDHB).
2. The Ministry of Health requires the submitter to reduce potential health risks by such means as submissions to ensure the public health significance of potential adverse effects are adequately considered during policy development.

Details of submission

3. We welcome the opportunity to comment on the Climate Change Response (Zero Carbon) Amendment Bill. The future health of our populations is not reliant only on the provision of clinical care in a clinical setting, but on a responsive environment where all sectors work collaboratively.

General Comments

4. The CDHB strongly supports the intent of the Bill and is pleased to see that many recommendations made by the CDHB to the Ministry for the Environment via the 'Our Climate Your Say' consultation have been incorporated into this Bill.
5. Climate change is an example of how health, disease and overall wellbeing is influenced by a wide range of factors which lie beyond the health sector (see figure 1). These are often referred to as the 'social determinants of health'¹. Factors such as transport mobility and affordability, warm and dry housing, air quality, water quality, access to local job markets and financial and food security are all linked to climate change via environmental and health outcomes. Efforts to mitigate the effects of climate change will produce health co-benefits at a population level, such as reductions in heart disease, cancer, obesity, type 2 diabetes, respiratory disease, motor vehicle injuries and improvements in mental health².

¹ Public Health Advisory Commission. 2004. *The Health of People and Communities. A Way Forward: Public Policy and the Economic Determinants of Health*. Public Health Advisory Commission: Wellington.

² *Climate Change and Health in New Zealand. Climate Change Policy Statement*. New Zealand College of Public Health Medicine. 2013

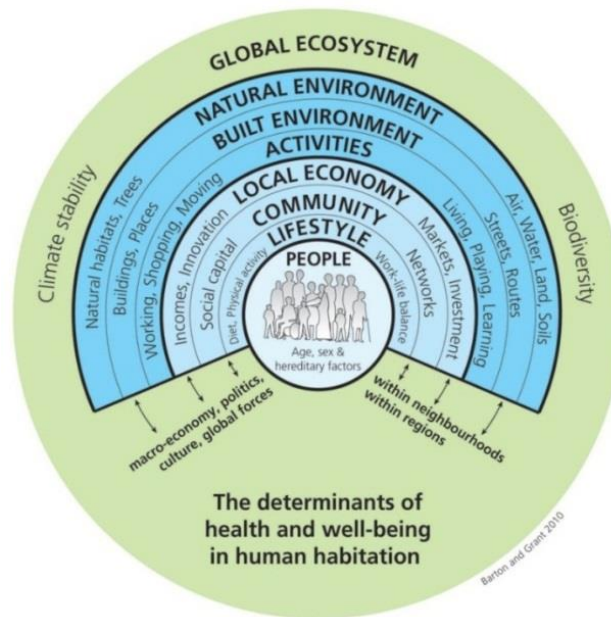


Figure 1. Barton and Grant's Health Map

6. Climate change and health equity are also inseparably linked³. The impacts of climate change will not be distributed evenly across the population, but will be influenced by geographical location and socio-economic status. The negative effects will be most felt by the most disadvantaged in New Zealand⁴. Additionally, Māori may feel the impacts of climate change more acutely than non-Māori because of the relationship indigenous peoples have with the environment, including, for example, customary practices such as collection of kai moana which may increase the risk of food-borne diseases⁵. Bill development needs to carefully consider both the positive and negative implications for such communities and mitigate appropriately.

7. The CDHB recommends a Health in All Policies approach is used to address the climate crisis and particularly, development of national adaptation plans. Health in All Policies (HiAP) is an intersectoral approach to public policies that is being championed by the World Health Organisation. The rationale behind using a HiAP approach to address the estimated 13 million deaths annually from environmental risks (including climate change) is outlined in the WHO global strategy on health, environment and climate change presented at this year's World Health Assembly⁶. One often unrecognised issue is raised in this paper, namely that the sustainability

³ Climate Change and Health in New Zealand. 2013. Climate Change Policy Statement. New Zealand College of Public Health Medicine.

⁴ Climate Change and the Right to Health for Maori in Aotearoa / New Zealand. Rhys Jones, Hayley Bennett, Gay Keating. Alison Blaiklock. Health and Human Rights Journal. Number 1 Vol 16. June 2014.

⁵ Climate Change and Health in New Zealand. Climate Change Policy Statement. New Zealand College of Public Health Medicine. 2013

⁶ http://apps.who.int/gb/ebwha/pdf_files/WHA72/A72_15-en.pdf

of clinical care (health services) is at risk if action on managing the health risks of social determinants of disease is not prioritised. The current climate crisis is only one of the environmental threats to human health and wellbeing and it is inextricably linked with all the social determinants of health and disease. New Zealand is recognised for its global leadership in using a HiAP approach and there are local resources available to assist if required.

8. The Bill currently goes some way towards acknowledging that there are multiple co-benefits for all sectors in achieving stated targets around climate change. However, there remains areas by which these aspects could be strengthened. The Bill provides an opportunity to mandate a cross-government and industry response to climate change in order to achieve health and other co-benefits and mitigate against adverse unintended consequences due to siloed responses by individual government agencies. As one example, the CDHB notes that a number of government departments appear to be working on various forms of national adaptation plans and risk assessments at present *that relate to their own sector*. This work takes considerable resource and risks not taking a joined-up, Health in All Policies approach which is vital to expediting effective action given we are *now* experiencing the impacts of a 'climate crisis' as a global community. This Bill provides an opportunity for mandating central government leadership around Climate change. Such leadership has until now been lacking, and is essential for progress and immediate action.

9. The CDHB recommends that the timeframes attached to developing plans, setting budgets and reporting within the Bill be shortened. For example, 2 years for reporting which is included in a number of sections does not adequately address the need for an immediate response to the climate crisis.

Specific comments

| Section | Comment |
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| Part 1, Section 3A | <p>The CDHB recommends that the Climate Change Commission includes a <u>requirement</u> for iwi and Māori representation.</p> <p>Clause (ab) which amends section 5G of the principle Act uses the phrase '<i>particular attention is required to seeking nominations...</i>'.</p> |

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| | <p>however the CDHB does not consider this clause adequate to ensure Māori interests are strongly represented. Given the inequities Māori face related to displacement of land and customs because of climate change, their status as mana whenua and tangata whenua and protections under Te Tiriti, Māori should be directly represented on the Commission at all times.</p> <p>Similarly, in clause (ae) which amends section 5ZQ, it should be explicitly stated that in order to <u>reduce inequities and address social justice</u>, the Minister must, in preparing a plan take into account the economic, social, health, environmental, ecological, and cultural effects of climate change on iwi and Māori.</p> |
| Part 1A | <p>The CDHB supports the establishment of a permanent Climate Change Commission which has the purpose to provide independent, expert advice to government.</p> <p>The CDHB does have concerns as to the proposed membership of the Commission in 5D(1). Establishing a Commission of only 7 members who can provide advice which spans such a vast number of sectors and issues will be challenging, even when regard is given to attributes listed in 5H. There is a risk that some sectors may be over-represented, and other sectors and the associated impacts of the climate crisis unknowingly not represented at all. Further consideration is required as to how cross-sector representation can be achieved, and whether the number of members on the Commission may need to be increased to adequately represent all priority sectors or an expert advisory framework established alongside the Commission.</p> <p>The CDHB recommends that public health expertise is listed as an essential technical and professional skill in (d)(i). Reducing emissions and adapting to climate change is in essence about human survival, therefore the health impacts (at both an individual and population level) of any recommendations need to be a central tenant for the Commission.</p> |

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| | <p>The CDHB recommends that 5H(1)(d)(i) read:</p> <p>(i) the environmental, ecological, social, economic, <u>population health</u> and distributional effects of climate change and climate change policy and interventions.</p> <p>The CDHB also recommends that reference to the UN’s Sustainable Development Goals are included under (d) as point (iv). This approach is useful for achieving cross-sector thinking regarding the impacts and necessary actions for addressing the climate crisis, including emissions reduction and adaption⁷.</p> |
| <p>Subpart 2 5J Commission’s Functions</p> | <p>The CDHB supports the functions of the Commission as listed, however notes that there are a significant number of these which may require a number of external advisory roles to achieve.</p> <p>Consideration needs to be given to resourcing, capacity and where such expertise can be sought from.</p> |
| <p>5K Reports to Government</p> | <p>The CDHB recommends that progress reports are completed on an annual basis in order to ensure accountability and reliable tracking and comparison across sectors to help identify areas which need more support to meet emissions budgets and targets.</p> |
| <p>5L Matters Commission must consider</p> | <p>The CDHB recommends that it is explicitly stated that the Commission must consider the public health impacts when exercising its powers under the Act.</p> <p>As earlier stated, action on the current climate crisis is fundamentally about reducing the impacts as far as possible on both human and environmental health, therefore this needs to remain visible throughout the Bill.</p> |

⁷ United Nations (n.d). About the Sustainable Development Goals. Retrieved from: <https://www.un.org/sustainabledevelopment/sustainable-development-goals/>

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| <p>Part 1B, subpart 2, 50 Target for 2050</p> | <p>The CDHB recommends stronger emissions targets within the Bill which would result in a higher probability of limiting warming to 1.5 degrees, as per modelling within the IPCC 1.5 degrees report⁸.</p> <p>Namely that a net zero emission target for greenhouse gases (other than biogenic methane) by <u>2040</u> instead of 2050.</p> <p>Gross biogenic methane reduction targets which do not rely on implementation of yet unproven technologies. These targets should be altered to:</p> <ul style="list-style-type: none"> • 24-48% gross biogenic methane reduction target by 2030 (relative to 2010) • 33-69% gross biogenic methane reduction target by 2050 (relative to 2010) |
| <p>5W How Emissions Budgets to be Met</p> | <p>The CDHB strongly supports reduction and removal of <u>domestic</u> emissions in order to meet emissions budgets.</p> <p>The CDHB recommends that in considering how an emissions budget may realistically be met, that co-benefits be included alongside 'identification of key opportunities' as per (2)(c).</p> <p>Identification of key opportunities without considering co-benefits across sectors risks siloing and duplicating efforts. For example, key opportunities which could harness co-benefits across sectors (including improving population health) exist for projects around buildings and insulation, planting of native forests and transport.</p> <p>Considerations in meeting emissions budgets need to also include ongoing emissions of operating for projects. An example of this is funding of capital works for DHBs. Attempts have been made when designing new builds within DHBs to use Green Hospital Principles⁹</p> |

⁸ IPCC, 2018: Summary for Policymakers. In: Global Warming of 1.5°C. An IPCC Special Report on the impacts of global warming of 1.5°C above pre-industrial levels and related global greenhouse gas emission pathways, in the context of strengthening the global response to the threat of climate change, sustainable development, and efforts to eradicate poverty [Masson-Delmotte, V., P. Zhai, H.-O. Pörtner, D. Roberts, J. Skea, P.R. Shukla, A. Pirani, W. Moufouma-Okia, C. Péan, R. Pidcock, S. Connors, J.B.R. Matthews, Y. Chen, X. Zhou, M.I. Gomis, E. Lonnoy, T. Maycock, M. Tignor, and T. Waterfield (eds.)]. In Press.

⁹ Health Care Without Harm. 2011. Global Green and Healthy Hospitals: A Comprehensive Environmental Health Agenda for Hospitals and Health Systems Around the World. Retrieved from: <http://greenhospitals.net/wp-content/uploads/2011/10/Global-Green-and-Healthy-Hospitals-Agenda.pdf>

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| | <p>and methods which reduce emissions through both use of materials and ongoing operating costs- however such initiatives have been 'value-managed' out at central government approval stage. If ongoing emissions from operations were a key consideration in meeting emissions budgets, there would be more incentive for life-cycle costs and long-term emissions reductions to be seriously considered when funding capital projects.</p> |
| <p>5ZD Requirement for emissions reduction plan</p> | <p>The CDHB supports an overarching emissions reduction plan which then includes sector-specific policies (such as the Ministry of Health setting specific reduction targets for DHBs). However it is important to consider how development and implementation of policies will be resourced, particularly for entities with limited budgets such as DHBs.</p> <p>The stocktake undertaken last year of environmental sustainability activity in DHBs by the Ministry of Health suggests that no DHBs are currently considering adaptation measures to the risks posed by the climate crisis and there is limited activity on mitigation measures, largely due to an inability to finance such activity. 19 of 20 DHBs are in debt and this situation makes resourcing sustainability initiatives very difficult.</p> |
| <p>5ZI Commission to report at end of emissions budget period</p> | <p>The CDHB recommends that a progress report on the emissions budget is completed annually in order to ensure accountability and expedite action. As per the IPCC report, there is no longer time to delay the climate crisis response as the adverse impacts of the climate crisis are already being experienced both locally and globally.</p> |
| <p>5ZJ Effect of failure to meet 2050 target and emissions budgets</p> | <p>As drafted, the Bill does not currently include any real consequence for not achieving emissions budgets and meeting the emissions targets.</p> <p>The CDHB recommends that decisions by the Minister and government agencies/departments be at least subject to judicial review to ensure accountability.</p> |

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| <p>Subpart 5 5ZL Guidance for departments</p> | <p>The CDHB recommends that the wording of (1) is altered to read: <i>the responsible Minister <u>will</u> issue guidance for departments...</i></p> <p>Strong leadership is required to ensure that action is taken and therefore mandating guidance for departments is needed.</p> |
| <p>5ZQ National Adaptation Plan</p> | <p>The CDHB supports development of a national adaptation plan but notes that there are a number of central government agencies who are currently in the process of writing sector-specific plans.</p> <p>A national plan would better serve the purpose of a cross-sector, HiAP approach, however consideration then needs to be given to sector-specific policy to operationalise these plans and capture sector specific needs and issues, and in addition how the actions identified within the plan would be devolved and resourced.</p> |
| <p>5ZV Certain Organisations to Provide Information</p> | <p>It should be noted that the Ministry of Health completed a stocktake of Climate change activities within DHBs, including adaptation in 2018/19. A consistent template was used so that DHBs could be compared and now reporting on climate change activities is required annually by the Ministry of Health.</p> <p>Such a consistent approach across all government agencies and departments would be a useful way for the Minister and Commission to receive information on a regular and ongoing basis.</p> |

Conclusion

10. The CDHB does not wish to be heard in support of this submission.
11. Thank you for the opportunity to submit on Climate Change Response (Zero Carbon) Amendment Bill.

Person making the submission



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