

Climate Health WA Inquiry

About your submission	
Are you responding o	on behalf of an organisation or group?
⊠ No	
□ Yes	
If yes, please identify the organisation:	
Your contact details	
	ation will not be published without your permission but o contact you about your submission if required.
First name	Katherine
Surname	Middleton
Address	
Phone	
Email	
Publication of submissions	
Submissions will be published with the name of the submitter unless otherwise indicated below. Do you consent to be identified in the published submission?	
	ation agree to be identified
☐ No, I / my organisation request to remain anonymous	
Terms of Reference	
You are encouraged to address at least ONE of the Terms of Reference as listed below. Please select which item/s you will address:	
☐ 1. Establish current knowledge on the implications of climate change for health in Western Australia (WA) and recommend a framework for evaluating future implications.	
☐ 2. Identify and recommend a program of work to manage the implications of climate change for health in WA, which will protect the public from the harmful health impacts of climate change.	
change for health in WA	nmend a program of work to manage the implications of climate A, which will strengthen the preparedness and resilience of a services against extreme weather events, with a focus on the community.

☐ 4. Identify and recommend a program of work to manage the implications of climate change for health in WA, which will reduce the contribution of WA health services to climate change and other detrimental impacts.
☐ 5. Identify and recommend a program of work to manage the implications of climate change for health in WA, which will enable WA Health services to implement change, including energy efficiency, to a more sustainable model.
☐ 6. Evaluate the likely benefits (health and wellbeing, social and economic) arising from climate change mitigation strategies, with a focus on WA health services.
$\hfill \hfill $
☐ 8. Recommend the Terms of Reference, scope and preferred methods for undertaking a climate change vulnerability assessment for the health sector.
☐ 9. Recommend the Terms of Reference, scope and preferred methods for developing a Climate Change Adaptation Plan for the health sector.
Submissions response field
Submissions response field Please type your response to the item(s) selected above into the field below. Alternatively you may provide your submission as a separate attachment (suggested maximum 5 pages).
Please type your response to the item(s) selected above into the field below. Alternatively you may provide your submission as a separate attachment
Please type your response to the item(s) selected above into the field below. Alternatively you may provide your submission as a separate attachment (suggested maximum 5 pages).
Please type your response to the item(s) selected above into the field below. Alternatively you may provide your submission as a separate attachment (suggested maximum 5 pages). Climate Health WA Inquiry
Please type your response to the item(s) selected above into the field below. Alternatively you may provide your submission as a separate attachment (suggested maximum 5 pages). Climate Health WA Inquiry Dear Adj/Prof Tarun Weeramanthri, Please see attached a public stakeholder submission for the Climate Healthy Inquiry in WA. This submission has been based on discussions with fellow medical students based in Broome for a rural clinical year and has been shaped by the medical education we have received, the conversations we have had with patients and co-
Please type your response to the item(s) selected above into the field below. Alternatively you may provide your submission as a separate attachment (suggested maximum 5 pages). Climate Health WA Inquiry Dear Adj/Prof Tarun Weeramanthri, Please see attached a public stakeholder submission for the Climate Healthy Inquiry in WA. This submission has been based on discussions with fellow medical students based in Broome for a rural clinical year and has been shaped by the medical education we have received, the conversations we have had with patients and coworkers. This submission does not speak for our universities, student representative body (AMSA) or organisations we work within. However, we hope this reflection on our
Please type your response to the item(s) selected above into the field below. Alternatively you may provide your submission as a separate attachment (suggested maximum 5 pages). Climate Health WA Inquiry Dear Adj/Prof Tarun Weeramanthri, Please see attached a public stakeholder submission for the Climate Healthy Inquiry in WA. This submission has been based on discussions with fellow medical students based in Broome for a rural clinical year and has been shaped by the medical education we have received, the conversations we have had with patients and coworkers. This submission does not speak for our universities, student representative body (AMSA) or organisations we work within. However, we hope this reflection on our education and practice is a useful contribution to your review.

Attachments

The following documents were provided as attachments to the submission

- Australian Medical Students' Association (2014). Climate Change and Health. Available from:
 - https://www.amsa.org.au/sites/amsa.org.au/files/Climate%20Change%20and%20Health%20(2015)_0.pdf
- International Federation of Medical Students' Associations (2018). Climate Change and Health. Available from: https://ifmsa.org/wp-content/uploads/2018/09/GS_AM2018_Policy_Climate-Change-and-Health_final.pdf

Please complete this sheet and submit with any attachments to: Climate Health WA Inquiry

Public Submission for Climate Health WA Inquiry

Our experience of climate change and health in medical education:

- Medical students represent the future medical workforce, therefore the medical curriculum strongly influences the understanding and knowledge of climate change and health of future health professionals.
- Within the curriculum of the postgraduate Doctor of Medicine courses at the University of Notre Dame and University of Western Australia, climate change and health sparingly taught.
- The University of Western Australia MD course includes a lecture during the third year General Practice rotation.
 - It explores major health impacts of climate change, in particular heat related mortality, air-pollution, extreme weather events, floods, vectorborne disease and psychological impacts. It also briefly addresses the health co-benefits of climate change adaptation and mitigation strategies.
 - This includes online learning resources for interested students.
- There is no such equivalent teaching in the University of Notre Dame curriculum.
 - Students receive teaching by way of a case-based tutorial, integrating practical skills and curriculum content regarding disaster management. In 2019 this full day workshop used the example of a tsunami to encourage students to consider natural disaster management (eg Tsunami) including vector borne diseases, however teaching was not linked back to climate change and health.
- The teaching received by medical students at a university level does not represent the attitudes, understanding and concern of medical students regarding the health of our planet and its' people.
- The Australian Medical Student's Association policy on Climate Change and Health (available here) acknowledges the threat climate change poses to human health. It outlines the particular vulnerabilities of Australia to the impacts of anthropogenic climate change, and supports the findings of the Intergovernmental Panel on Climate Change.
- This aligns with the policy of the International Federation of Medical Student's Association, which can be found here.

Climate change in our clinical placements:

- While working in Broome this year, climate change has presented itself in a clinical setting, directly affecting a patient's health.
- A patient presented to a GP practice in town, with mood symptoms. He was a Yawuru man. Throughout the consult we began discussing things contributing to his low mood. We spoke about things which would normally improve his mood, and make him feel connected to those around him.
- He told me that going out bush—hunting and fishing, with friends and family was something which he would normally enjoy. However, he went on to

explain that recently even being out on the land wasn't bringing him the same joy as it used to. He told me that things were changing—the seasons were changing, the land was changing and it was affecting the connection he felt with the land.

- This was one of the clearest examples I had ever seen of the patient whose clinical presentation was so explicitly related to a changing climate.
- It follows what we already know, that Indigenous peoples are among those who are most vulnerable to the impacts of climate change, and who often have contributed the least.

Further comments:

- The prevailing view from the group of students working in Broome at present is that in our daily practice, when providing acute care to patients within a resource limited setting, the environmental impacts of treatment decisions is rarely a consideration.
- Therefore, there is a widely held view that many of the decisions to ensure improving the sustainability from the healthcare sector need to come from a hospital management level.
- We're pleased that the Broome Hospital has joined the Global Green and Healthy Hospital Network, joining the Rural Clinical School of WA and Western Australian Country Health Service in their commitment to improve the sustainability of the healthcare they provide.
- We hope that this commitment will lead to tangible outcomes which will reduce the impact of the healthcare sector on the environment—and prepare for impacts climate change will have on the sector too.