



Clean Energy Legislation (Carbon Tax Repeal) Bill 2013 and Related Bills Submission

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Submission from
Doctors for the Environment Australia Inc.
College Park House, 67 Payneham Road
COLLEGE PARK SA 5069
Phone: 0422 974 857
Email: admin@dea.org.au
www.dea.org.au



The following are members of our Scientific Committee and support the work of
Doctors for the Environment Australia

Prof. Stephen Boyden AM; Prof. Peter Doherty AC; Prof. Bob Douglas AO; Prof. Michael Kidd AM;
Prof. David de Kretser AC; Prof. Stephen Leeder AO; Prof. Ian Lowe AO; Prof. Robyn McDermott;
Prof. Tony McMichael AO; Prof. Peter Newman; Prof. Emeritus Sir Gustav Nossal AC; Prof. Hugh Possingham;
Prof. Lawrie Powell AC; Prof. Fiona Stanley AC; Dr Rosemary Stanton OAM; Dr Norman Swan;
Professor David Yencken AO

Introduction

Doctors for the Environment Australia (DEA) is a voluntary organisation of medical doctors and medical students in all states and territories. We work to prevent the diseases – local, national and global – caused by damage to the Earth’s environment. Climate change will bring to Australia an increased burden of heat stroke, injury from fire and storm, infectious diseases, social disruption and mental illness; whilst in the developing world it will bring famine and water shortage. It will require ambitious policy in order for Australia to play its part in reducing global greenhouse gas emissions.

The proposed legislation to which we make our submission today, abandons the price on carbon pollution that has been operating effectively since July 2012. The 11 separate Bills include repeal of the carbon tax, various import, manufacturing and shortfall levies, abolition of the Climate Change Authority, customs and excise tariff amendments, and the abolition of the Clean Energy Finance Corporation. Together the Bills dismantle the efforts of the last Federal Parliament to address carbon pollution and the pressing threat of anthropogenic climate change.

In our submission we argue that repealing the Clean Energy Legislation and related Bills removes a vitally important public health measure. Accordingly, DEA is strongly opposed to these repeals.

The public health case for action on climate change

DEA has supported the carbon price due to its effectiveness in reducing greenhouse gas emissions and the universal health benefits of a stable climate. As a non-party-political organisation, we support measures proposed by any party which effectively reduce emissions. As medical doctors, we are deeply concerned that climate change represents a major and growing risk to public health. This view is based on a large body of scientific evidence, as summarised in this review in the journal *The Lancet* – “Managing the health effects of climate change”
www.sciencedirect.com/science/article/pii/S0140673609609351#.

It is worth spelling out the direct and indirect risks to health from climate change listed in this review. Health will increasingly be impacted by, “... heat and cold; wind, storms, and floods; drought, nutrition, and food security; food safety; water and disease; air quality and aeroallergens and disease; vector-borne, rodent-borne, and other infectious diseases; occupational health and ultraviolet radiation.

In addition to these direct health effects, climate change will have indirect substantial consequences on health. Economic collapse will devastate global health and development. Mass environmental displacement and migration will disrupt the lives of hundreds of millions of people, exacerbating the growing issues associated with urbanisation and reverse successes in development. Conflict might result from resource scarcity and competition, or from migration and clashes between host and migrant groups.”

As the temperature rises and extreme weather events become more frequent and more intense, the health risks multiply.

DEA is concerned that attempting to repeal the Clean Energy Package is at least in part a response to anti-scientific sentiment sometimes expressed in public discourse. Despite overwhelming, credible scientific evidence of the risks posed by climate change and the benefits from mitigation, anti-scientific views frame climate change as a political/ideological debate and this misconception continues to undermine the work of scientists and researchers in all areas. There is a role for the Australian government to counter unfounded beliefs in a climate change conspiracy, restore respect for scientific work and make policy accordingly.

The true cost of doing too little

The proposed legislative changes appear to be driven by short term and narrow economic considerations such as reducing costs of energy for industry and consumers. Yet such narrow economic approaches often hide larger cost burdens, which are shifted to other sectors and which will increase with time.

European countries are more aware of this downstream risk to significantly increased health costs arising from climate change, due to research undertaken by the World Health Organization (WHO):
www.euro.who.int/en/health-topics/environment-and-health/Climate-change/publications/2013/climate-change-and-health-a-tool-to-estimate-health-and-adaptation-costs.

This resource allows countries to make rational decisions about health and climate change. Unfortunately calculations are not available for Australia, although the approach is still relevant.

The indirect health costs associated with climate change are obvious to global insurance companies, but again seemingly omitted from the balance sheets of subsequent Australian governments. SwissRe’s 2010 report *Weathering Climate Change* found that global insured economic

losses from climate-related disasters, not including health costs, had soared from US\$5 billion to US\$27 billion annually from 1970 to 2010.

A report from the Natural Resources Defense Council (USA) calculated that health costs from the six recent large US climate events topped US\$14 billion: www.nrdc.org/health/accountingforcosts/default.asp.

Munich RE more recently described how losses due to weather-related events in Eastern Asia have increased by a factor of four in the past three decades:

www.munichre.com/en/media_relations/press_releases/2013/2013_11_11_press_release.aspx.

In Australia it is clear that significant ongoing health costs are being incurred from extreme weather events such as the Queensland floods in 2011, although the initial reports failed to assess them. See DEA submission to the Senate, p8:

www.dea.org.au/images/uploads/submissions/Extreme_Weather_Events_Submission_01-13.pdf.

They conclude that health costs have seldom been included in valuations of climate change damages, resulting in substantial underestimates of climate change costs, and the true costs of climate change are and will be higher in the future.

At COP19 in Warsaw this week, Australia's rating dropped from 51st to 57th out of 61 countries in its efforts to mitigate climate change as rated by the Climate Change Performance Index (CCPI). International disgust at Australia's proposed winding back of the price on carbon and the support for research, education in to climate change, and support for investment in clean energy was manifest on the first day of the talks where Australia received 'Fossil of the Day'. Yesterday Australia won the award for the fourth time: www.indymedia.org.au/keywords/fossil-of-the-day.

Premier medical journal *The Lancet* in 2009 called climate change 'the biggest global health threat of the 21st century' and the WHO agrees with this assessment.

DEA notes that the word 'health' does not appear even once in the 11 Bills, and yet there has never been a bigger threat to public health than climate change. Some levels of government in Australia do understand this link:

www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Climate_change_and_health.

How climate change will impact human health and the urgent changes in policy required to avoid it are described in DEA's policy here:

www.dea.org.au/images/general/DEA_Climate_Change_and_Health_Policy_05-13.pdf.

In closing

There are no substantive policies on the table to replace the Clean Energy Package, and no reason to believe from the information provided to date that proposed direct action will achieve even Australia's modest target for reducing carbon emissions.

Much more needs to be done. We urge the government to retain a price on carbon emissions. Furthermore, we call for a bipartisan summit that heeds the latest Intergovernmental Panel on Climate Change report and put in place ambitious emissions targets.

The evidence is in and the science is settled. We need a raft of new policies that rapidly wind down the fossil fuel industry and build a low carbon economy. Our future health and economic prosperity depends on such leadership.