Victorian Election Platform 2022

RESILIENCE COMMUNITY OF PRACTICE

Acknowledgment of Traditional Custodians

We acknowledge the Traditional Custodians of Country across Victoria. We pay our respects to Elders past and present, and extend this acknowledgement to Aboriginal and Torres Strait Islander peoples who continue to care for Country, community, and culture across Victoria and beyond.

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Building the capacity of the sector to adapt to climate change

The Resilience Community of Practice (RCOP), with over 20 metropolitan and rural organisations and 40 active members from across community services, community health and local government, was established in 2022 with seed funding from the Greater Melbourne Regional Climate Change Adaptation Strategy[1], to support strong partnerships and cross-collaboration between organisations, and reorient systems towards climate equity.

Climate change is exacerbating existing social inequities and disproportionately impacting people experiencing marginalisation and disadvantage. Community service and health organisations (CSHOs) play a critical role in building community resilience however, the sector itself is vulnerable to the impacts of climate change, posing risks of flow-on implications for the Victorians they work with and support.

In this Platform, the RCOP outlines a number of measures that the incoming Victorian Government can take to further enhance the capacity of CSHOs to support Victorian communities to mitigate, adapt and respond to climate change.

Our asks

The Resilience Community of Practice is calling on the incoming Victorian Government to:

1. **Take strong action on climate change** by setting targets of reducing emissions by 75 per cent below 2005 levels by 2030 and net zero emissions by 2035.
2. **Establish a Community Sector and Community Health Climate Adaptation Fund** and corresponding Action Plan to support community service and health organisations (CSHOs) to trial, implement and embed into services and programs climate change adaptation and mitigation activities.
3. Provide ongoing **funding for the Resilience Community of Practice** to share resources and learnings across sectors and geographic areas, and identify opportunities for collaborative action towards climate justice.
4. **Provide opportunities for professional development** for CSHO staff and leadership, across climate change literacy, organisational resilience planning, and understanding the critical role that CSHOs can and do play in building community resilience.

[1] The Greater Melbourne Regional Climate Change Adaptation Strategy is a community led project supporting Greater Melbourne communities to adapt to a changing climate, supported by the Department of Environment, Land, Water and Planning (DELWP) and funded through the Supporting Our Regions to Adapt program.

5. Resource the establishment of a portal **for sharing knowledge, practices, and lessons learned to inform best practice adaptation**, including information on vulnerability (who is vulnerable, why, where, when, and how) and guidance on overcoming barriers and undertaking equitable and just action.

6. **Centralise and enable public access to data and information** that help CSHOs and communities to better plan for climate change, including information about social and health inequities, heat hotspots, climate risks, social infrastructure and health services.

7. **Consult with CSHOs to define and strengthen pathways to inform government decision making and resource CSHOs to utilise their community connections and enable inclusion** of diverse stakeholders in the development of both state and local government adaptation and health and wellbeing planning. Invest in capacity building so CSHOs are aware of these pathways for effective advocacy.

8. Resource the **establishment and coordination of place-based, cross-sector, resilience coalitions** to work in partnership with local governments, community leaders and community service and community health organisations to inform adaptation planning and policies.

9. **Fund place-based training initiatives to** strengthen community leaders' knowledge of climate resilience and emergency responses, so they can pass this knowledge back through their networks and communities. This training should be co-designed with CSHOs, mental health professionals and emergency management experts, and have a strong focus on supporting the leadership of culturally and linguistically diverse people and people with a disability.

Climate justice and the role of CSHOs

Climate change is exacerbating existing social inequities and disproportionately impacting people experiencing marginalisation and disadvantage. It is acting as a 'threat multiplier', disproportionately increasing social, economic, and environmental stressors for already marginalised groups.[2]

Climate justice brings a human rights lens to the interactions of ecological and social justice. It directs attention to the power relations and decision-making processes that produce inequities and acts as a framework for the actions required to address them – including through the work of Community Service and Health Organisations (CSHOs).

A focus on climate justice reveals that it is largely existing experiences of inequity and injustice that shape the health implications of climate change. For example, we know that violence against women increases during and after emergencies and disasters, both in severity for women already experiencing violence and for first-time occurrences.[3] In Victoria, family violence is already the biggest cause of early death, disability and illness in women between the ages of 15 and 44[4]. The disproportionate impacts of climate change on women is a major concern globally as climate change exacerbates existing vulnerability stemming from a number of factors - social, economic and cultural.[5] Box1.1 identifies groups most at risk to climate change impacts in Greater Melbourne.

Understanding these complex and dynamic experiences not only enables CSHOs to directly support communities, but to work towards climate change responses that are just and inclusive – both now and for generations to come.

CSHOs are essential for strengthening local resilience – these organisations provide critical support services, and have strong networks and relationships within communities. However, the sector itself is vulnerable to the impacts of climate change, posing risks of flow-on implications to the communities they work with and support.

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[2] Intergovernmental Panel on Climate Change. 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. Edited by Valérie Masson-Delmotte, Panmao Zhai, Hans-Otto Pörtner, Debra C. Roberts, James Skea, Priyadarshi R. Shukla, Anna Pirani, Wilfran Moufouma-Okia, Clotilde Péan, Roz Pidcock, Sarah Connors, J. B. Robin Matthews, Yang Chen, Xiao Zhou, Melissa Gomis, Elisabeth Lonnoy, Tom Maycock, Melinda Tignor and Tim Waterfield. Cambridge, UK and New York, NY: Cambridge University Press, 2018.

[3] Parkinson, Debra. "Investigating the increase in domestic violence post disaster: an Australian case study." *Journal of Interpersonal Violence* 34(11):2333-62 (2019). https://journals.sagepub.com/doi/10.1177/0886260517696876

[4] The Royal Women's Hospital. "Family Violence". Accessed 12 October 2022. https://www.thewomens.org.au/health-information/violence-against-women/family-violence

[5] Osman-Elasha, Balgis. "Women… In The Shadow of Climate Change." United Nations Chronicle. Date unknown. Accessed 12 October 2022. https://bit.ly/3Vzka4S

Box 1.1 Groups most at risk from climate change impacts in Greater Melbourne.

People with disabilities and particular health conditions such as:

- Heart and lung disease, high blood pressure, diabetes, cancer or kidney disease, lymphoedema, fibromyalgia, poliomyelitis
- Certain neurological illnesses (e.g. Parkinson's disease, multiple sclerosis, motor neurone disease)
- Mental illness
- Illness or infection that causes dehydration or fever
- Conditions that impair sweating including dehydration, skin disorders (sunburn, prickly heat, burn scarring), congenital impairment of sweating, cystic fibrosis, quadriplegia, scleroderma
- Addiction to alcohol, cigarettes and other drugs
- Cognitive impairments
- Limited mobility
- Obesity
- Low cardiovascular fitness

People taking medications that may affect the way the body reacts to heat:

- Allergy medicines (antihistamines)
- Some blood pressure and heart medicines (beta-blockers and vasoconstrictors)
- Seizure medicines (anticonvulsants)
- Thyroid medications (thyroxine)
- Water pills (diuretics)
- Antidepressants
- Antipsychotics

People in inequitable social and economic circumstances

- People who are homeless, especially those sleeping rough
- People living in rooming houses, transitional accommodation, cars, caravans, tents, or insecure housing
- People living in public or private social housing
- People with low socioeconomic status who have restricted means of coping with extreme weather
- People who are living alone and/or who are socially isolated
- People with low proficiency or literacy in English (and/or other languages)
- New arrivals and visitors unfamiliar with our climate and/or associated social practices to manage extreme weather
- People exposed to prejudice, discrimination and other systemic barriers such as racism, sexism, ageism and ableism
- People exposed to greater risk of violence such as women and children, drug and alcohol users, people in insecure accommodation or sleeping rough

People outdoors during extreme heat

- Working or being physically active outdoors (e.g. gardeners, athletes and labourers).

This list, from the Northern Alliance for Greenhouse Action's (NAGA) Exploring Vulnerabilities Desktop Review (2021), is based on groups listed in the Heat Health Plan for Victoria 2021 with the inclusion of further groups from interviews and surveys undertaken by NAGA.

Cut emissions rapidly and equitably

The latest report by the United Nations' Intergovernmental Panel on Climate Change (IPCC) was a reminder that the impacts of climate change are accelerating, and as they continue, we will see increasingly severe weather events including extreme days of heat and heatwaves, floods, and bushfires.[6] It reaffirmed that our ongoing reliance on a fossil fuel economy threatens the very survival of our species, let alone our economy, if we continue on the current emissions trajectory.

The IPCC findings make it clear that immediate action must be taken to drastically drive down emissions across all sectors of the Victorian economy.

Given the opportunities for emissions reduction and renewable energy generation here in Victoria, and our high historical contribution to climate change, Victoria can and should cut its emissions faster than the global required average to stay well below 2 degrees Celsius of global warming. We must aim to reduce greenhouse gas emissions by 75 percent below 2005 levels within the decade (by 2030) and reach net zero emissions by 2035 – 15 years earlier than previously projected.[7]

Even with swift action, many of the impacts of warming from past and anticipated future emissions are already 'locked in'. This reality will only compound the existing challenges facing at-risk and marginalised populations. It is therefore critical that people experiencing disadvantage are a central focus of the Victorian Government in the urgent transition to a clean economy.

To contribute to keeping global warming well below 2 degrees Celsius, the Victorian government should:

Recommendation 1:

Take strong action on climate change by setting targets of reducing emissions by 75 per cent below 2005 levels by 2030 and net zero emissions by 2035.

[6] IPCC, 2022: Climate Change 2022: Mitigation of Climate Change. Contribution of Working Group III to the Sixth Assessment Report of the Intergovernmental Panel on Climate Change [P.R. Shukla, J. Skea, R. Slade, A. Al Khourdajie, R. van Diemen, D. McCollum, M. Pathak, S. Some, P. Vyas, R. Fradera, M. Belkacemi, A. Hasija, G. Lisboa, S. Luz, J. Malley, (eds.)]. Cambridge University Press, Cambridge, UK and New York, NY, USA. doi: 10.1017/9781009157926

[7] Steffen, W., Hughes, L., Bradshaw, S., Arndt, D., & Rice, M. (2021). Aim high, go fast: why emissions need to plummet this decade. https://www.climatecouncil.org.au/resources/net-zero-emissions-plummet-decade/

CSHO Sector Climate Adaptation Fund

We know that many CSHOs are not prepared to adapt or respond to climate change impacts, posing risks of flow-on implications to the communities we work with and support.[8] Heat, for example, poses a critical challenge for CSHO's service infrastructure with many buildings and service delivery models not designed for current or projected climate impacts.[9]

Aligned with learnings from COVID-19, this places CSHOs at risk of not being able to respond to increased service demand. The consequences of major disruptions to social services and community health provision for people experiencing marginalisation and disadvantage are very serious as they impact access to the basic needs for human survival. The outcomes can include homelessness, deprivation, hunger, isolation and death.

Climate change also risks the mental and physical health, safety and wellbeing of health care and social assistance workers, Australia's largest workforce.[10] In a 2022 survey of 1,165 workers across Australia, 48% of respondents indicated that they had experienced mental health issues to do with climate change.[11] Effects include anxiety, concerns regarding fires, concern for future generations, and stress and distress. Failure to put plans in place to support those with pre-existing health conditions can be especially dangerous in the context of extreme heat, while also increasing the risk of service disruption. One professional with a predisposition to low blood pressure and migraines, for example, reported not being able to get to work because the heat made it too risky for her.

Planning for an uncertain future is a challenging task and community and health services need to be supported to understand the vulnerability of their organisations and the community under a range of possible future scenarios. CSHOs perceive an overwhelming range of barriers to action on climate change. Key amongst these is a lack of skills and financial resourcing and the concern that adaptation is 'beyond the scope' of the sector's core business.

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[8] VCOSS, *A Climate of Fairness: Making Victoria's Climate Change Transition Fair & Equitable.* Melbourne, 2019. https://vcoss.org.au/wp-content/uploads/2019/10/A-Climate-of-Fairness-2019-with-footnotes-web.pdf

[9] DH and DFFH, *Health and Human Services Climate Change Adaptation Action Plan 2022–2026* (Melbourne: State of Victoria, 2022), 30-32.

[10] ABS, *Healthcare and Social Assistance Our Largest Industry* (Canberra, 2017), accessed 25 July 2022, https://www.abs.gov.au/ausstats/abs@.nsf/mediareleasesbyReleaseDate/B611DFF5E8590F8ACA2581BF001F743B?OpenDocument

[11] Denham, Todd and Lauren Rickards. *Climate Change at Work. Draft Report*. Melbourne, 2022. Climate Resilience Living Lab, RMIT University. https://cur.org.au/cms/wp-content/uploads/2022/09/220913-web-climate-impacts-at-work.pdf

CSHOs require flexible funding and resources to adapt and build organisational and sector resilience. Investing in organisational resilience will minimise the impacts of climate change on the health and well-being of staff, volunteers and those who use our services, and ensure the sector is able to continue to provide critical services when they are needed most.

The Resilience Community of Practice endorses the Victorian Council of Social Services' (VCOSS) call for a Community Sector Climate Change Adaptation Fund. We believe this should be supported by the development of a climate change adaptation action plan for the community sector based on the *Health and Human Services Climate Change Adaptation Action Plan 2022–2026*.

In line with Action H11 in the *Health and Human Services Climate Change Adaptation Action Plan 2022–2026*, to effectively leverage the Health and Human Services delivery footprint and embed sector-wide climate change adaptation and risk management, the Victorian Government should:

Recommendation 2:

Establish a Community Sector and Community Health Climate Adaptation Fund and corresponding Action Plan to support community service and community health organisations to trial and implement climate change adaptation and mitigation activities. Examples of initiatives that could be funded by the program include hands-on and tailored training to improve business continuity, or a dedicated staff member to assess an organisation's future climate change risk.

Resource opportunities for shared learning and action

CSHOs in Victoria require support to build skills and capability for climate change adaptation, access to tools and case studies that support organisational resilience, and strong, supported networks to share learnings across sectors and geographic areas that enable collaborative action towards climate justice. Given the scarcity of resources and capacities across many organisations, the need to improve coordination of resources and strategies is essential.

The Resilience Community of Practice was established in response to this need. It provides an opportunity for networking and social learning among CSHOs and aims to support a better understanding of stakeholders and leverage points that reorient systems towards climate justice and strong partnerships to achieve shared impact.

There are numerous tools and resources that have been developed internationally and within Australia to support CSHOs to build their own resilience and that of their community. However, there is no hub that collates these resources and makes it easily accessible for the sector. We echo Future Earth Australia's call for the establishment of a portal for sharing knowledge, practices, and lessons learned, including information on vulnerability (who is vulnerable, why, where, when, and how), tools related to assessing an organisation's baseline resilience to inform adaptation planning, and guidance on overcoming barriers and undertaking equitable and just action[12].

To enable shared learning and action on climate change adaptation for CSHOs, the Victorian Government should:

Recommendation 3:

Provide ongoing **funding for the Resilience Community of Practice** to share resources and learnings across sectors and geographic areas, and identify opportunities for collaborative action towards climate justice.

[12] Future Earth Australia. *A National Strategy for Just Adaptation*. 2022. Australian Academy of Science, Canberra, Australia. https://www.futureearth.org.au/sites/default/files/2022-09/a-national-strategy-for-just-adaptation.pdf

Recommendation 4:

Provide opportunities for professional development for CSHO staff and leadership, across climate change literacy, organisational resilience planning, and understanding the critical role that CSHOs can and do play in building community resilience.

Recommendation 5:

Resource the establishment of a portal **for sharing knowledge, practices, and lessons learned to inform best practice adaptation**, including information on vulnerability (who is vulnerable, why, where, when, and how) and guidance on overcoming barriers and undertaking equitable and just action.

Ready access to relevant and evidence-based information

To address systemic drivers of climate injustice, CSHOs require access to relevant and evidence-based information regarding local impacts, needs, and opportunities regarding climate change.

Action on climate change must also be evidence-led and transparent. This requires CSHOs and the community alike to have access to funding, tools, training and information to enable them to measure and track the impacts of their activities. A 2022 consultation with 44 organisations in Melbourne's West, through the LMCF funded Resilience in the West initiative, reinforced the need for evidence-based and accountable actions.[13]

The growing need to respond to climate change-related threats means existing planning tools, strategies and indicators will need to be modified or new ones developed to drive action. This will provide support for CSHO staff – regardless of the team they work in – to have a clear understanding of how climate justice impacts their professional roles, the communities and networks they work within, and ways and means of building climate justice.

To ensure action on climate change is evidence-led and transparent the Victorian Government should:

Recommendation 6:

Centralise and enable public access to data and information that help CSHOs and communities to better plan for climate change, including information about social and health inequities, heat hotspots, climate risks, social infrastructure and health services.

[13] Dunn, Katrina, Andrea Wolf, Susie Moloney, David Lansley, Thea Hewitt, Melek Cigdem-Bayram, and Haydie Gooder. *Mobilising Climate Just and Resilient Communities in Melbourne's West: Collaborative Action Plan.* Melbourne: Jesuit Social Services, 2022.

Community service organisations as enablers of inclusion

Under the Victorian Climate Change Act 2017, state and local governments are required to account for climate change risks in public health and wellbeing planning, including a responsibility to minimise the impact of emergencies on the health and wellbeing of communities and individuals, especially those most at risk[14].

In Victoria, requirements for collaborative engagement, continuous improvement and preventative responses emphasise the critical role that CSHOs have to play in supporting the health and wellbeing of their local community in a changing climate through community advocacy. This function should be better recognised and supported by the Victorian Government.

Through their relationships with local communities, CSHOs have in-depth knowledge of the key issues affecting individuals and their broader community, wide-reaching community networks, political connections, trust and goodwill.

Every day, place-based organisations connect individuals to specific services or care such as National Disability Insurance Scheme (NDIS) services or food relief, advocating to local council and Members of Parliament and other relevant bodies on issues of importance to their local community. Those who rely on the services of CSHOs are often those experiencing entrenched and intersecting disadvantage whose voices have historically been excluded from decision making and who, often, are those most at-risk to the impacts of climate change. For example, many of the refugee and asylum seeker community who have recently arrived in Australia may have low English literacy and limited understanding of the local environment, extreme weather risks, preparedness strategies and services available to them, requiring education initiatives that are catered to the language, culture and strengths of each unique community group.

Their trusted relationships with these communities provides CSHOs with an important perspective of the strengths and needs of those most at risk in their communities which is able to inform effective and just local and state government responses to climate change. This also makes CSHOs a critical enabler for inclusion of diverse stakeholders in policy debates and decision-making across all levels of government and non-government bodies, ensuring the potential for more just processes, rules, and outcomes which are at the core of just adaptation that effectively counters injustices.[15]

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[14] DHHS. *Pilot Health and Human Services Climate Change Adaptation Action Plan 2019-21* (Melbourne: State of Victoria, 2019), 19. https://bit.ly/3VENO90

[15] Future Earth Australia. *A National Strategy for Just Adaptation*. 2022. Australian Academy of Science, Canberra, Australia. https://www.futureearth.org.au/sites/default/files/2022-09/a-national-strategy-for-just-adaptation.pdf

There is varied capability and capacity to do this advocacy effectively, no clear mandate for this work within the sector, and often limited pathways for CSHOs to enhance the voices of people experiencing vulnerability in climate change adaptation planning. And yet, community service and health workers across Victoria provide this critical service as advocates and connectors every day. This role however, is often haphazard and rarely recognised or resourced.

To build the capability of the CSHOs to advocate for their community's needs and enable inclusive voices in adaptation planning and policy, the Victorian Government should:

Recommendation 7:

Consult with CSHOs to define and strengthen pathways to inform government decision making and resource CSHOs to utilise their community connections and enable inclusion of diverse stakeholders in the development of both state and local government adaptation and health and wellbeing planning. Invest in capacity building so CSHOs are aware of these pathways for effective advocacy.

Resource local resilience programs

Local, place-based responses to climate change are vital to addressing the intersections of climate change and health, as "while the causes of climate change are global, health impacts are inherently local—they happen where people live, work, learn, play and travel."[16] A place-based response is one that is ideally characterised by long-term co-design, co-governance, and co-production processes between community and stakeholders within a defined geographic location.

In the context of climate adaptation, such approaches attempt to shift the status quo from top-down approaches to one where those at greatest risk are equipped with the power and resources necessary for effective and equitable climate action. Crucially, through national and state leadership, policy and resourcing that strengthens capacity and enables locally-led action to address drivers of risks and vulnerability in place are urgently needed.

This approach requires investment in building the capacity of community leaders and place-based CSHOs for collective decision making. In partnership with local governments and emergency services, the Victorian Government should establish place-based, cross-sector, climate resilience coalitions.

These coalitions would serve as networked spaces to:

- share local knowledge, for example where, in what medium and through whom a recently arrived migrant community member might want to receive information about heatwave or bushfire-risk;
- build a common understanding of the local strengths and community assets, for example identifying appropriate community spaces that could be used as cool-refuges during heatwaves and the infrastructure-upgrades or wrap-around supports required to ensure personal and cultural safety; and
- identify community priorities to inform local government adaptation planning and policies.

[16] Mary Fox et al., "Integrating Public Health into Climate Change Policy and Planning: State of Practice Update," *International Journal of Environmental Research and Public Health* 16, no. 18 (2019), 2, https://doi.org/10.3390/ijerph16183232.

As well as resourcing capacity for community-led, collective decision making to *shape* local resilience programs, the Victorian Government should provide funding for implementation. The Resilience Community of Practice endorses the Victorian Council of Social Services' call to *fund* local resilience programs.

The Victorian Government should:

Recommendation 8:

Resource the **establishment and coordination of place-based, cross-sector, resilience coalitions** to work in partnership with local governments, community leaders and community service and community health organisations to inform adaptation planning and policies.

Recommendation 9:

Fund place-based training initiatives to strengthen community leaders' knowledge of climate resilience and emergency responses, so they can pass this knowledge back through their networks and communities. This training should be co-designed with CSHOs, mental health professionals and emergency management experts, and have a strong focus on supporting the leadership of culturally and linguistically diverse people and people with a disability.