Planetary Health Report Card (Pharmacy) 2026:

Monash University

2025-2026 Contributing Team:

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Land acknowledgment: The Monash University Pharmacy School Planetary Health Report Card acknowledges the traditional owners of the land on which our university sits, the Boonwurrung and Wurundjeri peoples of the Kulin Nation. We recognise that sovereignty was never ceded, and that traditional paradigms of Caring for Country both predate and intersect with planetary health.

Summary of Findings

Overall Grade	B

Curriculum	C+

Building on the strong foundation laid in the previous academic year, planetary health education has been sustained and strategically expanded across all four years of the pharmacy program in 2025-2026.

While the previous report card reflected a period of new curriculum introductions, the 2025-2026 academic year marked a deliberate shift towards formally embedding planetary health education as an explicit objective of the pharmacy program. Rather than being treated as an "add-on", planetary health and sustainable healthcare are now articulated as core competencies for pharmacy students, affirming their centrality to the profession. This shift was achieved through multiple new unit- and topic-level learning outcomes addressing different dimensions of planetary health, and embedded longitudinally across the curriculum.

Making planetary health an explicit learning objective had tangible effects on student engagement and application. For example, underpinned by a newly introduced learning outcome, the cardiovascular health curriculum was expanded to address environmental contributors to cardiovascular risk, their links to climate change, and the environmental and health co-benefits of non-pharmacological risk reduction strategies. Following this integration, students were observed to proactively incorporate planetary health considerations into simulated patient counselling sessions and to consider environmental factors in their therapeutic decision-making. This suggests that formal curricular integration enhances students' ability to translate planetary health principles into clinically relevant practice.

Application extended beyond simulated patient scenarios, with student-led research remaining a prominent feature of planetary health engagement throughout 2025-2026. Projects focused on developing actionable strategies to support pharmacists in implementing sustainable practices, with findings successfully disseminated to the professional community. These research efforts demonstrate a growing emphasis on actively involving students in designing practical, workplace-oriented solutions to current planetary health challenges.

Recommendation: Collectively, this year's integration of planetary health into core curriculum objectives has strengthened student engagement and promoted real-world application. However, to fully prepare the future pharmacy workforce, students must also learn about the intersection of social equity and planetary health. The current curriculum provides limited coverage of the disproportionate health impacts of climate change, with First Nations Australians, BIPOC communities, immigrant populations, and people with disabilities largely absent from teaching. To address these gaps, the curriculum should explicitly integrate social justice and systems-based perspectives into planetary health education.

Interdisciplinary Research	A

Monash University demonstrates strong engagement in planetary health and healthcare sustainability research through dedicated research leadership, formal organisational structures, and programs within its health faculties. The Monash Sustainable Development Institute (MSDI) brings together interdisciplinary research expertise in behaviour change and sustainability transitions with focuses on six themes: climate action; environment and health; sustainable cities and regions; circular economy; inclusive prosperity; and leadership for the Sustainable Development Goals (SDGs).

The institution also has put in meaningful efforts to incorporate community perspectives particularly through participatory and co-design initiatives, however, formal decision-making authority over research agendas remains within the institution research organisation. In addition, Monash University has demonstrated active scholarly leadership by convening planetary health conferences and maintains engagement in international planetary health

organisations.

Recommendations: To further strengthen its performance, Monash University could formalise mechanisms that grant greater decision-making authority to communities disproportionately affected by climate change and environmental injustice, and further integrate its sustainability and planetary health research outputs into a single, fully centralised and comprehensive portal. These enhancements would reinforce the university's position as a leading institution in planetary health research and practice.

Community Outreach and Advocacy | B-

Throughout the 2025-2026 period, Monash University has demonstrated extensive partnerships with community, healthcare and government organisations. Through the Monash Sustainable Development Institute (MSDI), these partnerships with global bodies such as the World Health Organisation and industry organisations such as Enel Green Power Australia, provide students with practical training and real-world sustainability projects which are aligned with the UN Sustainable Development Goals.

Monash University also offers community-facing training courses through its Net Zero Academy, engaging external stakeholders in the community to build capacity and leadership in planetary health-aligned climate action. In addition to this, the Monash Reuse Centre is run by the university to engage staff, students, and the wider community in recycling efforts as a part of waste reduction measures and the promotion of a planetary health principles.

Despite engaging with sustainability and planetary health through publicly available communications, Monash University does not consistently publish this in university-wide channels and students must often seek information independently. However, short post-graduation courses such as Sustainable Healthcare in Practice, Environment and Sustainability Expert Master Degree and Sustainable Healthcare Fundamentals are offered by Monash University, with the aim to ensure students' knowledge and skills in planetary health and sustainable healthcare remain up to date during their professional career.

For its patients, neither Monash University nor its affiliated teaching hospitals have easily accessible educational resources regarding environmental health exposure. Patients also do not have access to readily available educational materials regarding the health impacts of climate change.

Recommendations: Monash University should enhance the visibility, coordination, and accessibility of its planetary health initiatives for health professional students, ensuring these efforts are clearly communicated and easily navigable across institutional platforms. Greater emphasis should also be placed on developing and integrating patient-directed educational resources on climate-related health impacts, extending planetary health engagement beyond the university and into clinical care.

Support for Student-Led Initiatives | A-

Monash University has several initiatives that assist in involving students in planetary health and educating them about environmental issues. The institution offers opportunities for students to take part in research related to planetary health largely through the Monash Sustainable Development Institute and also encourages students to engage with sustainability initiatives such as the Green Steps program. Monash University also performs well in having information regarding sustainability and planetary health available to its students through a website that is accessible to the public and having a student liaison that advocates for sustainability best practices on an institutional level.

Whilst there are a few planetary health related student groups at Monash University, groups such as Monash Doctors for the Environment Australia (MDEA) and AMSA (Australian Medical Students' Association) Code Green are not faculty supported and require external funding for operations. Pharmalliance, however, does receive faculty support.

Recommendations: Student associations for planetary health within the university and medical school should receive faculty and student union support. This would promote increased opportunities for students to engage in planetary health related activities such as research, education and advocacy. In addition to this, the university should continue to encourage students to take part in sustainability initiatives and make it more accessible for students to do so.

Campus Sustainability | B

Monash University continues to demonstrate a strong institutional commitment to campus sustainability. While sustainability remains embedded across operations, research, and infrastructure, this result reflects a decline from the previous A- rating and highlights ongoing gaps in transparency, implementation consistency, and faculty-level leadership.

Monash has committed to the Net Zero Initiative, a comprehensive strategic pillar aimed at achieving net zero emissions from infrastructure and operations by 2030. The Monash Net Zero Team reported that, in 2025, all Monash campuses and sites sourced 100% of their electricity from renewable energy, an improvement from 2024 and a significant step toward emissions reduction goals.

Further progress is demonstrated through the 343 Royal Parade Parkville Revitalisation Project, which applies sustainable building practices to existing infrastructure. This initiative provides tangible evidence that older campus facilities are being actively retrofitted to improve environmental performance.

Recommendations: To strengthen future outcomes, Monash should enhance public reporting of renewable energy use at the building level, provide transparent timelines for composting expansion and full fossil fuel divestment, and address ongoing challenges in transport accessibility and affordability in Parkville Campus. The institution should also consider implementing stricter sustainability guidelines for events being held at the Parkville campus, and more stringent composting and recycling programs. One suggestion is to collaborate with social enterprises, such as *Terracycle*, to repurpose challenging items such as soft plastics, coffee pods, and textiles.

Statement of Purpose

Planetary health is human health.

The Planetary Health Alliance describes planetary health as "a solutions-oriented, transdisciplinary field and social movement focused on analysing and addressing the impacts of human disruptions to Earth's natural systems on human health and all life on Earth." This definition is intentionally broad, intended to encompass the multitude of ways that the environment can affect health, including water scarcity, changing food systems, urbanisation, biodiversity shifts, natural disasters, climate change, changing land use and land cover, global pollution, and changing biogeochemical flows. The health of humanity is dependent on our environment, and our environment is changing rapidly and in disastrous ways. Although the World Health Organization has called climate change "the greatest threat to global health in the 21st century," many health professional school's institutional priorities do not reflect the urgency of this danger to human health.

As future health professionals, we must be prepared to address the impacts of human-caused environmental changes on our patients' health. This preparation is in the hands of the institutions providing our health professional training. It is imperative that we hold our institutions accountable for educating health professional students about the health impacts of climate change and other anthropogenic environmental changes, generating research to better understand health impacts and solutions, supporting related student initiatives, embracing sustainable practices as much as possible, and engaging with surrounding communities that are most affected by environmental threats. Because climate change and environmental threats disproportionately affect vulnerable populations (for example, communities of colour, older adults sensitive to health threats, and individuals in low-resource settings), these issues are inherently ones of equity and justice.

With the purpose of increasing planetary health awareness and accountability among health professional schools, we have created a Planetary Health Report Card that students internationally can use to grade and compare their institutions on an annual basis. This student-driven initiative aims to compare health professional schools nationally and internationally on the basis of discrete metrics in five main category areas: 1) planetary health curriculum, 2) interdisciplinary research in health and environment, 3) university support for student planetary health initiatives, 4) community outreach centred on environmental health impacts, and 5) school campus sustainability.

Definitions & Other Considerations

Definitions:

- **Planetary Health:** is described by the Planetary Health Alliance as "the health of human civilisation and the state of the natural systems on which it depends." For example, topics such as climate change, declining biodiversity, shortages of arable land and freshwater, and pollution would all fall under the realm of planetary health. Both planetary health and traditional 'environmental health' examine the relationship between human health and the external environment, including extreme temperatures, chemicals, vector-borne diseases, etc. Planetary health explicitly concerns itself with the potential health harms associated with human-caused perturbations of natural systems. Therefore, the human health focus of planetary health makes the field well-adapted for the context of health professional education. Throughout this report card, we use the term planetary health to refer to this broad swath of topics, but resources do not need to explicitly include the term "planetary health" to satisfy the metric.

- **Sustainable Healthcare:** As defined by the Academy of Royal Colleges, sustainable healthcare involves ensuring the ability to provide good quality care for future generations by balancing the economic, environmental, and social constraints and demands within health care settings. A sustainable healthcare system maintains population health, reduces disease burden and minimises use of healthcare services.

- **Education for Sustainable Healthcare (ESH):** is defined as the process of equipping current and future health professionals with the knowledge, attitudes, skills and capacity to provide environmentally sustainable services through health professional education, thus working to decrease the enormous environmental impact of the healthcare industry. Planetary Health Education is an integral part of this education rather than an end in itself. This is because knowledge on Planetary Health is required to be able to fully understand the necessity of sustainable healthcare as well as being part of the broader knowledge needed to fully protect and promote health. In summary, ESH is covered by the three Priority Learning Outcomes of the Centre of Sustainable Healthcare below, and Planetary Health Education is embraced in the first learning objective and is a fundamental requirement to achieve learning outcomes 2 and 3:

    1. Describe how the environment and human health interact at different levels.
    2. Demonstrate the knowledge and skills needed to improve the environmental sustainability of health systems.
    3. Discuss how the duty of a doctor to protect and promote health is shaped by the dependence of human health on the local and global environment.

- **Pharmacy School/Department vs. Institution:** When "Pharmacy school" is specified in the report card, this only refers to curriculum and resources offered by the School/department of Pharmacy and does not include offerings from other parts of the university (e.g. undergraduate departments (USA), other related departments (e.g. Public Health, Population Health departments). In contrast, when "institution" is specified in the report card, we are referring to the university more broadly including all of its campuses. Any resource reasonably accessible by Pharmacy students, no matter where in the institution the resource

comes from or if it is specifically targeted for medical students, can meet this metric.

- **Environmental history (Curriculum Section):** This is a series of questions students are taught to ask during medical encounters that elicits patients' exposures and environmental risk factors. Historically, this has included consideration of exposures like pesticides, asbestos, and lead, though in the modern era shaped by climate change, it can be expanded to include things like wildfire smoke exposure, air pollution and mould after flooding. Key components include place of residence over the lifecourse, occupational history, food and water sources (e.g. meat from industrial feeding operations, regular fishing in contaminated water, access to clean drinking water), and exposure to air pollution. Please be as specific as possible when providing evidence for this metric.

- **Elective:** The word "elective" refers to an optional course or lecture series that a student can opt to take part in but is not a requirement in the core curriculum. Generally, these elective courses take place in the preclinical curriculum but vary by school.

- **Core Curriculum:** This refers to taught material that is delivered to the entire cohort of students in one year.

- **Clerkship / Outreach:** This is a term used in the USA to refer to placements that medical students go on e.g. Pediatrics, General medicine, Psychiatry. In the UK these are referred to as rotations, outreach or placements. This is a relatively short (approximately 4-8 weeks) period of study and patient-centred clinical experience that takes place as part of the undergraduate programme.

- **Clinical rotation:** This is a term used to refer to placements that students go on (e.g., ophthalmology, surgery, cardiology).

- **Physiotherapy vs Physical Therapy:** For the purposes of this report card these terms are considered interchangeable. However, physiotherapy will be used primarily.

- **Community organisations:** For most institutions, there are existing groups that are not directly affiliated with the university and exist as a product of what the community the institution exists in cares about or needs. These specific community organisations relevant to this report include those that are focused around some aspect of climate and health preservation. These community organisations can include but are not limited to local mutual aid initiatives, underserved-resource distribution groups, clean-up and nature conservation groups, community gardeners, and other environmental-related organisations. If your institution does not have access to local volunteerships with community groups, please report any community organisations your institution or school has collaborated with.

- **Climate justice:** The idea that certain population groups and geographical locations which are disproportionately more impacted by climate change are already economically and socially disadvantaged. This double vulnerability sits alongside pre-existing social justice concerns and should therefore shift policy and practice to mitigate the inequitable effects of the climate crisis.

- **Extractivism:** The removal of natural resources typically in large quantities. Within anthropology this term is often used in the context of colonialism to refer to the

historic seizing of natural resources, a practice which has developed business models tied to ecological degradation and loss of biodiversity.

- **Global South:** Nations that often have less economic and industrial development and are typically in the southern hemisphere. These nations have been found to be disproportionately impacted by the climate crisis.

- **Low socioeconomic status (SES):** An individual or geographical area that across a variety of socioeconomic factors (e.g., income, education, race/ethnicity) is considered vulnerable. This vulnerability has been correlated to more adverse health outcomes often as a consequence of encountering more barriers in accessing and receiving healthcare.

- **Low and Middle-Income Countries (LMIC):** Countries that have lower degrees of economic affluence.

- **Anthropogenic:** Created through human activity

- **Marginalized communities:** Groups excluded from mainstream economic, educational, social, and/or cultural experiences due to race, gender identity, sexual orientation, age, physical ability, language, and/or immigration status (Sevelius et al., 2020).

Scoring Matrix

- Elective coursework (1 point): This score applies to material that is actively selected by the students such as a module choice, or additional lecture series. By implication, only a given proportion of the cohort will receive this taught material.
- Brief coverage in the core curriculum (2 points): This score applies where a topic is covered only briefly in a core curriculum session. This implies that the entire cohort receives the same material. At minimum brief inclusion would qualify as inclusion in a single lecture slide in a single year.
- In depth coverage in the core curriculum (3 points): This score applies where a topic is taught in significant detail or where a topic is repeatedly brought up in different years. This might look like several dedicated lecture slides, or inclusion of the same topic in different lectures and teaching formats.

Other considerations:

- If there are more than one “tracks” at your institution with two different curricula (for example, Harvard Medical School has a Pathways and HST curriculum track), you can choose to fill out a report card for each track, or fill out just one report card and average the scores received by each track in cases where the scores are different (see the 2021 Harvard or Oxford report cards as examples). Where possible please indicate the proportion of students that are on each track.

Updated in 2025, a complete literature review by metric is available for the 2024/25 Medicine Report Card Template. This largely translates across disciplines although we are hoping to expand this process across all of our covered disciplines. A link to the 2025 literature review by metric is available here.

Planetary Health Curriculum

Section Overview: ***This section evaluates the integration of relevant planetary health topics into the Pharmacy school curriculum.*** *Today's health professional students will be on the frontlines of tackling the health effects of climate and other environmental changes. Therefore, it is critical that students are trained to understand the health effects of these changes, as well as planetary health issues and principles more broadly. Topics like the changing geography of vector-borne diseases, the health consequences of air pollution, environmental health inequities, and disaster response principles must be part of every medical school's core curriculum.*

Curriculum: General

1.1 Does your pharmacy school curriculum address the impacts of extreme weather events on individual health and/or on healthcare systems?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	2

The health impacts of extreme weather events are addressed to varying extents across three compulsory units in the four-year curriculum: PHR1011, PHR2041, PHR2142 and PHR3141. However, the coverage is relatively brief and primarily focuses on specific events, such as thunderstorm asthma.

- In PHR1011, topic outcome "Sources of Information & Sustainability" highlights the importance of sustainability within pharmacy practice and being able to identify ways to promote ethical use of resources. Furthermore extreme weather impacts to individual health and health systems were briefly touched on.
- In PHR2041, students participated in a compulsory interprofessional learning (IPL) activity with second-year medical students entitled "Action on Asthma". This activity focused on the management of a thunderstorm asthma emergency in a metropolitan setting. Compulsory pre-activity reading materials included a Lancet Planetary Health article that explicitly established an association between climate change and "an increasing likelihood of extreme weather events such as thunderstorms", suggesting this may contribute to a higher risk of thunderstorm asthma events. However, the IPL activity itself did not discuss this connection between climate change and thunderstorm asthma.
- In PHR2142, learning materials highlighted the indirect climate change effects due to increased frequency of extreme weather events on cardiovascular health. Including increased sedentary behaviour, reduced access to healthy foods, and psychological stress as contributors to dyslipidaemia.
- In PHR3141, the 'Antimicrobials and Antimicrobial Stewardship' topic addressed the human health impacts of extreme weather events in greater detail compared to prior units. An online learning module introduced extreme weather events as direct consequences of climate change that can negatively impact human health. The accompanying in-class workshop featured a thunderstorm asthma case, guiding students to recognise the ecological processes driving thunderstorms and their connection to the pathophysiological

mechanisms of asthma. Students were finally tasked with considering how climate change may influence the prevalence and patterns of thunderstorm asthma.

The relationship between weather and human health was also explored as elective coursework within the PHR4012 unit, specifically in the 'Quality Use of Medicines' topic. This topic was an elective, self-directed learning module available to interested fourth-year pharmacy students. Pre-reading materials and associated infographics established that climate change and weather events can increase the prevalence and severity of pre-existing health problems, and can also contribute to new health problems by exacerbating existing social determinants of health.

1.2 Does your pharmacy school curriculum address the environmental impact of medicines in terms of their pollution, ecological impact and contamination of water systems?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	3

The environmental impacts of medicines were addressed by compulsory coursework within the third-year unit, PHR3141:

- The "Antimicrobials and Antimicrobial Stewardship" topic thoroughly addressed the environmental impacts of antimicrobials. Pre-reading materials identified water, soil and air contamination occurring through the antibiotic 'life cycle', from production to excretion. The in-class workshop contained a case study focusing on the appropriate disposal of antimicrobials, emphasising its role in preventing contamination and mitigating antimicrobial resistance.

There were also opportunities for students to explore the environmental impacts of medicines through elective coursework in the PHR4012, PHR5151 and PHR5252 units.

In PHR4012:

- A unit-level learning outcome explicitly outlined the expectation that pharmacy students understand the environmental impacts of medicines across their lifecycle, as well as their role in developing strategies to minimise these impacts in future practice. The learning outcome stated: "Utilise knowledge of the medicines lifecycle and the role of pharmacists to develop strategies to help minimise the environmental impact of medicines".
- A self-directed learning topic, "Quality Use of Medicines (QUM) and Sustainable Healthcare", provided a focused exploration of the environmental impacts of medicines, extending its scope beyond antimicrobials to include all types of medicines. Two topic-level learning outcomes further elaborated on the environmental impact of medicines. These were:
    - "Examine the environmental impacts of healthcare in general and medicines use in particular", and
    - "Develop strategies to promote socially accountable stewardship of healthcare resources and minimise the environmental impact of medicines use".
- To address these learning outcomes, the content delivered within this topic was designed to resolve the following four key concept tasks:

    - How is the environment relevant to patients and professional practice?
    - What are the environmental impacts of medicines use?
    - What is the 'triple bottom line' of healthcare sustainability?
    - What can pharmacists do to minimise the environmental impact of medicines?
- These key concept tasks were addressed through an online learning module that covered the following:
    - Greenhouse gas emissions associated various medications or medication devices, such as pressurized metered dose inhalers (pMDIs).
    - Value of the Return Unwanted Medicines (RUM) Project in mitigating the safety and environmental risks associated with inappropriate medicine disposal.
    - Contamination of local water systems by commonly prescribed drugs such as antidepressants.
- The online learning module also included the International Pharmaceutical Federation (FIP) Statement of Policy, "Environmentally Sustainable Pharmacy Practice: Green Pharmacy," to further emphasise the importance of environmental stewardship within pharmacy practice at an international level.
- The online learning module involved audience to read the article Pharmacists as environmental stewards: Strategies for minimizing and managing drug waste which highlighted the role of pharmacists in managing drug waste
- A structured case study focused on the setting of asthma management explicitly explored the harm caused by chlorofluorocarbon (CFC) and hydrofluorocarbon (HFC) propellants within pressurised metered dose inhalers (pMDIs) to the ozone layer. In the corresponding webinar sessions, students were tasked with proposing various strategies to minimize this impact, including switching patients from pressurised metered dose inhalers (pMDIs) to dry powder inhalers (DPIs), improving inhaler technique, and utilising the RUM Project to responsibly destroy pMDIs.

In the PHR5151 and PHR5252 units,

- Two student teams investigated barriers to adopting environmentally sustainable practices (ESPs) in the community pharmacy sector and developed practical toolkits designed to support community pharmacists in implementing these practices.

1.3 Does your pharmacy school curriculum address the health effects of pharmaceutical industry- and manufacturing-related environmental toxins?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	1

The environmental toxins associated with the pharmaceutical industry and pharmaceutical manufacture were explicitly addressed in only one unit of the pharmacy curriculum, the elective PHR4012. There is limited discussion of the associated human health impacts in compulsory coursework, however students may investigate this relationship further through self-directed research projects in the Inquiry and Innovation units, PHR5151 and PHR5252. Within these research-focused units, students may elect to conduct and/or present research on the health effects of the pharmaceutical industry and pharmaceutical manufacture.

In PHR4012, pre-reading materials within the elective "Quality Use of Medicines (QUM) and Sustainable Healthcare" topic specifically addressed greenhouse gas emissions and the contamination of natural waterways as key consequences of pharmaceutical industry activities.

- The topic explicitly outlined the expectation that pharmacy students understand the environmental impacts of medicines **across their lifecycle**, as well as their role in developing strategies to minimise these impacts in future practice. The learning outcome reads: "Utilise knowledge of the medicines lifecycle and the role of pharmacists to develop strategies to help minimise the environmental impact of medicines".
- An online learning module within the topic provided an in-depth examination of environmental toxins associated with medicine manufacture. Specifically, students were tasked with reading an article that discussed the environmental impact of producing 100 mg of morphine, encompassing "All aspects of morphine production from poppy farming, pelletising, bulk morphine manufacture through to final formulation". While the article predominantly focused on greenhouse gas emissions and water usage associated with the physical lifecycle of morphine, it also briefly introduced environmental toxins such as sulfuric acid and made reference to pesticide and fertiliser manufacture.
- Furthermore, the online learning module explored the contribution of the pharmaceutical industry to total healthcare-related greenhouse gas emissions in Australia.

1.4. Does your pharmacy school curriculum address the carbon footprint of healthcare systems?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	1

A review of the core pharmacy curriculum across Years 1 to 4 identified no compulsory units that explicitly address the carbon footprint of healthcare systems. While greenhouse gas emissions are briefly discussed within PHR3141, the concept of a "carbon footprint" and the quantification of emissions in terms of carbon dioxide equivalents are not explicitly introduced in any compulsory coursework.

The carbon footprint of healthcare systems is addressed only within elective coursework. The elective topic "Quality Use of Medicines (QUM) and Sustainable Healthcare" within PHR4012 places a strong emphasis on the carbon footprint of global and Australian healthcare systems. As outlined in Metric 1.3, this topic includes a quantitative representation of total greenhouse gas emissions associated with the Australian healthcare system and identifies the major contributors, including public hospitals, private hospitals, and pharmaceuticals.

Within the online learning module, students are encouraged to complete an optional self-directed activity involving the reading "The carbon footprint of Australian health care" by Malik et al., which quantifies total healthcare-related greenhouse gas emissions in Australia and identifies the sectors contributing most significantly to Australia's healthcare carbon footprint.

To further support self-directed learning on strategies to mitigate healthcare-associated emissions both locally and globally, students are provided with additional resources, including the Global Road Map for Health Care Decarbonisation Executive Summary by Health Care Without Harm and the Delivering a Net Zero NHS report by NHS England.

As the carbon footprint of healthcare systems is addressed only within elective coursework, this metric meets the criteria for coverage in elective coursework, resulting in a score of 1 point.

1.5. Does your pharmacy school curriculum address the impact of climate change on the changing patterns of infectious diseases and increased antimicrobial resistance?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	3

The impact of climate change on the changing patterns of infectious diseases and increased microbial resistance are integrated across both compulsory and elective units. The curriculum combines foundational theory and applied learning to ensure students understand the mechanism driving such changes and the roles of pharmacists in responding through antimicrobial stewardship and sustainable healthcare practices.

The compulsory PHR3141 unit in the pharmacy curriculum provides a sustained examination of the relationship between climate change, infectious disease patterns, and antimicrobial resistance (AMR). This connection is introduced in the compulsory topic entitled ‘Antimicrobials and Antimicrobial Stewardship’ and is reinforced throughout all subsequent compulsory topics in the unit.

The ‘Antimicrobials and Antimicrobial Stewardship’ unit outlines the learning outcome “Appreciate how climate change, nature and biodiversity loss and waste and pollution can exacerbate the development, transmission and spread of antimicrobial resistance.”, which is addressed through a dedicated online learning module and interactive in-class workshop.

Planetary health was explicitly introduced as a guiding framework to illustrate the deep interconnections between climate change and infectious diseases. The online learning module emphasised how extreme weather events, rising global temperatures, and other anthropogenic environmental changes contribute to the increasing prevalence of infectious diseases.

The primary focus of the curriculum, however, was on AMR as a pressing planetary health challenge. Pre-reading materials detailed how antibiotics enter aquatic and terrestrial ecosystems, bioaccumulate, and contribute to the development and spread of AMR. Key resources included direct quotes and visuals from the United Nations Environment Programme, framing AMR as part of the broader triple planetary crisis of climate change, biodiversity loss, and pollution.

The associated workshop activities emphasized actionable strategies for pharmacists to integrate planetary health principles into managing infectious diseases and antimicrobial stewardship (AMS) practices. For instance, students counseled a simulated patient on the safe and appropriate disposal

of antibiotics, highlighting the environmental and public health risks of improper disposal. Another case study tasked students with identifying the risks of antibiotic overprescribing, reinforcing their role in promoting sustainable AMS practices.

The impact of climate change on patterns of infectious diseases is explicitly addressed within the PHR4012 unit through the elective topic "Quality Use of Medicines (QUM) and Sustainable Healthcare." An online learning module uses an infographic to illustrate the link between climate change and infectious diseases, and further explains antimicrobial resistance as a form of ecological change. Antimicrobial resistance is explored in greater depth in the associated webinar, which employs a case study to prompt students to to recognise antimicrobial resistance as a direct consequence of antibiotic overuse.

1.6. Does your pharmacy school curriculum address the respiratory health effects of climate change and air pollution?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	2

The respiratory health effects of climate change and air pollution are included to varying degrees within the compulsory units PHR2041 and PHR3141. Furthermore elective study is available within PHR4012.

- In PHR2041, the connection between respiratory diseases and air pollution was integrated throughout multiple topics. The 'Upper respiratory tract disorders' topic listed airborne pollutants (including perfumes, paint and other industrial fumes, dust, and irritants in tobacco smoke such as acrolein and nicotine) as known triggers of cough receptors in the throat and trachea, and thus possible causes of vasomotor rhinitis. The 'Chronic Obstructive Pulmonary Disease' topic described exposure to "cigarette smoke, occupational dust and chemicals, environmental tobacco smoke [and] indoor and outdoor pollution" as a significant risk factor for COPD, and subsequently tasked students with identifying and optimising exposures. Furthermore, additional optional readings included the COPD-X plan which explored environmental risk factors of COPD as well as the impact of inhaler devices on the environment.
- In PHR3141, the 'Antimicrobials and Antimicrobial Stewardship' topic introduced declining air quality as a consequence of climate change and possible cause of respiratory disease. The online learning module briefly highlighted respiratory diseases as a public health concern exacerbated by environmental changes, and the accompanying in-class workshop explored this further through a thunderstorm asthma case. This activity tasked students to consider how climate change may influence the prevalence and patterns of thunderstorm asthma.
- The respiratory health impacts of air pollution are addressed in the PHR4012 elective topic "Quality Use of Medicines (QUM) and Sustainable Healthcare." A case study explores worsening asthma control in a patient exposed to smoggier urban air, supported by an infographic linking climate change, air pollution, and cardiorespiratory disease. This is reinforced by pre-reading materials that include an article outlining the respiratory health impacts of bushfire smoke, as well as an optional online activity using the Better Health

Channel article "Smoke and your health," which describes how fire smoke worsens asthma and harms respiratory health.

1.7. Does your pharmacy school curriculum address the cardiovascular health effects of climate change, including increased heat?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	1
The impact of climate change is briefly highlighted within the elective PHR2142 coursework, in which air pollution, climate extremes and limited green space are all identified as risk factors for hypertension. The associated online learning module encourages the use of health strategies which combat climate change at its root whilst also reducing cardiovascular disease progression. Such strategies include advocacy for clean air regulations, emission reductions, and promotion of renewable energy, as well as active forms of transport, avoidance of irritant exposure and staying informed about extreme weather events. A Heart Foundation article on the Environment, climate change and heart health was provided, with links to climate change advocacy websites. However, this reading did not form a part of the core curriculum.	

1.8. Does your pharmacy school curriculum address the relationship between climate change and allergies?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	2
The impact of climate change on atopic conditions is only briefly addressed as a part of compulsory coursework within the PHR2041 unit, in which the interprofessional learning (IPL) workshop entitled "CCC Intermediate IPL - Action on Asthma" utilised a clinical case of a thunderstorm asthma emergency to explore the relationship between environmental change and allergic disease. The compulsory pre-reading task for this activity linked an article which explicitly establishes an association between climate change and aeroallergens, as well as that between climate change and extended pollen seasons on a global scale. However, these connections were not explored further within the activity itself and, as a result, may not have been clearly recognised by all students. This connection is reintroduced by the compulsory online learning module within the "Antimicrobials and Antimicrobial Stewardship" topic of the PHR3141 unit. Pre-reading materials and accompanying infographics establish "increasing allergens" as a consequence of anthropogenic	

change, and therefore frame respiratory allergies and asthma as a human health impact of climate change. This connection is reinforced by the thunderstorm asthma case in the accompanying workshop.

Similar concepts are also reinforced by the elective topic entitled "Quality Use of Medicines (QUM) and Sustainable Healthcare" and delivered within the PHR4012 unit. The online learning module features an infographic that explicitly links climate change with aeroallergens, and subsequently with cardiorespiratory disease.

1.9. Does your pharmacy school curriculum address the mental health and neuropsychological effects of environmental degradation and climate change?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	0
The mental health and neuropsychiatric effects of environmental degradation and climate change are not addressed within compulsory or elective coursework over the four-year degree. In the compulsory "Antimicrobial and Antimicrobial Stewardship" topic of the PHR3141 unit, the online learning module contains an infographic identifying "mental health impacts" as a consequence of both extreme weather events and environmental degradation. Similarly, the elective "Quality Use of Medicines (QUM) and Sustainable Healthcare" topic of PHR4012 also contains an infographic that identifies "impacts on mental health" of climate change more broadly. However these ideas are not explored further, and are not included as assessable coursework in either unit.	

1.10. Does your pharmacy school curriculum address the unequal regional health impacts of climate change nationally and globally, including the impact of social inequality?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	1
No curriculum content within the compulsory coursework was identified as supporting this metric. The PHR4042 unit includes two compulsory topics, "Indigenous Health" and "Rural Health," both of which thoroughly address social determinants of health. This includes structured teaching on health inequities affecting key populations, such as Indigenous Australians and those living in rural and remote areas of Australia. While environmental concerns are acknowledged, climate change and its unequal regional health impacts are not explicitly addressed. The associated Health	

Promotion Proposal assignment requires students to consider a range of accessibility, affordability and cultural barriers to healthcare in rural and regional areas of Australia, and to develop strategies to overcome these. However, environmental and climate-related considerations are not central to the project and are not reflected in the assessment instructions or rubric.

In contrast, elective coursework provides some coverage of the unequal regional health impacts of climate change, both nationally and globally, with a particular emphasis on social inequality. Within PHR4012, the elective topic "Quality Use of Medicines & Sustainable Healthcare" includes a single interactive webinar exploring concepts such as climate justice and the complex relationship between climate change and social inequalities. The webinar explains that climate change exacerbates social inequalities because its health impacts disproportionately affect those with limited resources to either mitigate or recover from these effects.

1.11 Does your pharmacy school curriculum address the relationship between climate change and social determinants of health (e.g., reduced nutritional value of food)?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	1

A review of the core pharmacy curriculum across Years 1 to 4 identified no compulsory units that explicitly address the relationship between climate change and social determinants of health. While social determinants of health are consistently emphasised and integrated across multiple units throughout the four-year curriculum, their direct relationship with climate change is not covered within compulsory coursework.

This relationship is explored only within elective coursework. The elective topic "Quality Use of Medicines (QUM) and Sustainable Healthcare" within PHR4012 explicitly identifies environmental damage and climate change as social determinants of health, as well as factors that can themselves influence other social determinants of health. An integrated online webinar explains that climate change can directly harm health by increasing the prevalence and severity of existing health conditions and can indirectly worsen social determinants such as income, access to healthcare, and living conditions, contributing to the development of new health conditions. The accompanying online learning module further reinforces this relationship through introduction of the triple bottom line sustainability framework, highlighting the intersection between environmental, social, and economic predictors of health.

As the relationship between climate change and social determinants of health is addressed only within elective coursework, this metric meets the criteria for coverage in elective coursework, resulting in a score of 1 point.

1.12. Does your pharmacy school curriculum address the environmental and health co-benefits of a plant-based diet?

This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	1

A review of the core pharmacy curriculum across Years 1 to 4 identified no units that explicitly address the environmental and health co-benefits of a plant-based diet. Core units did not contain relevant learning activities, teaching materials or assessment content related to this metric.

The only identified reference to this topic occurs in PHR3141 topic "Antimicrobials and Antimicrobial Stewardship", where the planetary health diet is included in pre-reading materials. These materials describe the planetary health diet as a plant-forward dietary pattern and reference both environmental and health co-benefits. A hyperlink to external resources is provided for additional information. No workshops, assessments or other structured learning activities within PHR3141 were identified that addressed counselling, application or evaluation of the planetary health diet.

As the environmental and health co-benefits of a plant-based diet are addressed only within pre-reading materials in a single unit and are not included elsewhere in the curriculum, this metric meets the criteria for coverage in elective coursework, resulting in a score of 1 point.

1.13. Does your pharmacy school curriculum cover these components of sustainable clinical practice? (1 point each)	**Score**
Waste production within the healthcare system and strategies for reducing waste in clinical activities such as single use plastic and packaging. (1 point)	1
Patient counselling on safe disposal of medications. For example, what can be disposed of and how to locate recycling schemes, in addition to certain drugs or drug classes that are most important to dispose of properly (e.g. hormonal contraceptives, drugs that are excreted unchanged/active metabolites). (1 point)	1
The impact of extreme heat, on patients on medications which can interfere with thermoregulation. (1 point)	0
The impact of anaesthetic gases on the healthcare carbon footprint. (1 point)	0
The environmental impact of pharmaceuticals and over-prescribing as a cause of climate health harm. Alternatively, teaching on de-prescribing where clinically appropriate and its environmental and health co-benefits would fulfil this metric. (1 point)	1
The health and environmental co-benefits of non-pharmaceutical management of conditions where appropriate such as exercise or yoga classes for type 2 diabetes; social group activities such as gardening for mental health conditions; active transport such as	1

bicycle schemes for obesity. This is commonly known as social prescribing in the UK. (1 point)	
The impact and benefits of benign by design pharmaceuticals through exploring medicinal chemistry concepts and/or discussing implications of excretion of active metabolites/unchanged drug products on ecological system. (1 point)	0

Item #1

- Waste production within the healthcare system, and strategies for health professionals to reduce waste, were not explicitly addressed in any compulsory coursework across the four-year pharmacy curriculum. However, these issues were explored in substantial depth through elective learning pathways in the final year of the degree, including student-led research projects and the elective topic “Quality Use of Medicines & Sustainable Healthcare” within the PHR4012 unit.
- The “Quality Use of Medicines & Sustainable Healthcare” elective topic placed a strong emphasis on waste generation, with a guiding topic-level learning outcome establishing the expectation that pharmacy students “Develop strategies to promote socially accountable stewardship of healthcare resources and minimise the environmental impact of medicines use”. Waste generation within the pharmacy sector was introduced in an online learning module, with the professional responsibility of pharmacists to minimise waste reinforced through prescribed readings, including the International Pharmaceutical Federation (FIP) Statement of Policy, Environmentally Sustainable Pharmacy Practice: Green Pharmacy. The associated online webinar expands on these concepts by highlighting medication packaging, medical device waste, and paper waste generated through routine activities in the community pharmacy setting. Existing waste-reduction systems and programs available to practising pharmacists in Australia are outlined to encourage practical action, including recycling solutions for complex materials such as blister packs and Webster packs, which combine plastic and foil components.
- Two student-led research projects within the PHR5151 and PHR5252 units also examined the environmental impact of community pharmacy practice, similarly addressing waste generated during routine clinical activities such as medication dispensing. One group subsequently developed a practical toolkit to support community pharmacists in implementing environmentally sustainable practices (ESPs) in the workplace. The toolkit proposed strategies to improve waste management, including separating recyclable materials; recycling blister packs, Webster packs, medication packaging, and delivery boxes; and reducing paper use through electronic workflows and the avoidance of unnecessary printing.

Item #2

- Strategies to support and facilitate patient counselling on the safe disposal of antimicrobials, particularly antibiotics, are integrated throughout compulsory coursework in the PHR3141 unit. The 'Antimicrobials and Antimicrobial Stewardship' topic provides an introduction to the interconnected environmental and health impacts of improper antibiotic disposal, such as discarding them in household landfill or flushing them down the toilet. Pre-reading materials offer an explanation of how such antibiotics enter aquatic and terrestrial ecosystems, where they can bioaccumulate and eventually contribute to the development and spread of antimicrobial resistance (AMR). Throughout all subsequent topics, students were encouraged to incorporate specific instructions on the safe disposal of antibiotics, such as using the Return Unwanted Medicines (RUM) program, into their patient counselling sessions. This skill of counselling on the safe disposal of antibiotics was then explicitly evaluated in the final examination.
- Further strategies for patient counselling on the safe disposal of medicines were addressed as elective coursework within the “Quality Use of Medicines & Sustainable Healthcare” in

the PHR4012 unit. As highlighted in previous metrics, both the online learning module and associated webinar emphasised the safety and environmental risks associated with improper medicine disposal. Beyond raising awareness, these learning activities provided explicit and practical guidance on how pharmacists can access, introduce and maintain medication recycling schemes across both hospital and community settings. Specifically, the online learning module includes prescribed reading on the Return Unwanted Medicines (RUM) program, which outlines the standard system for disposal of medicines through community pharmacies. This is complemented by an additional article, entitled "Pharmacists as environmental stewards: Strategies for minimizing and managing drug waste", which reinforces the tangible impact that pharmacists can have through patient engagement. The associated webinar consolidates these teachings by providing a dedicated forum for students to discuss patient counselling on safe disposal practices, including the management of unconventional medicines such as pMDI canisters

Item #5

- The negative environmental impacts of over-prescribing were addressed by compulsory coursework in the PHR3141 unit; however, this coverage was solely restricted to the over-prescribing of antimicrobials in the management of infectious diseases. An online learning module within the "Antimicrobials and Antimicrobial Stewardship" topic introduced the environmental and health co-harms associated with unnecessary or excessive antimicrobial prescribing. In particular, it emphasised antimicrobial resistance (AMR) as a direct consequence of inappropriate antimicrobial use, posing harms to both patients (e.g. drug-resistant infections) and the environment (e.g. antimicrobial contamination of waterways and soil). In the context of infectious diseases, antimicrobial over-prescribing was therefore framed as including prescribing in the absence of therapeutic need, the use of excessively broad-spectrum agents, and unnecessarily prolonged treatment durations. Building on these concepts, lectures and in-person workshops provided explicit teaching on de-prescribing and de-escalation as key antimicrobial stewardship (AMS) strategies with tangible benefits for both human and environmental health. Structured case studies across hospital and community settings provided students with repeated opportunities to apply AMS principles by optimising antimicrobial regimens to ensure antimicrobials are used only when clinically indicated and, when required, that the narrowest-spectrum agent is selected and prescribed for the shortest appropriate duration.
- The environmental and health co-benefits of de-escalating and de-prescribing antimicrobial regimens were further reinforced by the elective topic "Quality Use of Medicines & Sustainable Healthcare" within the PHR4012 unit. A structured case study required students to identify the use of antimicrobials for an inappropriate indication and an excessively prolonged duration, prompting the application of both de-prescribing and de-escalation as appropriate AMS interventions. The associated webinar expanded on the value of these de-prescribing principles by outlining practical strategies for pharmacy practice, including confirming a therapeutic need prior to dispensing 'repeats' for antimicrobials, conducting regular medication reviews to identify opportunities for evidence-based deprescribing, and limiting the sale of complementary and over-the-counter medicines unless a clear therapeutic indication and supporting evidence exists.

Item #6

- The 2025-2026 period saw significant improvements in teaching on the health and environmental co-benefits of non-pharmacological management of chronic health conditions. Compulsory coursework across all Comprehensive Care and Professional Practice units in the four-year curriculum continued to emphasise the value of non-pharmacological interventions for optimal health outcomes. Building on this, new content was introduced this year to specifically explore the environmental benefits of these

interventions. This content was most prominent in the Hypertension topic within the PHR2142 unit. The online learning module featured a dedicated section on the interconnection between anthropogenic change and hypertension, with subheadings including "Environmental factors affecting elevated blood pressure and long term cardiovascular risks" and "Strategies to mitigate environmental factors that contribute to high BP". The content explicitly identified air pollution, extreme temperatures and highly urbanised living environments as environmental factors that predispose individuals to elevated blood pressure and increase long-term cardiovascular risk. Subsequent sections outlined non-pharmacological interventions that not only improve blood pressure control and lower lifetime cardiovascular risk, but also help mitigate these environmental risk factors. Key recommendations included active transport strategies such as walking to school or work (instead of driving) and cycling in low-traffic areas. These interventions were complemented by advocacy for broader environmental health measures, including supporting clean air regulations, reducing emissions, and promoting renewable energy initiatives.

- The PHR2142 unit also equipped pharmacy students with practical strategies to help patients understand the environmental and health co-benefits when being counselled on non-pharmacological interventions. The online learning module included a prescribed reading, entitled "Environment, Climate Change and Heart Health", by the Heart Foundation, which explores the connection between climate change and cardiovascular health in patient-friendly language. This reading was applied in associated workshops, where students were increasingly observed incorporating the environmental benefits of non-pharmacological interventions as a persuasive point during motivational interviewing roleplays.

1.14. Does your pharmacy school curriculum discuss the environmental implications of various dosage forms, medication delivery devices, and/or excipients?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	2

The environmental impacts of specific dosage forms, medication delivery devices, and excipients were addressed sporadically and with limited depth across compulsory coursework throughout the four-year curriculum. These topics were not formally assessed, integrated into a cohesive theme, or given a defined role within the curriculum.

Elective coursework, however, offered a sustained and comprehensive exploration of the environmental implications of inhaled devices, such as pressurized metered-dose inhalers (pMDIs) and dry powder inhalers (DPIs). These issues were addressed within the elective 'Quality Use of Medicines (QUM) and Sustainable Healthcare' topic in the PHR4012 unit. In this topic, a structured case study on asthma management explicitly explored the harm caused by chlorofluorocarbon (CFC) and hydrofluorocarbon (HFC) propellants within pressurised metered dose inhalers (pMDIs) to the ozone layer. In the corresponding webinar sessions, the environmental impact of pMDIs was quantified through discussion of an article that compared the carbon footprint of a single dose (two puffs) of a pMDI with that of an average trip in a typical petrol car. Students

were then tasked with proposing various strategies to minimize this impact, including switching patients from pressurized metered dose inhalers (pMDIs) to dry powder inhalers (DPIs), improving inhaler technique, and utilising the RUM Project to responsibly destroy pMDIs.

1.15. In training for patient communication, does your pharmacy school's curriculum introduce strategies for having conversations with patients about the health effects of climate change?

Yes, there are clear and detailed strategies introduced for having conversations with patients about climate change in the core curriculum (3 points)

Yes, having conversations with patients about climate change is briefly mentioned in the core curriculum. (2 points)

Yes, there are some examples of having conversations with patients about climate change in elective coursework. (1 point)

No, there are no strategies or examples for having conversations with patients about climate change (0 points)

Score Assigned:	2

Content relevant to patient communication about environmental and climate-associated health factors was identified in a limited number of core units. In the PHR2142 unit, environmental factors including air pollution, climate extremes and urban environments within limited green space are included as risk factors for hypertension. A dedicated page addresses environmental contributors to elevated blood pressure and outlines mitigation strategies such as advocacy for clean air regulations, emission reductions, promotion of renewable energy, and encouragement of active transport. An external Heart Foundation resource regarding this metric was also referenced in the content.

Based on documented observations from teaching staff, students were noted to incorporate planetary health concepts during patient counselling in activities and motivational interviewing sessions.

In the PHR3141 unit, a thunderstorm asthma workshop required students to explain the condition in patient-friendly language and recommend non-pharmacological risk-reduction strategies. The link between climate change and health effects was not explicitly assessed.

No additional units were identified as including structured training on communicating the health effects of climate change to patients. As coverage is present but limited, this metric meets the criteria for brief coverage, resulting in a score of 2 points.

1.16. Does your pharmacy school curriculum guide students to consider the environmental impact of medications as a factor in addition to safety, efficacy, cost, and pill burden when comparing equivalent therapies?

This topic was explored **in depth** by the **core** curriculum. (3 points)

This topic was **briefly** covered in the **core** curriculum. (2 points)

This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	2

The growing emphasis on sustainability and planetary health within the compulsory Comprehensive Care units of the four-year pharmacy degree has resulted in increased consideration of environmental impact as an important factor in therapeutic decision-making.

In particular, the Comprehensive Care unit PHR2142 includes brief teachings on the environmental impacts of various pharmacological and non-pharmacological therapies throughout its online learning modules. During associated applied workshops, students are increasingly observed to consider environmental impacts when weighing the advantages and disadvantages of equivalent therapies and to incorporate this information when developing medication management plans for assigned case studies. However, this consideration is not an explicit expectation of the task, nor is it reflected in the task instructions or rubric. There is significant potential to expand this focus by creating a designated section for environmental impacts alongside factors such as safety, clinical necessity, efficacy and accessibility when developing medication management plans.

The only explicit teaching on integrating environmental impact into therapeutic decision-making is provided in the elective topic "Quality Use of Medicines & Safety in Healthcare" within PHR4012. This topic includes an interactive webinar that uses asthma management as a case study to explore this approach in depth. While online learning modules provide teaching on the environmental impacts of pressurised metered dose inhalers (pMDIs), the webinar encourages students to compare pMDIs with dry powder inhalers (DPIs) as equivalent therapies, highlighting that DPIs offer comparable efficacy with substantially lower greenhouse gas emissions. In an associated activity, many students apply this knowledge by identifying that switching a patient from a pMDI to a DPI inhaler is a practical strategy pharmacists can implement to reduce the environmental impact of inhaler devices. These learnings are reinforced through discussion of a European Medical Journal article introducing the "Assess, choose, and train (ACT) algorithm" for selecting inhaler devices, with particular attention to "Environmental Impact" as a key element of therapeutic decision-making. Furthermore, the topic also introduces the 'triple bottom line' framework to guide students to consider the combined social, economic and environmental impacts of therapies, thereby presenting environmental factors as equally important as cost and patient considerations in healthcare.

1.17. Is your pharmacy school currently in the process of implementing or improving Education for Sustainable Healthcare (ESH)/planetary health education?
Yes, the school is currently in the process of making major improvements to ESH/planetary health education. (4 points)
Yes, the school is currently in the process of making minor improvements to ESH/planetary health education. (2 points)
No, there are no improvements to planetary health education in progress. (0 points)

Score Assigned:	4

Over the 2025-2026 period, improvements in planetary health education have been demonstrated across three key areas: consolidating and expanding prior curriculum changes, introducing more consistent and cumulative planetary health education, and strengthening foundations to support future expansion.

Consolidating and expanding prior curriculum changes

Notably, the 2024 academic year marked the introduction of a co-designed planetary health curriculum within the infectious diseases topic of the PHR3141 unit, and this momentum was consolidated and further expanded during the 2025 academic year. The curriculum was retained in its entirety, with its relevance to pharmacy practice and clinical decision-making further strengthened through the introduction of a new topic-level learning outcome. The learning outcome - "Appreciate how climate change, nature and biodiversity loss and waste and pollution can exacerbate the development, transmission and spread of antimicrobial resistance" - explicitly affirms the importance of planetary health in the quality and effective use of antimicrobial drugs.

Consistent with publication plans described in the previous report card, the pedagogical efficacy of this curriculum was examined using a mixed-methods case study methodology, with the study published in *Innovations in Education and Teaching International* in November 2025. Importantly, the findings demonstrated that students engaged with new planetary health concepts, retained knowledge and reported attitudinal shifts regarding their professional responsibility and capacity to promote planetary health in pharmacy practice. In particular, practical actions such as minimising medication waste, utilising environmentally preferable products, and avoiding unnecessary medicine use were consistently retained. These findings provide a strong rationale for the continued inclusion of the co-designed curriculum within the infectious diseases topic.

However, the evaluation also identified areas for further development. Students experienced difficulty linking antimicrobial resistance to broader issues of equity, accessibility, and the social and environmental determinants of health. These findings should guide ongoing curriculum refinement, highlighting the need for deeper integration of social justice and systems-based perspectives.

Introducing more consistent and cumulative Planetary Health Education

Informed by recommendations from the previous report card, a strategic effort has been undertaken to ensure planetary health education is delivered in a consistent and cumulative manner across all four years of the pharmacy degree. During the 2025 academic year, this was achieved through the introduction of new unit-level and topic-level learning outcomes that explicitly position planetary health and sustainable healthcare as core competencies for pharmacy practice. Examples include:

- PHR1011: *"Describe the role of sustainability in the context of pharmacy practice, and identify ways to promote ethical use of resources."*
- PHR3141: *"Appreciate how climate change, nature and biodiversity loss, and waste and pollution can exacerbate the development, transmission and spread of antimicrobial resistance."*
- PHR4012: *"Utilise knowledge of the medicines lifecycle and the role of pharmacists to develop strategies to help minimise the environmental impact of medicines."*

In addition, student-led research projects undertaken across the final two Inquiry units (PHR5151 and PHR5252) increasingly focused on environmental stewardship and sustainable healthcare. Many of these projects demonstrate longitudinal development, with cohorts building on earlier work each semester, reinforcing planetary health as an ongoing and evolving concern rather than a discrete topic. A clear example from the 2025 academic year involved an initial research project investigating the motivators and barriers to community pharmacists implementing environmentally sustainable practices (ESPs). This was followed by a subsequent project that developed a toolkit in direct response to these findings, aimed at raising public awareness and supporting pharmacists to implement ESPs more easily. The collective outcomes of this work were presented in a poster entitled "Pharmacists and environmental responsibility: Embracing opportunities, overcoming challenges and making it sustainable through education" at the FIP World Congress of Pharmacy and Pharmaceutical Sciences (FIP Copenhagen 2025), with the abstract published in *Pharmacy Education*. There are plans for future cohorts to build upon this work by evaluating the implementation of the toolkit within local community pharmacy settings. These student-led research activities demonstrate a growing emphasis on not only the teaching of planetary health concepts, but also actively involving students in developing and disseminating practical solutions to planetary health challenges within the pharmacy workforce. This approach transforms planetary health from a theoretical concept into applied action that is researched, shared with the broader professional community, and ultimately leveraged to deliver tangible benefits for patients.

Strengthening foundations to support future expansion

During the 2025 academic year, targeted efforts were undertaken to strengthen the resources required to support the ongoing and sustainable expansion of planetary health education within the pharmacy degree. These efforts resulted in the successful award of an Education Research Grant for the Faculty of Pharmacy and Pharmaceutical Sciences, Monash University. This grant has been secured specifically to enhance the quality, depth and reach of planetary health and sustainability-related education across the pharmacy curriculum. Structured evaluations of educational impact, together with expert input from the Monash Sustainable Development Institute, will guide and support ongoing curriculum development. Further planned developments include the integration of planetary health concepts as assessable content within examinations, reinforcing planetary health as a core competency for pharmacy graduates. The successful acquisition of this grant reflects the faculty's commitment to the continued growth of planetary health education in the years ahead.

1.18. Does your pharmacy school have a member of faculty to incorporate planetary health and sustainable healthcare as a theme throughout the curriculum?
Yes, there is/are a member(s) of faculty whose role is directly responsible for the incorporation of planetary health and sustainable healthcare as a theme throughout the curriculum (4 points)
Yes, there is/are member(s) of faculty who are incorporating planetary health and sustainable healthcare as a theme throughout the curriculum as well as doing their principle role (2 points)
There are no members of faculty who are incorporating planetary health and sustainable healthcare as a theme throughout the curriculum (0 points)

Score Assigned:	4

The Faculty of Pharmacy and Pharmaceutical Science has appointed an academic staff member, Suzanne Caliph, to serve as Sustainability Education Lead alongside her primary academic role. As the Sustainability Education Lead, she works collaboratively with faculty academics and pharmacy students to embed planetary health education and sustainable healthcare principles across the pharmacy curriculum.

In addition to the Sustainability Education Lead, multiple academic staff within the faculty are also engaged in advancing planetary health and sustainable healthcare content in the curriculum. At least four faculty members have contributed to the development of learning and teaching resources, while also supporting student-led initiatives and co-design activities.

This year, Suzanne Caliph, alongside several other academic faculty members, have successfully secured an Education Research Grant for the Faculty of Pharmacy and Pharmaceutical Sciences, Monash University. The grant will support the expansion and strengthening of planetary health and sustainable healthcare education within the faculty through the development of sustainability-focused teaching and learning materials, alongside research to evaluate their educational outcomes and impact.

1.19. Does your pharmacy school curriculum offer clinical practice experiences (for example, IPPE/APPE rotations in the U.S. or placement opportunities in the UK) that allow for the exploration of planetary health topics?

There are multiple clinical practice experiences/placements that allow for direct exposure to planetary health topics. (3 points)

There is one available clinical practice experience/placement that allows for direct exposure to planetary health topics. (2 points)

There are available clinical practice experiences/placements that allow for indirect exposure to planetary health topics. (1 point)

No, there are no such clinical practice experiences/placements available through the pharmacy school. (0 points)

Score Assigned:	1

Within the hospital and community-based clinical experiential placements offered to second-, third- and fourth-year pharmacy students, there are opportunities to explore antimicrobial stewardship (AMS), a key planetary health topic. Students may be exposed to AMS programs and processes operating at their placement sites, including participation in AMS education activities, AMS program management, or discussions of antimicrobial prescribing decisions with other health practitioners. Importantly, AMS is formally recognised within the student experiential placement unit as an Entrustable Professional Activity (EPA) in both hospital and community settings. This means that student engagement with AMS is acknowledged and valued as part of clinical training, although the exact experiences gained are site- and preceptor-dependent. Exposure is encouraged wherever possible, but is not currently a guaranteed component of all placements.

To strengthen the integration of planetary health into clinical practice experiences, AMS programs and processes could be established as a core clinical activity for placements. This would ensure that

all students gain at least some direct experience with AMS, shifting it from a recommended exposure to an expected and supported component of experiential learning.

A score of 1 is awarded to reflect that while multiple clinical practice placements offer opportunities for students to engage with planetary health topics such as AMS, the extent to which students actually gain this exposure is highly dependent on the resources and capacity of the placement site and preceptor. Consequently, direct exposure is not consistently available to all students.

1.20. Does your pharmacy school curriculum acknowledge a disparity in the effects of climate change? Specifically, does your curriculum address groups more vulnerable to environmental impacts, such as BIPOC, immigrant groups, low income populations, children, elderly, persons with disabilities, persons with pre-existing or chronic medical conditions?

This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	1

The disparities in the health effects of climate change are notably absent from the compulsory coursework of the four-year pharmacy degree. Although many of the marginalized communities listed in this metric are consistently identified as experiencing health inequalities, this is never linked to their disproportionate vulnerability to the health impacts of climate change. This represents a significant gap in the planetary health curriculum, highlighting the need for social justice considerations to be better integrated in future curriculum design.

This metric is addressed exclusively as elective coursework within the “Quality Use of Medicines & Sustainable Healthcare” topic in the PHR4012 unit. The online learning module introduces the concept that populations already experiencing health inequities are disproportionately impacted by climate change, stating “environmental damage and climate change can therefore amplify existing health inequities”. However, specific minority groups or health inequities are not identified. Younger and elderly populations are implicitly positioned as vulnerable through the question, “Is environmental damage that is happening now also creating health inequities between current and future generations?”, however the teaching materials do not explore this idea further. Low-income populations are similarly referenced in the accompanying online webinar, where the lecturer explains that the health effects of climate change disproportionately affect those with limited resources to either mitigate or recover from these effects, including limited financial resources.

Although such vulnerable groups are mentioned indirectly, the webinar places strong emphasis on Indigenous Australians. The lecturer frames colonization as a potential driver of anthropogenic change and highlights that Indigenous knowledge systems have long included sophisticated understandings of the relationship between the environment and human health. This discussion ultimately presents climate justice for Indigenous peoples as a high-priority focus for planetary

health action on both a national and global scale. However, BIPOC, immigrant groups and persons with disabilities are not represented in the elective coursework. Further improvements are necessary to explicitly include these groups, with attention to the specific factors that make them more vulnerable to climate change.

1.21. Does your health professional curriculum include teaching on civic engagement/advocacy to address the environmental and structural determinants of health?	
This topic was explored **in depth** by the **core** curriculum. (3 points)	
This topic was **briefly** covered in the **core** curriculum. (2 points)	
This topic was covered in **elective** coursework. (1 point)	
This topic was **not** covered. (0 points)	
Score Assigned:	0
No curriculum content was identified to support this metric. While the social determinants of health - and, to a lesser extent, environmental determinants of health - are addressed throughout the pharmacy degree, neither compulsory nor elective coursework explicitly links these topics to civic engagement. Teachings on civic health are notably absent, as are any civic advocacy initiatives targeted at the student body.	

Section Total (38 out of 69)	**55.07%**

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Interdisciplinary Research

Section Overview: ***This section evaluates the quality and quantity of interdisciplinary planetary health research at the broader institution.*** *Interactions between health and the environment are complex and multifactorial. While climate change has been extensively studied from an environmental science perspective, planetary health is an emerging field. As leading health institutions with talented researchers and research resources, institutions should fund research studying the health effects of climate change and anthropogenic environmental toxins. This obligation is particularly strong because the public and policymakers are more attentive to climate change when its implications for human health are emphasised.*

2.1. Are there researchers engaged in planetary health research and healthcare sustainability research at your institution?	
Yes, there are faculty members at the **institution** who have a **primary** research focus in planetary health **or** sustainable healthcare/vetcare. (3 points)	
Yes, there are individual faculty members at the **institution** who are conducting research **related** to planetary health or healthcare sustainability, OR are part of a national/international sustainability working group, but it is not their primary research focus. (2 points)	
There are sustainability researchers at the **institution**, but not specifically associated with healthcare/vetcare. (1 point)	
No, there are **no** planetary health and/or sustainability researchers at the **institution** at this time. (0 points)	
Score Assigned:	3

Monash University has multiple faculty members and dedicated research divisions whose primary research focus is planetary health and healthcare sustainability. Monash University demonstrates strong institutional engagement in planetary health and healthcare sustainability research through dedicated research leadership, formal organisational structures, and programs within its health faculties. Within the Faculty of Medicine, Nursing and Health Sciences, Monash hosts a Planetary Health Division led by two senior academics. Research undertaken within this division includes: Large-scale cohort studies examining air pollution, climate change, toxic exposures, and occupational health. There is also research being done on climate-sensitive infectious diseases, water and sanitation, antimicrobial resistance, and vector-borne disease.

Monash researchers are also actively engaged in healthcare sustainability research, including analysis of the carbon footprint of medication packaging in collaboration with hospital pharmacy departments. This work directly targets healthcare-related emissions and informs sustainable procurement practices in clinical settings.

The Department of Nutrition, Dietetics and Food has a commitment to planetary health, with a substantial proportion of departmental research activities aligned with the Sustainable Development Goals. The department maintains a Planetary Health Working Group, whose members conduct ongoing research into sustainable diets and hospital food systems.

2.2. Is there a dedicated department or institute for interdisciplinary planetary health research at your institution?	
There is **at least one** dedicated department or institute for interdisciplinary planetary health research. (3 points)	
There is **not currently** a department or institute for interdisciplinary planetary health research, but there are **plans** to open one in the next 3 years. (2 points)	
There is an **Occupational and Environmental Health department**, but no interdisciplinary department or institute for planetary health research. (1 point)	
There is **no** dedicated department or institute. (0 points)	
Score Assigned:	3

The Monash Sustainable Development Institute (MSDI) brings together interdisciplinary research expertise in behaviour change and sustainability transitions, working closely with Monash University's domain specialists as well as industry, policy, and community partners to develop actionable, evidence-based pathways for real-world transformative change. Its transdisciplinary research spans six strategic themes: climate action; environment and health; sustainable cities and regions; circular economy; inclusive prosperity; and leadership for the Sustainable Development Goals (SDGs).

To ensure long-term sustainability and stronger alignment with Monash University's research and education model, MSDI will transition from a standalone institute from 1 January 2026, with its programs and centres realigned to relevant faculties or the Deputy Vice-Chancellor (Research and Enterprise) portfolio. This evolution strengthens integration across the University while maintaining MSDI's core mission and impact.

Complementing this work, Monash's Planetary Health Research is embedded within the Faculty of Medicine, Nursing and Health Sciences, including the Planetary Health Division and the School of Public Health and Preventive Medicine (SPHPM) Climate and Health Initiative. These groups bring together environmental and occupational health researchers, infectious disease epidemiologists, and global health experts, advancing an eco-social understanding of health that emphasises interdisciplinary perspectives in addressing complex global public health challenges.

2.3. Is there a process by which communities disproportionately impacted by climate change and environmental injustice give input or make decisions about the research agenda at your institution?
Yes, there is a process in which community members impacted by climate and environmental injustice have **decision-making power** in the climate + environmental research agenda. (3 points)
Yes, there is a process in which community members impacted by climate and environmental injustice **advise** the climate + environmental research agenda. (2 points)
No, but there are **current efforts** to establish a process for community members to advise or make decisions on the research agenda. (1 point)
There is **no** process, and **no** efforts to create such a process. (0 points)

Score Assigned:	2

The Monash Sustainable Development Institute (MSDI) oversees a range of research programs that seek to include communities disproportionately impacted by climate change and environmental injustice as key contributors and advisors in research agendas and outputs. MSDI identifies Thriving People and Places as a key organisational focus area, with an explicit aim to "empower communities to thrive, to create space for leaders and change-makers from different backgrounds, and reform systems in order to listen to and promote marginalised voices". In alignment with this principle, many MSDI-affiliated research projects adopt co-designed approaches that embed community input into research priorities and processes. Two key examples that demonstrate this commitment are the *Fire To Flourish* program and the *Revitalising Informal Settlements and Their Environments (RISE)* program.

The *Fire To Flourish* program is a research and community impact initiative working in direct partnership with bushfire-affected communities within Australia. Research within Fire to Flourish is explicitly shaped by community priorities and lived experience, with affected communities leading local initiatives, informing research questions, and co-creating resilience strategies. This "inclusive, participatory and evidence-based model" not only ensures that research responds directly to the needs of communities disproportionately impacted by climate-related disasters, but also provides these communities with meaningful leadership and advisory roles in shaping the direction, design, and implementation of research that affects their recovery and long-term resilience.

The *Revitalising Informal Settlements and Environment (RISE)* program is a transdisciplinary research initiative involving 12 informal settlements in Suva, Fiji, and 12 settlements in Makassar, Indonesia. RISE works in close partnership with local communities, leaders, governments, and partner institutions to co-design location-specific infrastructure solutions for water and sanitation services. Importantly, the research is designed to directly involve and benefit local communities, with program success measured "by the health and well-being of residents - particularly children under five years of age - and the ecological diversity of the surrounding environment."

Community members are actively involved throughout the research lifecycle, ensuring that local knowledge and priorities inform research design, implementation, and outcomes. For example, local community members participate in diagnostic testing, sample analysis, and the maintenance of laboratory equipment, while others hold project management roles within the program. These practices reflect RISE's commitment to enabling communities to co-design, implement, and take ownership of infrastructure solutions that address local environmental and health challenges.

Through initiatives such as *Fire to Flourish* and *RISE*, MSDI embeds community advisory input, co-design, and participatory approaches within its climate and environmental research. However, formal decision-making authority over the overall research agenda remains with MSDI, indicating an area for potential improvement in strengthening community decision-making roles.

2.4. Does your institution have a planetary health website that centralises ongoing and past research related to health and the environment?

There is an **easy-to-use, adequately comprehensive** website that **centralises** various campus resources related to health and the environment including all of the following: upcoming events, leaders in planetary health at your institution, and relevant funding opportunities. (3 points)

There is a website that attempts to centralise various campus resources related to health and the environment, but it is hard-to-use, not updated, or not adequately comprehensive. (2 points)

The **institution** has an **Office of Sustainability website** that includes **some** resources related to health and the environment. (1 point)	
There is **no** website. (0 points)	
Score Assigned:	2
Monash University has a website detailing the steps being undertaken by the university in order to contribute to environmental sustainability. While it is comprehensive in explaining how the campus is striving for sustainability, it does not possess all the requirements to achieve 3 points. However, there is a separate website in regards to the research done by the university and leaders involved within climate change at the university. The institution also has a separate website for the Planetary Health Division of the medicine, nursing and health sciences faculty. This website describes ongoing and past research projects, and the teams involved in these projects. It provides information on various projects related to planetary health, focusing on topics such as the climate and air quality, global and women's health, and infectious disease epidemiology.	

2.5. Has your institution recently hosted a conference or symposium on topics related to planetary health?	
Yes, the **institution** has hosted at least one conference or symposium on topics related to planetary health in the past year. (4 points)	
Yes, the **institution** has hosted at least one conference or symposium on topics related to sustainable healthcare/vetcare in the past year. (3 points)	
Yes, the **institution** has hosted a conference on topics related to planetary health / sustainable healthcare/vetcare in the past three years. (2 points)	
The **institution** has not hosted any conferences directly, but they have provided financial support for a local planetary health event. (1 point)	
No, the **institution** has not hosted a conference on topics related to planetary health in the past three years. (0 points)	
Score Assigned:	4
Monash University held the "Planetary Health: A call to action for our shared future" conference on August 27, 2025. Later in the year, the university also held the "Bridging research, communities, and planetary health at Monash" conference on September 10, 2025.	

2.6. Is your institution a member of a national or international planetary health or ESH/ESV organisation?
Yes, the institution is a member of a national or international planetary health **or** ESH/ESV organisation. (1 point)
No, the institution is **not** a member of such an organisation. (0 points)

Score Assigned:	1
Monash University's Monash Sustainable Development Institute is a part of the Planetary Health Alliance, Alliance for Transformative Action on Climate and Health (ATACH) and Sustainability Transitions Research Network (STRN).	

Section Total (15 out of 17)	**88.24%**

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Community Outreach and Advocacy

Section Overview: ***This section evaluates a school's engagement in community outreach and advocacy efforts associated with planetary health.*** *Researching and teaching planetary health is necessary but not sufficient. It is critical that institutions also directly engage with communities most affected by environmental health harms. Although climate change is a problem largely created by those with power and resources, its impacts fall disproportionately on under-resourced populations and communities of colour. Institutions should partner with local communities affected by climate change and pollution to share information about environmental health threats, advocate together for change, and provide opportunities for students to be a part of this work.*

3.1. Does your institution partner with community organisations to promote planetary and health?	
Yes, the **institution** meaningfully partners with **multiple** community organisations to promote planetary and environmental health. (3 points)	
Yes, the **institution** meaningfully partners with **one** community organisation to promote planetary and environmental health. (2 points)	
The **institution** does not partner with community organisations, but participates in community focused events relating to planetary health. (1 point)	
No, there is **no** such meaningful community partnership. (0 points)	
Score Assigned:	3

Monash University partners with multiple community organisations to promote planetary and environmental health through collaboration, co-design, and community engagement activities.

At an institutional level, Monash University partners extensively with community, healthcare, and government organisations through the Monash Sustainable Development Institute (MSDI). MSDI's Transitions to Sustainable Health Systems initiative works in partnerships with leaders and bodies like the World Health Organisation to integrate global and local efforts for the UN Sustainable Development Goals. The Green Steps is a sustainability leadership program delivered by the MSDI, partnering with industry organisations such as Enel Green Power Australia to provide students with practical training and real-world sustainability projects aligned with the SDGs.

Within the Department of Nutrition, Dietetics, and Food, the faculty members annually collaborate and partner with community organisations such as the Little Food Festival to improve food systems literacy and planetary health awareness. Student volunteers are recruited and supervised to deliver interactive, age-appropriate activities that engage primary school-aged children and families.

3.2. Does your institution offer community-facing courses or events regarding planetary health?
The **institution** offers community-facing courses or events at least once every year. (3 points)
The **institution** offers courses or events open to the community at least once per year, but they are not primarily created for a community audience. (2 points)

The **institution** has promoted community-facing courses or events, but was not involved in planning those courses or events. (1 point)
The **institution** has not offered such community-facing courses or events. (0 points)

Score Assigned:	3

Monash University's Net Zero Academy offers a suite of professional development courses that support external organisations in their transition to net zero emissions. These community-facing training courses are typically delivered in person by the Net Zero Academy team and include the 'Executive Leadership Program', 'Climate Risks and Opportunities' and 'Climate Transition Planning' programs, each addressing a distinct aspect of the net zero journey. Through these courses, Monash University directly engages with external stakeholders in the community to build capacity and leadership in planetary health-aligned climate action.

Monash University also operates the Monash Reuse Centre, a second-hand furniture store accessible to Monash staff, students, and the wider community. By actively encouraging faculties and departments to donate surplus furniture, the Centre contributes to waste reduction and the promotion of a circular economy, diverting an average of 60 tonnes of furniture from landfill each year since its establishment in 2010. This initiative provides a community-facing example of planetary health principles in practice.

3.3. Does your institution have regular coverage of issues related to planetary health and/or sustainable healthcare in university update communications?
Yes, all students **regularly** receive communication updates dedicated to planetary health and/or sustainable healthcare. (2 points)
Yes, planetary health and/or sustainable healthcare topics are regularly included in communication updates to **some courses**. (1 point)
Students **do not** receive communications about planetary health or sustainable healthcare. (0 points)

Score Assigned:	1

Monash University engages with sustainability and planetary health through publicly available communications, but students are not consistently reached through university-wide channels and must often seek information independently.

- Early-year outreach boosts engagement with the Monash Association of Sustainability. Which utilises their Instagram and Facebook to share updates on events, sustainable practices, and planetary health issues.
- Furthermore Monash Sustainable Development Institute covers global sustainability issues and innovative solutions as can be seen through their Facebook.

3.4. Does the institution or main affiliated hospital trust engage in professional education activities targeting individuals post-graduation with the aim of ensuring their knowledge and skills in planetary health and sustainable healthcare remain up to date during their

professional career?	
Yes, the **institution** or **main affiliated hospital trust** offers multiple in-person or online courses relating to planetary health and/or sustainable healthcare for post-graduate providers, including at least one with a primary focus of planetary health. (2 points)	
Yes, the **institution** or **main affiliated hospital trust** offers one course relating to planetary health and/or sustainable healthcare for post-graduate providers. (1 point)	
There are **no** such accessible courses for post-graduate providers. (0 points)	
Score Assigned:	2

Sustainable Healthcare in Practice is a short course offered by Monash University and is "recommended for existing health professionals, health educators, aspiring graduate students". It aims to educate the "knowledge and skills to create an inclusive, equitable, restorative and resilient health system."

The Environment and Sustainability Expert Master Degree is another course offered which teaches an "interdisciplinary foundation that allows you to analyse the interdependence of nature, society and the economy." It has five main specialisations that students can learn including environment and governance, corporate environmental and sustainability management, environmental security, international development and environment, and leadership for sustainable development.

Sustainable Healthcare Fundamentals is another short course offered by Monash University aimed at "health professionals, non-clinicians, decision-makers, policy makers and those interested in sustainable healthcare", providing information about decarbonisation pathways and principles of a circular economy amongst other concepts.

3.5. Does your institution or its affiliated teaching hospitals have accessible educational materials for patients about environmental health exposures?	
Yes, the **institution** or **all affiliated hospitals** have accessible educational materials for patients. (2 points)	
Some affiliated hospitals have accessible educational materials for patients. (1 point)	
No affiliated medical centres have accessible educational materials for patients. (0 points)	
Score Assigned:	0

Neither Monash University nor its affiliated teaching hospitals have easily accessible educational resources regarding environmental health exposure. This is consistent when examining Monash University's other affiliated teaching hospitals.

While the University and some affiliated hospitals have websites and links to research papers relating to environmental health exposures, these materials are not easily digestible for most patients.

3.6. Does your institution or its affiliated teaching hospitals have accessible educational

materials for patients about the health impacts of climate change?	
Yes, the **institution** or **all affiliated hospitals** have accessible educational materials for patients. (2 points)	
Some affiliated hospitals have accessible educational materials for patients. (1 point)	
No affiliated hospitals have accessible educational materials for patients. (0 points)	
Score Assigned:	0
Monash University's affiliated hospitals do not have educational materials regarding the health impacts of climate change that are readily available for their patients. Monash University however has a website that highlights the University's desire to educate communities on the health impacts of climate change and has links to many research papers that the university has published that relates to this topic.	

Section Total (9 out of 14)	**64.29%**

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Support for Student-Led Planetary Health Initiatives

Section Overview: ***This section evaluates institutional support for student-led planetary health initiatives, such as funding, fellowships, programming, and student groups.*** *Planetary health is a young field and, as young people facing a future deeply shaped by climate change, students are often some of the first at an institution to engage with it. Institutions should provide support for students to engage in sustainability quality improvement (QI) initiatives, discover mentors in their area of interest, and receive funding for planetary health projects.*

4.1. Does your institution offer support for students interested in enacting a sustainability initiative/QI project?	
Yes, the **institution** *either* offers grants for students to enact sustainability initiatives/QI projects *or* sustainability QI projects are part of the core curriculum. (2 points)	
The **institution** encourages sustainability QI projects (to fulfil clerkship or longitudinal requirements) and offers resources to help students succeed in these projects, **but** there is no student funding available and there is no requirement to participate. (1 point)	
No, the institution does not offer opportunities or support for sustainability initiatives or QI projects. (0 points)	
Score Assigned:	1
Monash University encourages and supports student engagement in sustainability initiatives through programs like Green Steps, which is an extracurricular sustainability leadership program that includes in-person training and consultancy sustainability projects for students, giving them practical experience in sustainability issues and problem-solving. This program is open to current students across disciplines. There are also student opportunities for sustainability programs, including projects, events, and online engagement. However, there is no evidence of dedicated institutional grants specifically for student-led sustainability/QI projects as a core curricular requirement.	

4.2. Does your institution offer opportunities for students to do research related to planetary health and/or sustainable healthcare/vetcare?	
The **institution** has a **specific** research program or fellowship for students interested in doing planetary health/sustainable healthcare/vetcare research. (2 points)	
There are research opportunities for students to perform research related to planetary health/sustainable healthcare, but these **require student initiative** to seek them out and carry them out in their spare time. (1 point)	
There are **no opportunities** for students to engage in planetary health/sustainable healthcare research. (0 points)	
Score Assigned:	2
Monash University offers graduate students research opportunities in planetary health/health promotion through Monash Sustainable Development Institute (MSDI). MSDI focuses on	

solution-focused sustainable development and offers scholarships for high quality doctoral research candidates based on merit.

Monash University's Health and Climate Initiative, as part of Monash Faculty of Medicine, Nursing and Health Sciences, focuses on assessing current strategies and developing innovative solutions to mitigate the effects of climate change on health and healthcare systems. Notably, the Monash Biomedicine Discovery Institute (BDI), one of the largest and most prestigious research institutes in the Southern Hemisphere, offers a variety of research opportunities, from Honours and Masters by Research to PhD/Doctorate programs, enabling students to explore a diverse range of health Issues.

4.3. Does the institution have a webpage where students can find specific information related to planetary health and/or sustainable healthcare/vetcare activities and mentors within the institution? For example, projects achieved, current initiatives underway at the medical school and/or contact of information of potential mentors.	
The institution has a webpage with specific information related to planetary health or sustainable healthcare/vetcare that includes up-to-date information on relevant initiatives and contact information of potential mentors. (2 points)	
There is an institution webpage that features some information on projects and mentors within planetary health and sustainable healthcare within the institution, but it lacks key information. (1 point)	
There is **no institution** specific webpage for locating planetary health and/or sustainable healthcare projects or mentors. (0 points)	
Score Assigned:	2
The Faculty of Medicine, Nursing and Health Sciences maintains a webpage with specific and up-to-date information on planetary health. The webpage outlines key focus areas (e.g. sustainable healthcare, infectious disease modelling), current research units, and identifies academic leads with corresponding contact details. It also highlights relevant courses and showcases articles demonstrating Monash University's planetary health initiatives and real-world impact.	

4.4. Does your institution have registered student groups dedicated towards fostering a culture of planetary health engagement, scholarship, and advocacy on campus, supported by faculty advisors?	
Yes, there is a student organisation **with faculty support** at my institution dedicated to planetary health or sustainability in healthcare. (2 points)	
Yes, there is a student organisation at my institution dedicated to planetary health or sustainability in healthcare but it **lacks faculty support.** (1 point)	
No, there is **not** a student organisation at my institution dedicated to planetary health or sustainability in healthcare. (0 points)	
Score Assigned:	2

Monash University medical students have a local, student-run branch of the national organisation, Doctors for the Environment Australia (DEA). Although the DEA provides support and funding to the student organisation, Monash University does not.

AMSA (Australian Medical Students' Association) has AMSA Code Green, which is a subcommittee that focuses on planetary health. As with DEA, the Monash members of this student run organisation do not receive faculty support.

Monash University pharmacy students can participate in PharmAlliance, a strategic partnership between the UNC Eshelman School of Pharmacy, the Monash University Faculty of Pharmacy and Pharmaceutical Sciences, and the UCL School of Pharmacy. While PharmAlliance is not exclusively focused on planetary health engagement and advocacy, faculty-supported initiatives have increasingly prioritised these themes over the past two academic years. In 2024, PharmAlliance students and academics co-designed a dedicated Planetary Health Champions online workshop, which was subsequently delivered at Monash University, UNC and UCL across 2025. The co-design process was student-driven and formally supported by faculty advisors, including the faculty's Sustainability Education Lead, who provided structural oversight. Moving forward, PharmAlliance aims to establish a sustainable cross-campus model for future planetary health events and education campaigns.

4.5. Is there a student liaison representing sustainability interests who serves on a department or institutional decision-making council to advocate for curriculum reform and/or sustainability best practices?	
Yes, there is a student representative who serves on a department or institutional decision-making council/committee. (1 point)	
No, there is no such student representative. (0 points)	
Score Assigned:	1
Monash University has an Environmental and Social Justice department as part of its wider student body (Monash Students Association). This branch of the student body is dedicated to championing sustainability within the University through advocacy and activism, amongst other activities.	

4.6. In the past year, has the institution had one or more co-curricular planetary health programs or initiatives in the following categories? (1 point each)	**Score**
Projects where students are able to gain experience in organic agriculture and sustainable food systems, such as gardens, farms, community supported agriculture (CSA), fishery programs, or urban agriculture projects.	1
Panels, speaker series, or similar events related to planetary health that have students as an intended audience.	1
Events in which students learn directly from members of a local environmental justice community about the climate and environmental challenges they face, and how health professionals can partner with their community to address these exposures and impacts.	0
Cultural arts events, installations or performances related to planetary health that have students as an intended audience.	0

Local volunteer opportunities related to building community resilience to anthropogenic environmental impacts.	1
Wilderness or outdoors programs (e.g., that organise hiking, backpacking, kayaking, or other outings for students)	1

In the past year, Monash University has run several co-curricular planetary health programs and initiatives, including:

1. An Indigenous garden, which cultivates various native plants of cultural and medicinal significance. Additionally, there are various other community gardens across campus, which allow for students to grow vegetables and herbs. The Monash Student Society, as a project to tackle growing food insecurity within the student population, runs a fresh food market, which allows students access to fresh fruit and vegetables. There is a non-for-profit vegan and vegetarian restaurant on campus, run by student volunteers, that encourages students to consider sustainability, particularly with a focus on diet.
2. Student groups, such as 'Precious Plastics' build community, and encourage students on campus to consider and combat the impacts of, for example, single use plastics, and work towards creating solutions within the Institution.
3. At Monash University, many panels and discussions are held throughout the year. These events include talks on topics of Climate Justice, Planetary Health, Indigenous Justice and Human Rights. These are free for students to attend, regardless of faculty, however do not specifically have a health focus.
4. At Monash University there are various outdoor clubs that are available for students to partake in. Examples of these clubs include Monash University Outdoors Club (MUOC), Monash Boardriders (MBR), Monash University Snowsports (MUSC) and Monash University Waterski and Wakeboard (MUWW). These clubs organise various different activities such as hiking, kayaking, climbing, surfing, camping and snowsport trips, which students can attend.

Section Total (12 out of 15)	**80.00%**

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Campus Sustainability

Section Overview: ***This section evaluates the support and engagement in sustainability initiatives by the institution.*** *The healthcare industry is a major contributor to greenhouse gas emissions as well as pollution that harms local, regional, and global ecosystems. While healthcare is, by nature, a resource-intensive endeavour, the healthcare sector is well poised to lead the world to a more sustainable future. This will involve scrutinising every aspect of how our systems operate, from where we source our energy, to how we build our infrastructure, to what companies we invest in. Our institutions, clinics, and hospitals must set the standard for sustainable practices, and show other sectors what is possible when it comes to minimising environmental impact.*

5.1. Does your institution have an Office of Sustainability?	
Yes, there is an Office of Sustainability with multiple full-time staff dedicated to campus sustainability. If the Office of Sustainability serves the entire campus, there is **at least one designated staff member** for sustainability at the hospital. (3 points)	
There is an Office of Sustainability with one or more full-time staff dedicated to campus sustainability, but **no specific staff member** in charge of hospital sustainability. (2 points)	
There are **no salaried sustainability staff,** but there is a sustainability task force or committee. (1 point)	
There are **no** staff members **or** task force responsible for overseeing campus sustainability. (0 points)	
Score Assigned:	2
Monash University has a well-established, centralised sustainability function with multiple full-time staff dedicated to sustainability, net zero circular economy, reporting, compliance, and engagement. Sustainability capacity is embedded across the University through a dedicated campus sustainability team. Monash University is also undergoing a university-wide transition of the Monash Sustainable Development Institute (MSDI) to embed sustainability across faculties and portfolios, reflecting a sustained institutional commitment to climate action and sustainability research. While Monash University demonstrates a strong, institution-wide commitment to sustainability across education, research, and campus operations, this commitment is not currently translated into discipline-specific sustainability leadership for the health professions. At present, sustainability oversight appears to operate at a whole university level rather than through dedicated sustainability staff embedded within the faculties responsible for individual health disciplines.	

5.2. How ambitious is your institution's plan to reduce its own carbon footprint?
The institution has a **written and approved plan** to achieve carbon neutrality by **2030** (5 points)
The institution has a **written and approved plan** to achieve carbon neutrality by **2040** (3 points)
The institution has a stated goal of carbon neutrality by **2040** but has **not created a plan** to reach that goal or the **plan is inadequate** (1 point)

The institution does **not** meet any of the requirements listed above (0 points)	
Score Assigned:	5

Monash University has committed to the Net Zero initiative, aiming to achieve net zero emissions from infrastructures and operations in 2030. This commitment is underpinned by seven clearly defined strategic pillars: Energy Efficiency, Campus Electrification, Net Zero Buildings, Renewable Energy, Net Zero Transport, Residual Emissions, and Intelligent Energy Networks, with significant milestones already achieved.

By the end of 2024, the University had reduced total greenhouse gas emissions by 57% relative to its 2015 baseline. According to a February 2026 update from the Monash Net Zero Team, 100% of electricity consumed across all campuses and sites in 2025 was sourced from renewable energy, with 94.6% supplied by the Murra Warra Wind Farm (off-site) and 5.6% generated through on-site solar installations.

5.3. Do buildings/infrastructure used by the institution for teaching (not including the hospital) utilize renewable energy?

Yes, institution buildings are **100%** powered by renewable energy. (3 points)	
Institution buildings source **>80%** of energy needs from off-site and/or on-site renewable energy. (2 points)	
Institution buildings source **>20%** of energy needs from off-site and/or on-site renewable energy. (1 point)	
Institution buildings source **<20%** of energy needs from off-site and/or on-site renewable energy. (0 points)	
Score Assigned:	1

Currently, there is no publicly available data indicating the proportion of renewable energy in the energy needs for buildings at Monash University.

However, as informed by the Monash Net Zero team in February 2026, 48.3% of the institution's total energy requirements is attributable to natural gas. Given that 100% of its electricity is sourced from renewable energy in 2025, and that approximately 30% of campus buildings operate solely on electricity, it is reasonable to assume that more than 20% of the energy used across University buildings is derived from renewable sources.

Monash university has been committed to powering the institutions buildings of renewable energy through its Net Zero strategies with progresses made and goals set: approximately 150,000 solar panels have been installed across campuses by the end of 2024, significantly boosting on-campus energy generation and the university aims for 100% electrification from gas infrastructure of the campuses in 2040.

5.4. Are sustainable building practices utilised for new and old buildings on the institution's campus, with design and construction of new buildings and remodelling of old buildings conforming to a published sustainability rating system or building code/guideline?

Yes, sustainable building practices are utilised for new buildings on the institution's campus and the **majority** of old buildings **have been retrofitted** to be more sustainable. (3 points)
Sustainable building practices are utilised for new buildings on the institution's campus, but most old buildings have **not been retrofitted.** (2 points)
Sustainable building practices are **inadequately or incompletely** implemented for new buildings. (1 point)
Sustainability is **not considered** in the construction of new buildings. (0 points)

Score Assigned:	2

Monash Design and Construction Standards (MDCS) mandates the use of sustainable design principles and recognised sustainability frameworks for all new buildings and major refurbishments. However, the document does not provide evidence on whether existing or older buildings have already been retrofitted to improve sustainability performance.

For example, Monash University has demonstrated the application of sustainable building practices to existing infrastructure through the 343 Royal Parade Parkville Revitalisation Project. This project involves the refurbishment and adaptive reuse of an older campus building, with a focus on improving environmental performance, energy efficiency, and alignment with contemporary sustainability standards while preserving the existing structure. The project aligns with the Monash Design and Construction Standards (MDCS) and the University's broader Parkville Campus Masterplan, providing concrete evidence that older buildings on campus are being actively retrofitted to enhance sustainability outcomes.

5.5. Has the institution implemented strategies to encourage and provide environmentally-friendly transportation options for students and reduce the environmental impact of commuting?
Yes, the institution has implemented strategies to encourage and provide **environmentally-friendly transportation options** such as safe active transport, public transport, or carpooling and these options are well-utilised by students. Alternatively, the campus location is not amenable to unsustainable forms of transportation by default. (2 points)
The institution has implemented **some** strategies to provide environmentally-friendly transportation options, but the options are **unsatisfactorily** accessible or advertised. (1 point)
The institution has **not** implemented strategies to encourage and provide environmentally-friendly transportation options. (0 points)

Score Assigned:	2

Monash University aims to reduce greenhouse gas emissions from travel to its campuses by promoting sustainable transport options including public transport, shuttle buses, carpooling, walking, and cycling. Through its Net Zero Transport Strategy, introduced in 2021, the University targets more than 70% of staff and students commuting via sustainable transport, with specific goals for 50% of campus commuters to use public transport and 20% to rely on active transport by 2030. Monash is investing in improved public transport accessibility and active transport infrastructure; however, at the Parkville campus, the absence of dedicated vehicle parking reinforces public transport as the primary mode of access. Despite carpooling incentives being

available university-wide, Parkville students remain heavily dependent on buses and trams, which present ongoing challenges due to limited wheelchair accessibility and the financial burden of commuting costs borne by students.

Monash University is also advancing towards a sustainable future with the commissioning of state-of-the-art Electric Vehicle (EV) charging stations across its campuses. In partnership with Engie, Monash supports electrification of intercampus buses, light vehicle fleets, carsharing services, and public charging, contributing to reductions in Scope 1, 2 and 3 emissions.

- At the Caulfield campus, the network will expand to include six ultra-rapid (150 kW), one rapid (50 kW), and six AC destination (7 kW) charging bays, making it the largest rapid charging hub in Melbourne.
- At the Clayton campus, Monash aims to install ten charging bays to support EV car-sharing, creating the largest facility of its kind in Australia and supporting a transition towards shared fleet operations.
- At the Peninsula campus, new ultra-rapid DC charging infrastructure, including dedicated heavy vehicle bays, will provide the only ultra-rapid charging station in the Frankston and Mornington Peninsula region, enabling rapid charging of buses and other heavy vehicles and supporting deep decarbonisation of transport.

5.6. Does your institution have an organics recycling program (compost) and a conventional recycling program (aluminium/paper/plastic/glass)?	
Yes, the institution has **both** compost **and** recycling programs accessible to students and faculty. (2 points)	
The institution has **either** recycling **or** compost programs accessible to students and faculty, but not both. (1 point)	
There is **no** compost or recycling program at the institution. (0 points)	
Score Assigned:	1
Monash University has a comprehensive recycling program that is present across its campuses, however it currently lacks composting programs that are accessible to students and faculty. The institution claims that they are currently "developing a plan to increase food waste collections across our Victorian campuses" but they have not outlined a timeline for implementation.	

5.7. Does the institution apply sustainability criteria when making decisions about the campus food and beverage selections (e.g. local sourcing, reduced meat, decreased plastic packaging)?
Yes, the institution has a**dequate s**ustainability requirements for food and beverages, including meat-free days or no red-meat, and **is engaged** in efforts to increase food and beverage sustainability. (3 points)
There are sustainability guidelines for food and beverages, but they are **insufficient or optional**. The institution **is engaged** in efforts to increase food and beverage sustainability. (2 points)
There are sustainability guidelines for food and beverages, but they are **insufficient or optional.** The institution is **not** engaged in efforts to increase food and beverage sustainability. (1 point)
There are **no** sustainability guidelines for food and beverages. (0 points)

Score Assigned:	2

Monash University has some sustainability guidelines and incentives regarding campus food and beverage selections, mostly surrounding the elimination of single-use containers and plastic. One such incentive is product discounts at certain retailers on campus for using re-usable coffee cups and this is made accessible for staff and students by having services where you can borrow re-usable containers and return them after use. However, such incentives are notably absent at the Parkville campus, limiting their accessibility to pharmacy students.

Whilst these guidelines are more suggestory in nature, it demonstrates the institution's desire to further campus sustainability, and specifically moving away from the use of single-use plastics.

5.8. Does the institution apply sustainability criteria when making decisions about supply procurement?

Yes, the institution has **adequate** sustainability requirements for supply procurement **and** is **engaged** in efforts to increase sustainability of procurement. (3 points)

There are sustainability guidelines for supply procurement, but they are **insufficient or optional.** The institution is **engaged** in efforts to increase sustainability of procurement. (2 points)

There are sustainability guidelines for supply procurement, but they are **insufficient or optional.** The institution is **not engaged** in efforts to increase sustainability of procurement. (1 point)

There are **no** sustainability guidelines for supply procurement. (0 points)

Score Assigned:	3

Responsible procurement is one of Monash University's five pillars in their Circular Economy framework that "designs out waste, extends material use, recovers resources, and restores natural systems".

The five key aspects of responsible procurement at Monash University are as follows:

1. Empowering Indigenous Peoples and Indigenous Australian businesses
2. Fostering thriving communities and supporting people with disabilities
3. Addressing climate change and minimising environmental impacts
4. Circularity to close the waste / recycling loop and to regenerate nature
5. Human rights and eliminating modern slavery.

The institution has a strong focus on establishing a sustainable and transparent supply chain that will benefit the wider community.

5.9. Are there sustainability requirements or guidelines for events hosted at the institution?

Every event hosted at the institution **must** abide by sustainability criteria. (2 points)

The institution **strongly recommends or incentivizes** sustainability measures, but they are **not required.** (1 point)

There are **no** sustainability guidelines for institution events. (0 points)

Score Assigned:	1
While it is not highly incentivised by the institution, Monash University does have sustainability guidelines for events. From student experiences, these guidelines are not strictly adhered to and are only in place if the committee running the event decides to do so, however they exist nonetheless.	

5.10. Does your institution have programs and initiatives to assist with making lab spaces more environmentally sustainable?	
Yes, the institution has **programs** and **initiatives** to assist with making lab spaces more environmentally sustainable. (2 points)	
There are **guidelines** on how to make lab spaces more environmentally sustainable, but not programs or initiatives. (1 point)	
There are **no** efforts at the institution to make lab spaces more sustainable. (0 points)	
Score Assigned:	2
Monash University has been retrofitting buildings to be more sustainable through many facets to meet the institution's goal of achieving net zero by 2030, and laboratory spaces are included in this program. This program is called the net zero initiative. The Biomedicine Learning and Teaching Building (BLTB), which contains lab spaces, is a net zero building which is the University's first all electric building. Monash University has also partnered with Wallbridge Gilbert Aztec (WGA) to retrofit two buildings that are part of the institution's Innovation Labs to further their efforts in reaching net zero by 2030.	

5.11. Does your institution's endowment portfolio investments include fossil-fuel companies?	
The institution is **entirely divested** from fossil fuels **and** has made a **commitment to reinvest divested funds** into renewable energy companies or renewable energy campus initiatives. (4 points)	
The institution is **entirely divested** from fossil fuels. (3 points)	
The institution has **partially divested** from fossil fuel companies **or** has made a **commitment to fully divest**, but **currently** still has fossil fuel investments. (2 points)	
The institution has **not divested** from fossil-fuel companies, but faculty and/or students are **conducting organised advocacy** for divestment. (1 point)	
Yes, the institution has investments with fossil-fuel companies and there have been **no efforts** to change that. (0 points)	
Score Assigned:	2
Monash University has committed to divest from fossil fuels, which was first formalised in the institution's ESG statement in 2016 and was further reiterated in the ESG released 2021. Since	

then, the University has taken steps towards achieving this goal. One big step that was taken in 2025 was the divestment from the Woodside Energy, the biggest fossil fuel corporation in Australia Monash University is still not 100% divested from fossil fuels and the exact timeline for this to occur is unclear.

Section Total (23 out of 32)	**71.88%**

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Grading

Section Overview
This section focuses on the grading of the report card. The institution received a grade for each of the individual sections as well as an overall institutional grade. Section point totals were tallied, divided by the total points available for the section, and converted to a percentage. The overall institutional grade is a weighted average of the section grades, with curriculum receiving a higher weight owing to its larger number of metrics. Letter grades for each section and the institution overall were then assigned according to the table below.

Letter Grade*	Percentage
A	80% - 100%
B	60% - 79%
C	40% - 59%
D	20% - 39%
F	0% - 19%

**Within each grade bracket, a score in the top 5% (_5 to_9%), receives a "+", and a score in the bottom 5% (_0-_4%) receives a "--". For example, a percentage score of 78% would be a B+.*

Planetary Health Grades for the Monash University School of Pharmacy The following table presents the individual section grades and overall institutional grade for the Monash University School of Pharmacy on this Planetary Health Report Card.

Section	Raw Score %	Letter Grade
Planetary Health Curriculum (30%)	(38/69) x 100 = 55.07%	C+
Interdisciplinary Research (17.5%)	(15/17) x 100 = 88.24%	A
Community Outreach and Advocacy (17.5%)	(9/14) x 100 = 64.29%	B-
Support for Student-led Planetary Health Initiatives (17.5%)	(12/15) x 100= 80.00%	A-
Campus Sustainability (17.5%)	(23/32) x 100 = 71.88%	B
Institutional Grade	**(53.62x0.3 + 88.24x0.175 + 64.29x0.175 + 80.00x0.175 + 71.88x0.175) = 69.79%**	**B**

Report Card Trends

Section Overview
This graph demonstrates trends in overall and section grades for the years in which Monash University Faculty of Pharmacy and Pharmaceutical Sciences has participated in the Planetary Health Report Card initiative.