



Planetary Health Report Card (Medicine) 2026: *Waipapa Taumata Rau | University of Auckland*



Waipapa
Taumata Rau
**University
of Auckland**

2025-2026 Contributing Team:

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Land acknowledgment: We acknowledge the mana whenua of Tāmaki Makaurau, Ngāti Whātua Ōrākei, on whose ancestral lands the Waipapa Taumata Rau | University of Auckland stands. We pay our respects to their enduring connection to the land, waters, and community, and to all tangata whenua of Aotearoa | New Zealand.

Summary of Findings

Overall Grade	B+
Curriculum	A
<p>Waipapa Taumata Rau University of Auckland’s School of Medicine demonstrates strong and increasingly longitudinal integration of planetary health across the MBChB curriculum, with teaching spanning preclinical and clinical years and covering climate-related health risks, environmental determinants of health, Indigenous knowledge systems, health inequities, environmental toxins, and aspects of sustainable clinical practice.</p> <p>Strengths include repeated teaching on the health effects of climate change across multiple body systems, the disproportionate impact on Māori, Pacific, rural, and other marginalised communities, and the embedding of kaitiakitanga and Mātauranga Māori within the curriculum. Planetary health is also reinforced through clinical scenarios, assessments, and programme-level graduate outcomes. However, some areas remain less consistently developed, particularly the practical application of sustainable healthcare principles such as healthcare waste reduction, inhaler-related emissions, and the carbon footprint of healthcare systems. In addition, some key foundational content remains concentrated in WTRMHS100, which is not undertaken by all entry pathways.</p> <p>Overall, the curriculum reflects substantial progress, but would benefit from earlier universal exposure and more consistent practical integration across all years.</p> <p>Recommendations: WTRMHS100 is a first-year course that includes approximately two weeks of comprehensive planetary health teaching. To ensure equitable exposure for all medical students, regardless of entry pathway, the School of Medicine should reintroduce and standardise this foundational content within the core Year 2 curriculum. The programme should also strengthen vertical integration of planetary health by embedding it within early preclinical assessments and expanding explicit teaching on sustainable healthcare practice, including the environmental impact of clinical decision-making, so that students are better prepared to apply these principles in later clinical training. Additional opportunities for integration include incorporating planetary health in greater depth within hauora Māori modules, establishing it as a distinct component of the Population Health Intensive, and embedding relevant teaching within Year 2 to 5 clinical attachments such as anaesthesiology, and development of dedicated formal learning modules across the six years of the programme.</p>	
Interdisciplinary Research	B
<p>Waipapa Taumata Rau University of Auckland demonstrates some engagement in sustainability and climate research however, it lacks specific focus on planetary health. There are researchers in Te Kura Tapuhi (School of Nursing) with a focus on planetary health but there are no dedicated teams or a dedicated department university-wide. There are opportunities for communities disproportionately affected by climate change to be able to provide input into research, however there are no formal processes. The university has participated in planetary health related symposiums and is affiliated with APRU, however there is no dedicated centralised website.</p> <p>Recommendations: We recommend that Ngā Ara Whetū (Centre for Climate, Biodiversity and Society) creates a specific focus on planetary health or a specific department is created with a planetary health focus. Although there is research on planetary health, this is often not the primary focus. It is important the university continues with supporting planetary health events, creates a centralised planetary health website, and allows community decision making power over research agenda, making sure research is aligned with the communities that are impacted.</p>	
Community Outreach and Advocacy	B
<p>Waipapa Taumata Rau University of Auckland has strong partnerships with various local community groups. In alignment with their commitment to Te Tiriti o Waitangi (Aotearoa New Zealand’s founding document, a treaty</p>	

between the British Crown and Māori, creating a partnership between indigenous people of Aotearoa | New Zealand and all others), [Tangata Whenua](#) (indigenous people of the land)) and the Sustainable Development Goals, Waipapa Taumata Rau | University of Auckland aims to integrate sustainability values within all its partnerships. However, there is limited information on sustainability initiatives created with community partners. Planetary health events, courses and information are made available by the University; however, limited promotion may inhibit community outreach. There are also no postgraduate programmes for professional development. Regarding patient education, Te Whatu Ora provides various resources regarding planetary health.

Recommendations: We recommend that Waipapa Taumata Rau | University of Auckland consider and implement planetary health initiatives within their partnerships when applicable. Events, courses, and information on planetary health should be more widely promoted to enhance community outreach. Additionally, postgraduate courses that support the development of planetary health should be established to advance learning amongst healthcare professionals.

Support for Student-Led Initiatives

B

Waipapa Taumata Rau | University of Auckland provides various opportunities for students to get involved in planetary health and sustainability initiatives. A specific strength includes the range of planetary health focused student-led groups available for students to join, such as the Sustainable Futures Collective. These groups are essential because they enable students to gain a deeper understanding of planetary health issues and take action as a collective. Additionally, the inclusion of two student representatives on the Waipapa Taumata Rau | University of Auckland Sustainability Management Board is significant as it allows students to have a voice on the University's sustainability agenda. Regarding research, Waipapa Taumata Rau | University of Auckland provides students with the opportunity to engage in planetary health research; however, they may face barriers in pursuing this research due to limited suitable supervisors or planetary health related projects.

Recommendations: Waipapa Taumata Rau | University of Auckland should ensure that students can pursue planetary health related research by providing supervisors and projects in this area. This information should also be easily accessible to students by adding a planetary health section to their research website, [Rangahau | Research](#).

Campus Sustainability

A-

Waipapa Taumata Rau | University of Auckland has reasonable sustainability processes campus wide for staff and students. These include builds powered 100% by renewable energy, composting and recycling programmes, Net Zero Strategy, sustainable laboratories, and responsible investments. These are positive steps towards addressing sustainability.

Recommendations: We recommend Waipapa Taumata Rau | University of Auckland dedicates a staff member directly to do with hospital sustainability to furthermore help the healthcare system specifically. As well as creating more environmentally friendly and accessible transport options, that all students are able to afford. Addressing procurement is also important for the university to target. At the moment sustainability guidelines are insufficient, thus we recommend implementing strict guidelines rather than the current general language used.

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.
- **Medical School/Department vs. Institution:** When “Medical school” is specified in the report card, this only refers to curriculum and resources offered by the School/department of Medicine 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 medical 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. In Aotearoa | New Zealand's Waipapa Taumata Rau | University of Auckland, there are two components of the curriculum that have been included under the elective branch. The traditional Elective definition used by our university consists of an 8-week final-year module which is self-determined by each student and overseen by an Elective Supervisor alongside the Medical Programme Directorate. For clarity this will henceforth be referred to as the Year 6 Elective. Year 6 Electives have the opportunity to encompass topics relating to the PHRC but this is not a constraint. The second type of Elective discussed in this report card is the mandatory WTRMHS 100 course completed by students entering through medicine as an undergraduate via completion of the Health Science degree. We will refer to this throughout the document as the WTRMHS 100 course.
- **Core Curriculum:** This refers to the 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).
- **Te Reo Māori glossary** used in this report:

Te Reo	English	Te Reo	English	Te Reo	English
Aotearoa	New Zealand	Kaitiakitanga	Guardianship	Te Whatu Ora	Health New Zealand
hauora Māori	Māori health	Te Tiriti o Waitangi	The Treaty of Waitangi	Te Kupenga hauora Māori	Māori health department at Waipapa Taumata Rau University of Auckland
Hui	Meeting	Mātauranga Māori	Māori indigenous knowledge	Waipapa Taumata Rau	The University of Auckland

Māori / tangata whenua	Indigenous people of New Zealand Aotearoa	Tino rangatiratanga	Self-determination of Māori	Manatū Mō Te Taiao	Ministry for the Environment
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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 medical 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. Did your <u>medical school</u> offer elective courses (student selected modules) to engage students in Education for Sustainable Healthcare or Planetary Health in the last year?	
Yes, the medical school has offered more than one elective whose primary focus is ESH/planetary health in the past year. (3 points)	
Yes, the medical school has offered one elective whose primary focus is ESH/planetary health in the past year. (2 points)	
The medical school does not have any electives whose primary focus is ESH/planetary health, but there are one or more electives that include a lecture on planetary health. (1 point)	
No, the medical school has not offered any electives on planetary health or electives that include ESH/planetary health topics in the past year. (0 points)	
Score Assigned:	3
<p><i>Score explanation:</i> <i>Waipapa Taumata Rau University of Auckland WTRMHS 100 course has assessed learning outcomes such as “understanding of the interdependent relationship between people, the environment, and population health” and “social and environmental impacts on local and/or global health”. Taking one of these modules is a prerequisite for entry into the Waipapa Taumata Rau University of Auckland MBChB via the undergraduate pathway. Postgraduate students can elect to take this course as a supplementary module.</i></p> <p><i>In the Waipapa Taumata Rau University of Auckland MBChB Year 1 planetary health teaching WTRMHS 100 course module 8: Planetary Health Issues and Responses, students learn that climate change affects human health through multiple pathways, including extreme weather events and reduced access to safe water and food, demonstrating a clear linkage between climate change and health risk, and introduces the impact of extreme weather on human health, disease and disease vectors. This module also explicitly covers climate change affects human health through pathways including air pollution, climate change boundary, critical thresholds, climate change and cardiovascular pathology. Novel entities such as microplastics, endocrine disruptors, radioactive materials, and genetically modified organisms. Teaching on endocrine disruptors and other industrial toxins is directly relevant to reproductive health effects and supports understanding of environmental influences on fertility and foetal development. The module provides education around “colonial, inequitable impacts on Indigenous peoples [and] other marginalised communities,” directly linking climate change to disproportionate impacts on marginalised groups.</i></p>	

The module 8 also addresses local and wider geographical implications of climate change and planetary health. There is a strong focus on the interdependent relationship between human health and the environment, including that the prerequisites for health include stable ecosystems and sustainable resources. This is assessed online through written activities exploring planetary health, early systems, and natural and man-made disasters. Teaching explicitly frames that “healthy lives depend on a healthy planet,” linking human health to ecosystem integrity.

A WTRMHS 100 course lecture entitled “Climate Change” covers the relationships between health, individual patient food and water security, ecosystem, health, climate change and the impact of colonisation extensively.

In Year 1, the Waipapa Taumata Rau | University of Auckland WTRMHS 100 course module 8 (Planetary Health Issues and Responses) introduces students to a Campylobacter outbreak in Hawke’s Bay, linked to sheep faecal contamination following heavy rainfall and the use of untreated drinking water. The module also outlines pressures on Aotearoa | New Zealand’s freshwater environment from land use and climate change, including contamination by excess nutrients and pathogens, and notes biodiversity loss, including the extinction of 79 species since human arrival.

The WTRMHS 100 course module 7: Approaches to Understanding Health, teaches that planetary health is intrinsically embedded in Indigenous ways of knowing, doing, and being, and that from an Indigenous perspective the health of people and the health of the planet are inseparable. Teaching discussed deforestation, wetland drainage, freshwater pollution, and agricultural greenhouse gas emissions. These examples are taught in relation to their impacts on communities, including rural populations and those affected by colonisation. This framing is extended in Module 8, and positions Indigenous climate justice as centred on relational values, mutual responsibilities, and the expression of Indigenous worldviews, values, and knowledge systems at risk through colonisation, planetary health and climate change..

Indigenous knowledge systems are reinforced longitudinally through teaching and assessment aligned with Te Tiriti o Waitangi (The Treaty of Waitangi) and Mātauranga Māori (Māori indigenous knowledge). Graduate learning outcomes require critical understanding of Mātauranga Māori alongside environmental determinants of health. WTRMHS 100 Module 10 (Te Tiriti o Waitangi) addresses tino rangatiratanga (self-determination of Māori), Indigenous knowledge, and Māori worldviews and values in system-level health and environmental responses.

Along with students being able to enrol in the WTRMHS 100 course for their Year 6 Elective, students also have the opportunity to organise self-directed placements and teaching within any medical field under approved supervision which includes the opportunity for public health disciplines, working with rural and local communities, health policy, and other topics/experiences/research aligned with planetary health. Students also have the opportunity to travel overseas for part or all of their Year 6 Elective, and have first-hand exposure to planetary health through direct exposure to different populations, environments, and teaching.

Based on the extensive teaching offered through both the WTRMHS 100 course and the Year 6 Electives, we have allocated a score of 3.

Curriculum: Health Effects of Climate Change

1.2. Does your medical school curriculum address the relationship between extreme heat, health risks, 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:	3
<p><i>Score explanation:</i> <i>Waipapa Taumata Rau University of Auckland MBChB core curriculum addresses climate change as a determinant of health and links it to clinically relevant health risks, including processes relevant to extreme heat. Programme-level curriculum documentation explicitly identifies climate change as a challenge graduates must be prepared to tackle. Longitudinally, from years 1-2 of the degree, students are assessed on this topic through end of module tests, and through specifically linked questions in the Progress Tests (core longitudinal examinations tracking learning across the entire degree), and has dedicated scenarios with testing questions and revision content via the clinical scenarios on the MBChB Online Portal. Specifically, clinical scenarios regarding bodily function, infection, immunity, and effects of the environment on physiology are assessed.</i></p> <p><i>The Australasian Medical Council Staff Report published through the Waipapa Taumata Rau University of Auckland MBChB reaccreditation process states that graduates “are prepared to tackle the challenges posed by resource constraint, and climate change.” While this statement lacks specific health outcomes, it demonstrates that climate change is formally acknowledged within the curriculum context, satisfying this metric at a general curricular level.</i></p> <p><i>In the Waipapa Taumata Rau University of Auckland MBChB Year 3 Professional and Clinical Skills Module, climate change impacts are contextualised for vulnerable populations in a Pacific People’s Health lecture that explicitly addresses “Climate Change & Pacific” and disaster-related medicine. This core curriculum inclusion demonstrates that students are taught the relationship between climate change and downstream health risks.</i></p> <p><i>Across the Waipapa Taumata Rau University of Auckland MBChB programme years 2-6, there are multiple hauora Māori (Māori health) teaching sessions per annum, which reinforce the hui process (a clinical skills interviewing tool that educates students how to navigate communication with patients and families from any ethnic background regarding their background, environment, and factors associated with various environments that contribute to disease burden and population risk, which includes exposure to environments affected by climate change, extreme health, toxins and disease). It is expected as a graduate outcome that students are able to autonomously integrate this into their practice.</i></p> <p><i>Given the extensive integration across the curriculum, we have given a score of 3.</i></p>	

1.3. Does your <u>medical school</u> 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:	3
<p><i>Score explanation:</i> <i>The Waipapa Taumata Rau University of Auckland MBChB Year 2 Respiratory System Module highlights extreme weather as a precipitating cause for asthma exacerbations, and links are made between health and healthcare system burden.</i></p> <p><i>The downstream impacts of extreme weather events, such as overcrowded living conditions or the spread of infectious disease, is covered extensively through several lectures in the Waipapa Taumata Rau University of Auckland MBChB Year 3 Blood, Immunity, and Infection Module. The link between these consequences on human health/healthcare systems and extreme weather events is explicitly stated across multiple lectures.</i></p> <p><i>Effects of extreme weather events on individual health is tested during the Progress Tests, engaged with using practice tests and revision material on the MBChB Clinical Portal for all 6 years of the degree. Additionally, it is discussed in depth through Small Group Sessions, Small group assessments, and various symposiums and tutorials throughout the curriculum for each year. Students are also directly encouraged to engage with both actors and real patients during history taking to ascertain any exposure to extreme weather events, hazardous environments, and rule in/out possible physiological sequelae of exposure. The impact of such factors on the healthcare system within Aotearoa New Zealand and globally is visited annually through Formal Learning symposiums held twice-yearly, where environmental, disease burden, and socioeconomic/national healthcare system impact is discussed in a group setting and formal teaching is given.</i></p> <p><i>The topic has been covered in depth by the core curriculum across various years and assessments, thus we have allocated a score of 3.</i></p>	

1.4. Does your <u>medical school</u> curriculum address the impact of climate change on the changing patterns of infectious diseases?	
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
<p><i>Score explanation:</i> <i>The Waipapa Taumata Rau University of Auckland MBChB PopHlth 111 Module lecture titled “Climate Change” page 12 has a slide detailing how the spread of disease vectors are an indirect effect of climate change. It links an article on the establishment and increased presence of mosquitoes (and therefore mosquito-borne diseases) in Tibet, China, as an example. As a core first-year entry course, the majority of medical graduates will be taught this lecture.</i> <i>The Waipapa Taumata Rau University of Auckland MBChB Blood, Infection and Immunity Module lecture 35 on “Fever in Travellers” slide 11 covers disease transmission through</i></p>	

mosquitoes, detailing how carriers of dengue, zika, yellow fever are widespread globally, particularly in tropical regions. There was brief discussion on how global warming trends and more suitable breeding conditions will lead to changing patterns and worsening disease. There are also several other references around the impact of climate change on vector-borne diseases and broader infectious disease patterns in this particular module. Throughout this module there is extensive teaching both lecture-based, written content, and additional readings regarding the patterns of infection disease and the change due to environmental factors such as global warming and anthropomorphic contributors. This is assessed via the end of module examinations, through Progress Testing, and is expanded upon through the subsequent modules in year 3.

Throughout all years of the curriculum students receive teaching from clinical staff regarding illnesses affecting the populations that are impacted by climate change, including bacteria, viral, and immune. Students observe discussion between clinicians and patients, are encouraged to incorporate this into their own clinical skills, and also observe clinical teachings at placement sites.

We have allocated this section a score of 3 given its in-depth coverage longitudinally across the core curriculum.

1.5. Does your medical 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:

3

Score explanation:

The core curriculum addresses respiratory health effects linked to climate change and air pollution through several required teaching touchpoints.

The Waipapa Taumata Rau | University of Auckland MBChB PopHlth 111 Module lecture entitled “Climate Change” discusses how climate events such as drought, heat, and fire, air pollution are attributed to far more deaths than burns or injuries. This point reflects on the lecture object of understanding how climate change affects human health. A further lecture entitled “Framing the ‘causes of the causes’ of population health” introduced the Dahlgren & Whitehead Model, which posits the environment as an upstream determinant of human health. Natural capital is also listed as one of the four capitals that sustains intergenerational wellbeing.

During subsequent teaching in the Waipapa Taumata Rau | University of Auckland MBChB Year 2 Respiratory System Module, the lecture “Asthma” explicitly covers environmentally mediated triggers and exposures including moulds, smoke, pollen, changes in weather, and airborne chemicals or dusts. There is further teaching on how storm systems’ breaking pollen into smaller fragments all increase the risk of asthma exacerbations.

The Waipapa Taumata Rau | University of Auckland MBChB Year 5 Population Health Intensive Week has a dedicated topic of climate change, which involves students meeting with key

stakeholders to discuss the impact of climate change on health, addressing air quality, contributing factors, and the effect of air pollution on respiratory health in at-risk populations. There are several groups allocated the teaching for this task annually, and all 5th year students receive exposure through seminar presentations.

Applied teaching within clinical scenarios that are formally assessed in the MBChB Progress Tests explicitly include the relationship between [environmental exposures and lung disease](#), highlighting [inhalational](#) hazards; this reinforces the clinical relevance of air and environmental exposures to respiratory morbidity. Additionally, there are a number of learning and education opportunities such as General Practice, Paediatrics, General medicine, and specialty medicine placements where there are additional learning resources provided where students are able to revitalise their education regarding respiratory health and treatment in the context of global climate change and increasing disease burden, how this affects at risk and minority populations, investigations and treatments alongside patient education.

We have allocated this section a score of 3 given its in-depth coverage longitudinally across the core curriculum for the entire MBChB Degree.

1.6. Does your medical 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:

3

Score explanation:

The Waipapa Taumata Rau | University of Auckland MBChB Year 2 Respiratory System Module, Lecture 27 entitled “Pacific Heart Health,” slide 3: provides explicit teachings regarding cardiovascular health and environmental factors “Underlying socioeconomic, cultural, political and environmental determinants of cardiovascular health”, through lecture content and written material. The Lecture 23 entitled “Asthma” discussed the cardiorespiratory effects of climate change including heat, highlighting global weather phenomena and thunderstorms being a risk factors for cardiorespiratory illness.

The Waipapa Taumata Rau | University of Auckland MBChB Year 2 Digestive System Module provides lecture-based and written teaching on the “Globally, 11 million deaths annually are attributable to dietary factors, placing poor diet ahead of any other risk factor for death in the world.” Lecture 23, “Diarrhoeal Disease” explicitly teaches the cardiovascular complications of bacterial, viral and protozoal infections, including Vibrio (cholera), Giardia, Cryptosporidium, Entamoeba histolytica. Cardiovascular health is combined with verbal teaching regarding infectious diseases whose transmission and distribution are sensitive to environmental conditions, particularly globally warming temperatures, water quality and sanitation, and are widely recognised as being influenced by climate change–related factors such as flooding, water scarcity, warming temperatures, and extreme weather events that alter water systems and exposure risk. Additionally, this module has multiple lectures, end of module assessment test questions, and

class-based discussions regarding dehydration and heat-related illness, and the cardiovascular sequelae of these factors.

The Waipapa Taumata Rau | University of Auckland MBChB Year 3 Blood, Infection and Immunity Module Lecture 29 entitled “Fever in Travellers,” provides explicit lecture and written teaching on the environmental impact including rising temperatures, consequential environmental change, and the resulting disease transportation and disease burden. For example, slides 13-18 covers blood borne illness following flooding and temperature changes; i.e. Malaria and myocarditis, arrhythmias, and immune activation. On slides 19-20 it discussed the pattern of blood borne disease transmission and regional disease burden. On slides 21-22 it discussed the cardiovascular sequelae and mortality rates of these diseases: “Malaria caused 20% of global deaths in children aged 1–4 years”. Links are then drawn between disease burden and the pathological and social outcomes of disease burden, regional burden and environmental change.

Additionally, there are several learning scenarios on the MBChB Online [Portal](#) Clinical scenarios that prompt consideration of environmental exposure and climate change, including [‘Febrile Returning Traveller’](#), and recommended readings that discuss heat-related illness, [community and household environment](#) and the [environmental risk factors](#), of pathology and other bodily system repercussions influenced by climate change.

Given the in-depth integration of this topic longitudinally across the core curriculum, we have given this score a 3.

1.7. Does your medical 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:

3

Score explanation:

The Waipapa Taumata Rau | University of Auckland MBChB year 3 lecture on Pacific Health Case Studies has a slide titled “Climate Change Health Impact.” There is teaching regarding the influence of environmental degradation upon forced migration, civil conflict, mental health impacts, loss of jobs and income, and diminishing of cultural identity, using Tuvalu as an example.

During the Waipapa Taumata Rau | University of Auckland MBChB 501 Pacific Health Day, students also have the opportunity to discuss the mental health impacts of climate change and climate injustice in case scenario based teaching.

Online teaching for the Waipapa Taumata Rau | University of Auckland MBChB Year 5 Psychiatry clinical attachment Lecture 19 “Pacific Health Case Studies” slide 7 discusses air pollution being a modifiable risk factor of dementia, and is reiterated in the Waipapa Taumata Rau | University of Auckland MBChB Year 4 Geriatrics teaching. Additionally, under the psychiatry attachment there is extensive small group-based and clinically-led teaching regarding the mental health and intergenerational outcomes of climate change on families, mental health in different demographics,

and psychosocial factors that influence and contribute to awareness and social impact of environmental degradation and climate change.

The Waipapa Taumata Rau | University of Auckland MBChB Year 5 Geriatrics Clinical Handbook has explicit mention of modifiable and non-modifiable risk factors associated with dementia including air pollution and early life exposure to specific environments.

Throughout the core curriculum, students develop testable objectives around these themes, and are assessed during Clinical skills assessments, Mini CEX clinical-based attachment assessments, and observed and formatively assessed through small group discussions and tutorials.

There are dedicated Clinical Scenarios and additional resources via the MBChB Clinical [Portal](#) that allow for students to assess their knowledge for clinical scenarios linked with this content, and students are expected to be aware and link their knowledge when taking patient histories in the clinical setting to rule in-out risk factors, formulate differential diagnoses, and explore the psychosocial history of patients.

We have allocated this section a score of 3 given the in-depth integration of this topic longitudinally across the core curriculum ranging from lectures and course guides through to small group activities and clinical-based assessments including patient history-taking and discussing immigration, education, occupation, travel along with previous exposures, and the impact to social, mental, and physical health outcomes.

1.8. Does your medical school curriculum address the relationships between health, individual patient food and water security, ecosystem health, 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:

3

Score explanation:

In a lecture during the Waipapa Taumata Rau | University of Auckland MBChB PopHlth 111 course module entitled “Climate Change,” the relationship with food, water, shelter, air quality and temperature and their role in health is explicitly discussed. This lecture examines how the current climate has influenced global health systems, and the ecological outcomes of increased rainfall, drought, increased temperatures and fires. The indirect effect of climate change, such as the spread of disease vectors, is also discussed. Some examples of international mass displacements or increased mortality are shared during this lecture.

In the Waipapa Taumata Rau | University of Auckland MBChB Year 2 Digestive System module, a lecture entitled “Nutrition and Health” discusses the relationship between health, nutrition, food and water security, and explores nutritional deficiency and disease burden associated with these factors. In this lecture, it is mentioned that the number of nutritional deficiencies would continue to increase due to climate change, including the link between climate change and drought, fire & flooding that can destroy staple food crops.

In the Waipapa Taumata Rau | University of Auckland MBChB Year 3 Blood, Infection and Immunity module, lecture 26 entitled “Peritonitis and Intra-abdominal Infection” provides teaching regarding pathogenic transmission through environmental and human-to-human transmission, including through food and water-borne contamination. In the Course Manual, page 148 states “Access to clean water is essential for prevention of gastrointestinal infection. In the end-of-Module written examination, there are multi-part questions which assess this topic.

In the Waipapa Taumata Rau | University of Auckland MBChB Year 3 Professional and Clinical Skills course, a lecture entitled “Pacific Health Case Studies” teaches, through lecture-based and associated readings, the health impact of climate change using an image adapted from the California Department of Public Health Website. It states the various aspects of a changing climate and the exacerbation of existing health inequities.

Throughout the MBChB core curriculum over years 2-6, students are encouraged to utilise the Clinical Scenarios via the MBChB Online [Portal](#) to consolidate their learning and assess their progress. One such clinical scenario labelled “[Infant with vomiting and diarrhoea](#)” explores the importance of clean water with the help of various learning outcomes including student’s awareness of the water supply in rural areas, access to clean water and public healthcare, and remote and farming community water contamination.

The Waipapa Taumata Rau | University of Auckland MBChB [Rural Medical Immersion Programme \(RMIP\) pathway](#) has an online module which explores the subject in depth with a focus on rural populations, at risk populations, and indigenous peoples within the context of their environment. The online module teaches “Higher proportion of people with water sourced from tanks, bores and streams in rural areas.” This directly addresses water security and its relationship to health within a specific environmental context. It demonstrates the link between health and access to safe water resources.

This topic is covered extensively through core curriculum across multiple years of the degree meeting a score of 3.

1.9. Does your medical school curriculum address the outsized impact of climate change on marginalised populations such as those with low SES, women, communities of colour, Indigenous communities, children, homeless populations, and older adults?

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

Score explanation:

Throughout the entire Waipapa Taumata Rau | University of Auckland MBChB core curriculum there are graduate learning outcomes and teaching that directly focuses on the outsized of climate change on marginalised populations (Māori - people indigenous to Aotearoa | New Zealand), and people who fall within at-risk demographics, such as, those with low socioeconomic status, women, children, infants and neonates, older adults, communities of colour, homeless populations, rural populations, and individuals with known correlated increased incidence of disease.

The Waipapa Taumata Rau | University of Auckland MBChB Year 2 Digestive System Module Course Manual page 106 has learning outcomes aligned with food insecurity, and states food security burden “will continue to increase due to climate change”.

These climate equity concepts are reinforced longitudinally through repeated core curriculum teaching on structural vulnerability and inequity affecting marginalised groups (including Māori and Pacific peoples, low socio-economic communities, children, and people experiencing homelessness) via MBChB [Portal](#) Clinical Scenarios, rural health teaching, and population health content addressing deprivation, [overcrowded and poor quality housing](#), [barriers to care](#), and [differential access and quality of healthcare](#).

Furthermore, in the Waipapa Taumata Rau | University of Auckland Year 5 Population Health Intensive, there are specific teachings which are assessed and graded through student-led group seminars, which focus on climate change and the specific impact on these communities.

The Waipapa Taumata Rau | University of Auckland MBChB Rural Medical Immersion Programme online module has explicit teaching around rural inequities, access barriers to healthcare and health drivers, and colonisation. This content is assessed through longitudinal learning.

The Waipapa Taumata Rau | University of Auckland hauora Māori (Māori health) Module makes up a significant component of the MBChB Graduate Learning Profile in Aotearoa | New Zealand. We have learning modules that are conducted both in-person and online throughout the year, across all years of the programme. This module has an explicit focus regarding colonisation, the impact of colonisation globally on the environment, and the sequelae of this including human-generated environmental change as well as climate change. We are taught explicitly disease burden, pathology, and health care limitations for marginalised populations, and are taught specific communication skills that are assessed from years 2-5 during communication assessments and in clinical-based settings.

Together, these core curriculum touchpoints demonstrate that students are taught both that climate change is a driver of health risk and that its impacts accrue disproportionately to marginalised populations, satisfying the metric requirement. Cumulatively, health and the effects of climate change and associated disease burden especially with relation to our at-risk and indigenous population is a core assessed component of our competencies assessed through the Graduate Learning Outcomes within the Graduate Learning Profile.

Given the longitudinal integration of this topic across all levels of the MBChB programme including through the Rural Medical Immersion pathway, and hauora Māori (Māori health) we have allocated a score of 3.

1.10. Does your medical school curriculum address the unequal regional health impacts of climate change globally?

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

Score explanation:

The Waipapa Taumata Rau | University of Auckland MBChB core curriculum addresses the inequities and inequalities of health burden and regional health impacts of climate change within a global context. This learning is covered in depth across multiple years and through lecture based teaching, online teaching, and assessment within the end of Module examinations as well as longitudinal testing across all 6 years of the programme through progress testing.

The Waipapa Taumata Rau | University of Auckland MBChB Graduate Learning Outcomes addressed through the various Phase/Year Guidebooks include: “Graduates will identify major threats to planetary health and critique trends in health care delivery in Aotearoa | New Zealand and internationally.”

The Waipapa Taumata Rau | University of Auckland MBChB PopHlth III course covers, through lecture-based teaching, how “local warming of 4 degrees and above will threaten food security for billions of people”, and the displacement of people due to increased severe weather events caused by climate change using Bangladesh and Mexico as specific examples.

Both the Waipapa Taumata Rau | University of Auckland MBChB year 2 Principles of Medicine module and year 2 Digestive System module have lectures that discuss the impact the environment has on cancer rates and dietary insufficiency respectively. These lectures provide explicit teaching regarding regional variation, global incidence, and how climate change exacerbates this discrepancy; “76% of the world’s population gets most of its daily nutrients from plants—yet climate change is already causing droughts, fires and flooding that can destroy staple food crops”. There is specific teaching on Bangladesh and how 13+ million people may be displaced by climate change by the year 2050. There was further teaching regarding the Hurricane Maria death toll in Puerto Rico in 2017, with the mortality within the following 3 months increasing by 4645 deaths due to access to resources. Core objectives such as understanding of the interdependent relationship between people, the environment, and population health, and the social and environmental impacts on local and/or global health are reinforced throughout the core curriculum through lecture delivery, group-based tutorials and assessment of content in second and third year courses. A lecture entitled “Pacific Health” utilised teaching with a graphic from the CDC to explain how the disproportionate effect of climate change on Pacific Islands leads to poorer health outcomes, and used the example of Cyclone Pam (2015) to illustrate regional health impacts of specific populations within a global scale.

Across the Waipapa Taumata Rau | University of Auckland hauora Māori (Māori health) modules, there are extensive teachings and parallels drawn between the unequal regional health impacts of colonisation within Aotearoa | New Zealand, with a component being climate change and resource accessibility, and this is extrapolated to a global scale with regional burden and impact on other indigenous populations worldwide.

Although there is extensive discussion across some courses, in general the overall core curriculum content is covered briefly as a whole and could be better integrated across the core curriculum. For this reason we have allocated this a score of 2.

Curriculum: Environmental Health & the Effects of Anthropogenic Toxins on Human Health

1.11. Does your medical school curriculum address the reproductive health effects of industry-related environmental toxins (e.g. air pollution, pesticides, microplastics)?

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

Score explanation:

The core curriculum addresses reproductive and foetal health effects associated with environmental and toxic exposures in depth through several required teaching components across the MBChB programme.

In the MBChB 221 Principles of Medicine lecture “Genetic Disorders,” a slide notes that exposure to chemicals and other toxic agents can contribute to adverse reproductive and foetal outcomes, including an increased risk of constitutional chromosomal disorders (Slide 12). This introduces environmental and toxic exposures as contributors to reproductive health outcomes early in the programme.

Further teaching is provided in the MBChB Year 3 Reproduction, Development and Ageing module, which considers environmental influences across these life stages. Page 109 specifically discusses the impact of environmental factors and ingested toxins on foetal growth, reinforcing the relationship between environmental exposures and developmental outcomes.

In the MBChB Year 3 Reproduction, Development, and Ageing Lecture 29, “Menopause”, reproductive ageing is linked to environmental and lifestyle exposures. The lecture states that poorly nourished females experience an earlier menopause and that exposure to cigarette smoke is associated with menopause occurring one to two years earlier. These examples explicitly link nutritional deficiency and exposure to cigarette smoke, an industry-related environmental toxin, with altered reproductive outcomes.

The MBChB Year 3 lecture “Infertility” further addresses environmental toxins as contributors to infertility, consolidating student understanding of non-genetic causes of impaired reproductive health.

Clinical application of this knowledge occurs during the MBChB Year 5 Obstetrics and Gynaecology run (MBChB 501), where reproductive toxins are discussed as contributing factors in some cases of infertility. This is explored through student-led tutorials, clinical teaching on placement, and patient interviewing that includes environmental, occupational, and exposure histories. This content is revisited during the Obstetrics and Gynaecology placement in the Year 6 trainee internship, as outlined in the O&G Handbook (p. 45).

We have allocated this section a score of 3, reflecting the depth and continuity of teaching on reproductive and foetal health effects related to environmental and toxic exposures across the MBChB curriculum.

1.12. Does your medical school curriculum address important human-caused environmental threats that are relevant to the university’s surrounding community?

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
<p><i>Score explanation:</i> The core curriculum addresses human-caused environmental threats relevant to communities in Aotearoa New Zealand through multiple required teaching components across the Waipapa Taumata Rau University of Auckland MBChB programme.</p> <p><i>In the Waipapa Taumata Rau University of Auckland POPHLTH 111 course, the lecture “Climate Change” presents food, water, shelter, air, and temperature as core determinants of health and examines the direct and indirect impacts of climate change on health systems in Aotearoa New Zealand and Australia, including extreme weather events and changes in disease vector distribution. POPHLTH111 is a compulsory first-year course for those entering the MBChB through the Health Science or Biomed Pathway, and WTRMHS100 is a further compulsory first-year course for those entering the MBChB through the Health Science pathway.</i></p> <p><i>In Year 2, the Māori Health Intensive teaching series addresses locally relevant environmental and structural threats, including housing quality, crowding, water, and sanitation, with explicit links to infectious disease risk, including COVID-19. This teaching is henceforth replicated annually across the year for all medical students through lectures, online modules and essays, and in clinical assessments.</i></p> <p><i>In Year 3, locally contextualised environmental health risks are reinforced in the Blood, Infection and Immunity module across multiple lectures. One example; the lecture entitled “Peritonitis and Intra-abdominal Infection” identifies contaminated food or water in Aotearoa New Zealand as a cause of infection and references poultry industry compliance measures. The lecture “Fever and Rash” highlights overcrowding, poor housing, poverty, and environmental factors such as mould and limited access to safe food and water as contributors to increased disease risk in rural and urban communities.</i></p> <p><i>During the MBChB years 4 - 6 general practice placements, students are encouraged to lead and present projects that have an impact on the local communities such as disease prevention or local disease sources’ posters.</i></p> <p><i>We have allocated this section a score of 3, reflecting consistent and compulsory coverage of locally relevant, human-caused environmental threats across population health, systems-based teaching, and clinically applied assessment throughout the MBChB programme.</i></p>	

1.13. To what extent does your <u>medical school</u> emphasise the importance of Indigenous knowledge and value systems as essential components of planetary health solutions?
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
<p><i>Score explanation:</i> <i>The MBChB core curriculum explicitly embeds Indigenous knowledge systems and value frameworks as foundational to planetary health understanding and responses.</i></p> <p><i>At a programme level, graduate outcomes and guidebooks explicitly embed Māori values, including kaitiakitanga (guardianship). Programme documentation states that graduates recognise their interdependence with the natural world and their responsibilities to contribute to the protection, conservation, and regeneration of ecosystems, with these expectations reiterated in the MBChB Year 2 Guidebook (2025).</i></p> <p><i>This foundation is extended in Year 4 hauora Māori (Māori health) teaching, including modules centred on rangatiratanga (as Indigenous leadership and self-determination), and kaitiakitanga (environmental guardianship grounded in Māori worldviews and Mātauranga Māori).</i></p> <p><i>We have allocated this section a score of 3, reflecting explicit, compulsory, and longitudinal integration of Indigenous knowledge systems and Māori value frameworks within planetary health teaching across the MBChB.</i></p>	

<p>1.14. Does your <u>medical school</u> curriculum address the outsized impact of anthropogenic environmental toxins on marginalised populations such as those with low SES, women, communities of colour, children, homeless populations, Indigenous populations, and older adults?</p>	
<p>This topic was explored in depth by the core curriculum. (3 points)</p>	
<p>This topic was briefly covered in the core curriculum. (2 points)</p>	
<p>This topic was covered in elective coursework. (1 point)</p>	
<p>This topic was not covered. (0 points)</p>	
Score Assigned:	3
<p><i>Score explanation:</i> <i>The core curriculum addresses how anthropogenic environmental toxins and pollutants disproportionately affect marginalised populations through required teaching across multiple years of the MBChB programme.</i></p> <p><i>In Year 2, the Māori Health Intensive includes explicit teaching on environmental and chemical exposures, including physical and chemical hazards and water and sanitation, in relation to Māori communities. Teaching across the degree also addresses the displacement of Māori, the introduction of industrial and man-made pollutants, and the concentration of environmental hazards in communities with reduced access to healthcare.</i></p> <p><i>Further reinforcement occurs in the Year 2 Cancer Continuum module, which examines how socioeconomic position, ethnicity, and rural–urban context shape health disparities, including uneven environmental exposures across regions.</i></p> <p><i>In Year 5, the compulsory Population Health Intensive includes a dedicated Climate Change topic that explicitly addresses anthropogenic toxins and pollutants, including air pollution, pesticides,</i></p>	

microplastics, PFAS, endocrine disruptors, and contaminated water. Teaching examines their disproportionate impacts on marginalised populations, including Indigenous and rural communities. Students apply this content through a structured campaign project requiring identification of affected populations, analysis of inequities and power dynamics, and development of systems-focused advocacy strategies, with outputs shared across the cohort.

The Rural Medical Immersion Programme (RMIP)'s Online Module has a learning objective, stating that throughout the programme, there will be extensive teaching on the displacement of Māori, the introduction of industrial pollutants, man-made pollutants, and the siloing of indigenous communities that are over-representing in these environments.

We have allocated this section a score of 3, reflecting consistent, compulsory, and longitudinal teaching on anthropogenic environmental toxins and the unequal burden of exposure experienced by marginalised populations across the MBChB curriculum.

Curriculum: Sustainability

1.15. Does your medical 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 point)

Score Assigned:

2

Score explanation:

The MBChB core curriculum addresses the environmental and health co-benefits of a plant-based diet through multiple compulsory teaching points across the degree across 3 different courses:

First year courses WTRMHS100 and POPHLTH111 covered the effect that plant based diets had with different emphases: WTRMHS100 discussed the effect of livestock on planetary health; specifically land use and methane production. POPHLTH 111 discussed the population and individual health benefits of “a planetary diet that cuts greenhouse emissions and maximises public health - more legumes, fruits, and vegetables, and less red meat”.

The Year 2 Digestive System module discussed more generally how planetary diets are under threat from climate change: “76% of the world’s population gets most of its daily nutrients from plants—yet climate change is already causing droughts, fires and flooding that can destroy staple food crops.”

In addition to this, the digestive system’s lecture titled “Protein Nutrition, Digestion, Absorption, and Nitrogen Balance” teaches about complete proteins containing all 9 essential amino acids. Slide 11 introduces the idea of limiting amino acids, and how complementary foods can ensure that plant-based diets offer all essential amino acids.

The environmental and health benefits of a plant based diet are covered briefly in the core curriculum across several classes, but more explicit information on how a plant-based diet benefits

human and planetary health needs to be provided in order to meet the criteria for depth and breadth. Therefore, this section has been allocated a score of 2.

1.16. Does your medical 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:

2

Score explanation:

The Anaesthesiology lecture content including the online modules and in-person placement teaching expressly covers the carbon footprint of anaesthetic gases through powerpoint teaching, course lectures and reinforced through discussion in both hospital theatre-based discussion and teaching.

The Year 5 Course Manual (Selective Handbook / Phase 2 Guidebook) Student learning outcomes across the curriculum stipulate “students are expected to practise medicine in a socially accountable and sustainable manner”, which reflects the expectations of student learning derived from lecture-based course teachings addressing the carbon footprint of healthcare across multiple lectures.

Clinical Scenarios on MBChB [Portal](#) and Associated Progress Test question topics cover healthcare sustainability concepts and discuss the environment of clinical-based care vs lifestyle and dietary measures on environmental impact.

1.17. Does your medical school curriculum cover these components of sustainable clinical practice in the core curriculum? (points for each)

Score

The health **and** environmental **co-benefits** of **avoiding** over-medicalisation, over-investigation and/or over-treatment (2 points)

2

The environmental impact of **pharmaceuticals** and over-prescribing as a cause of climate health harm. Alternatively teaching on **deprescribing** where possible and its environmental and health co-benefits would fulfil this metric. (2 points)

2

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 bicycle schemes. This is commonly known as social prescribing in the UK. (1 point)

1

Environmental impact of **surgical** healthcare on planetary health and the climate crisis, and how can it be mitigated. (1 point)

1

The impact of anaesthetic gases on the healthcare carbon footprint and ways to reduce anaesthesia's environmental impacts, such as total intravenous anaesthesia or choosing less environmentally harmful anaesthetic gas options with reduced greenhouse gas emissions. (1 point)	1
The impact of inhalers on the healthcare carbon footprint and the environmental benefit of dry powdered inhalers over metered dose inhalers. (1 point)	0
Waste production within healthcare clinics and strategies for reducing waste in clinical activities (e.g. single use items in the inpatient or outpatient setting) (1 point)	0
<p><i>Score explanation:</i></p> <p><i>For Subsections 1 and 2: Throughout all years of the medical degree core curriculum there is continual teaching and reinforcement of the importance of the reduction of polypharmacy and over-prescribing, from both a health-based perspective where we can reduce risk by reducing the amount of medications a patient has as all medicines have side effects, which would result in less allergic and adverse drug reactions and therefore less resultant medical intervention - having a flow on effect of the environmental and sustainable factors including cleaning, food supply, chemical use, investigations etc. Additionally, all students are taught how through the reduction of medication there is a reduced consumption of resources including medications, containers, administrative equipment, and investigative equipment which uses power, gases, chemicals etc.</i></p> <p><i>The Year 4 Clinical Pharmacology learning outcomes include: “principles of clinical pharmacology and therapeutics,” “dose individualization,” and “apply principles of dose individualization.” This content addresses safe, appropriate, and individualized prescribing as a core professional competency. Teaching dose individualisation and therapeutics supports sustainable clinical practice and responsible use of medicines, directly aligning with Question 17 (sustainable and responsible clinical practice).</i></p> <p><i>For subsection 3, the core curriculum includes brief teaching on non-pharmaceutical management of health conditions and prevention strategies. In Year 2 Principles of Medicine teaching, students are explicitly taught prevention strategies such as exercise are sensible to advocate and provide additional health benefits. This supports the non-pharmaceutical management component of sustainable clinical practice. Furthermore, within the respiratory module’s COPD workshop, non-pharmaceutical interventions such as smoking cessation and the encouragement of physical activity and weight reduction are highlighted in the guidelines as more important in the management compared to pharmaceutical intervention. Therefore, 1 mark has been granted.</i></p> <p><i>For subsection 4, during specialty surgery and general surgery placement rotations in years 4 and 6, students partake in discussion sessions and student-led assessed teaching presentations which cover the impact of surgical procedures on the environment, including preventative measures, the environmental effects of surgical procedures (gases, investigations, disposables including surgical instruments, and resources that could be sustainable).</i></p> <p><i>For subsection 5, anaesthetic medications are introduced in the Year 3 module on the nervous system. During a lecture titled “Inhalational and intravenous anaesthetic gases,” Desflurane is noted to be a greenhouse gas, with its use therefore limited as an anesthetic agent. As alternative gases are listed, this provides students with options to critically appraise gases that are harmful to the environment and choose an alternative, such as Isoflurane. Therefore, 1 mark has been allocated.</i></p>	

Curriculum: Clinical Applications

1.18. In training for patient encounters, does your medical school's curriculum introduce strategies to have conversations with patients about the health effects of climate change?

Yes, there are strategies introduced for having conversations with patients about climate change in the **core** curriculum. (2 points)

Yes, there are strategies introduced for having conversations with patients about climate change in **elective** coursework. (1 point)

No, there are **not** strategies introduced for having conversations with patients about climate change. (0 points)

Score Assigned:

2

Score explanation:

The core curriculum includes training on how to communicate with patients about the health effects of climate change. As part of required teaching, students are introduced to specific communication strategies for discussing climate related health risks in patient encounters, including evidence based framing, using locally relevant and personally meaningful examples, and maintaining a clinical, health focused approach. Lifestyle modification, analysis of risk factors including migration, environmental impact and disease burden across global populations is taught throughout the first two phases of the curriculum, and extensively applied through the final phase of the curriculum in patient interactions. This is supported by structured teaching resources on climate change communication and is delivered within the required programme, consistent with a score of 2. Additionally, during the small group activities in years 2 and 3, (year-long group-based learning and assessments) this discussion is interwoven, including through teaching, clinician-patient role play case scenarios, and reading material. We are provided extensive opportunity throughout the core curriculum for the education and implementation of strategic conversation regarding the health effects of climate change, and have allocated a score of 2 for this section.

1.19. In training for patient encounters, does your medical school's curriculum introduce strategies for taking an environmental history or exposure history?

Yes, the **core** curriculum includes strategies for taking an environmental history. (2 points)

Only **elective** coursework includes strategies for taking an environmental history. (1 point)

No, the curriculum does **not** include strategies for taking an environmental history. (0 points)

Score Assigned:

2

Score explanation:

As part of teaching around how to take a patient's history, students are expected to ask about current and past occupations of the patient, as well as any exposure to dust, fumes or chemicals at work & at home, if relevant. Students are also encouraged to ask about patients' hobbies, such as bird keeping. Patients' living situations should also be discussed (for example, residing in mouldy or cold homes, or drinking tap water vs. lake water). This is detailed in the core clinical teaching manual "The Red Book," supplied by the medical programme directorate.

The respiratory module during the preclinical years discusses workplace exposure for various respiratory conditions, including a lecture about lung function tests, assessing the impact of

workplace exposure on airway/lung function as an indication to perform this investigation. Additional lectures in this module, such as one on lung cancer, explores asbestos exposure as a risk factor for malignant mesothelioma. A workshop on COPD in the second preclinical year discusses exposure (occupational or not) to tobacco, smoke, dust, chemicals & fumes being risk factors, and to elicit this history.

Learning outcomes under the clinical and communication skills domain detail how students should be able to “assess the environmental and social issues that contribute to the medical issues.”

As there has been extensive discussion around exposure & environmental history throughout preclinical & clinical years, and all the students are expected to ask these questions and are assessed on the inclusion of these elements to a history, we have allocated a score of 2 for this section.

Curriculum: Administrative Support for Planetary Health

1.20. Is your medical school currently in the process of implementing or improving Education for Sustainable Healthcare (ESH)/planetary health education?

Yes, the medical school is currently in the process of making **major** improvements to ESH/planetary health education. (4 points)

Yes, the medical 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

Score explanation:

The 2025 Submission for the Waipapa Taumata Rau | University of Auckland Reaccreditation Australian Medical Council (AMC) document lists “Sustainability as a Landing Place”, stating “Graduates realise that they are interdependent with the natural world and acknowledge kaitiakitanga (guardianship). They recognise their responsibilities to contribute to the protection, conservation and regeneration of local, regional and global ecosystems, communities and economies.”. This document also lists Planetary Health as an area of curriculum development since 2020/2021, with a status of Early Implementation. The goal states that planetary health will be incorporated within the next five years. The reaccreditation was confirmed as of August 2025. The reaccreditation will be able to be found at this [link](#) when the AMC update the site.

Education for Sustainable Healthcare is incorporated into the Graduate Learning Outcomes as of 2025, accessible under the program’s MBChB [Portal](#) that covers years 1-6. Under the Population Health Domain, the specific wording is that “Graduates will identify major threats to planetary health and critique trends in health care delivery in Aotearoa | New Zealand and internationally.”

Given the university has been making major improvements to ESH and planetary health education since 2021, have employed designated staff for oversight of the curricular implementation, and this has been ratified in the medical school reaccreditation alongside the curricular-integration, we have allocated a score of 4.

1.21. How well are the aforementioned planetary health/Education for Sustainable Healthcare topics integrated longitudinally into the core curriculum?

Planetary health/ESH topics are **well integrated** into the core medical school curriculum. (6 points)

Some planetary health/ESH topics are appropriately integrated into the core medical student curriculum. (4 points)

Planetary health/ESH is not integrated and is primarily addressed in **(a) standalone lecture(s)**. (2 points)

There is **minimal/no** education for sustainable healthcare. (0 points)

Score Assigned:

6

Score explanation:

Planetary health and Education for Sustainable Healthcare are integrated longitudinally throughout the MBChB core curriculum rather than taught as a single standalone lecture. Programme-level evidence demonstrates this as an explicit expectation of graduates, including that graduates are “interdependent with the natural world and acknowledge kaitiakitanga (guardianship),” have responsibilities for protection and regeneration of ecosystems, are prepared to tackle “resource constraint, and climate change,” and practise in a “socially accountable and sustainable” manner.

The Graduate Learning Outcomes further specify that graduates will “identify major threats to planetary health and critique trends in health care delivery in Aotearoa | New Zealand and internationally,” indicating curriculum-wide integration rather than isolated teaching. In Year 2, planetary health-aligned capabilities are embedded in the core course structure, with “People and Place” and “Sustainability” listed as capabilities developed, and population-health framing integrated into required clinical teaching (for example nutrition and population guidelines).

In Year 3, sustainability remains an explicit programme capability (“Capability 2: Sustainability”), and guidebook statements confirm that population health perspectives are integrated into clinical learning and assessed, including assessment tasks requiring reflection on equity, ethics, and population health, further embedding these themes beyond a single year.

In Year 4, compulsory hauora Māori (Māori health) modules explicitly embed Indigenous worldview and environmental stewardship concepts such as kaitiakitanga (guardianship and care “in relation to the environment”), and these modules include graded reflective activities, demonstrating structured and assessed integration.

In Year 5, programme documentation explicitly states that “equity, sustainability and population health are reinforced throughout clinical training,” supporting continued reinforcement in clinical years.

In Year 6, the Phase 3 guidebook reiterates planetary health as a graduate learning outcome, confirming continuity through the end of the programme.

Collectively, these programme-level outcomes, repeated year-level capability statements, core teaching content, and assessed components across Years 1 to 6 are well integrated appropriately and demonstrate that planetary health and sustainable healthcare are delivered as a longitudinal theme throughout the core curriculum, consistent with a score of 6.

1.22. Does your medical school employ a member of faculty to specifically oversee and take responsibility for the incorporation of planetary health and sustainable healthcare as a theme throughout the course?

Yes, the medical school has a specific faculty/staff member responsible for overseeing curricular integration of planetary health and sustainable healthcare. (1 point)

No, the medical school does **not** have a specific faculty/staff member responsible for overseeing curricular integration of planetary health and sustainable healthcare. (0 points)

Score Assigned:

1

Score explanation:

We have allocated a score of 1 as there are two medical school staff members employed with seats on the University Faculty of Medical and Health Sciences Sustainability committee; as indicated on pages 145-163 of the university [Calendar Document](#). These staff attend regular meetings and are in charge of aligning the curriculum and developing in accordance with University Policy.

1.23. 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:

2

Score explanation:

The Waipapa Taumata Rau | University of Auckland MBChB core curriculum includes explicit, applied teaching on civic engagement and advocacy to address structural and environmental determinants of health. Programme level outcomes and core curriculum documents identify advocacy and social accountability as graduate expectations, including explicit “health advocacy” as a required capability to improve health at individual, community and population levels.

In Year 5, the required Population Health Intensive provides structured training in policy and civic engagement through a campaign project that explicitly requires students to analyse underlying determinants and inequities, and identify who holds power to change systems (for example cabinet, politicians, ministries, councils and Health New Zealand - Te Whatu Ora). Students then design strategies to achieve system change, including “advocating the issue to key decision-makers” and pursuing law, regulation or policy change.

Core teaching includes environmental civic action examples and local planetary health action (for example, community campaigning to prevent environmental harm and promote planetary health at a local level), reinforcing advocacy in relation to environmental determinants. Across other core learning contexts such as rural health and clinical scenarios, advocacy is explicitly taught as a professional role and applied to community and population strategies (including public education and communicable disease control measures), demonstrating that civic engagement and advocacy

are embedded longitudinally and operationalised beyond clinical care. Overall, we feel the explicit teaching on targeted engagement and advocacy is briefly covered and a significant component of what is done to address these matters is self-directed by students across the clinical years. For this reason, we have allocated a score of 2.

Section Total (69 out of 75)

92.00%

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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 <u>institution</u>?	
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:	2
<p><i>Score explanation: At the Waipapa Taumata Rau University of Auckland's Faculty of Medical and Health Sciences, several faculty members conduct research related to planetary health or include "climate change impacts and adaptation" among their research interests. However, for many of these staff, planetary health is not their primary focus and is often listed alongside numerous other research areas, so it is not consistently pursued. Research in related fields occurs across public health, environmental health, Māori and Pacific health, and health systems, examining the intersections of climate change, environmental factors, sustainability, and health outcomes. Some faculty members are also involved in national and international sustainability and climate-health initiatives or working groups. While planetary health research is active within the University, it is not yet consolidated as a primary research focus for a significant portion of faculty.</i></p>	

2.2. Is there a dedicated department or institute for interdisciplinary planetary health research at your <u>institution</u>?	
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:	1
<p><i>Score explanation: The Waipapa Taumata Rau University of Auckland has the School of Environment which is dedicated to environmental research. However, the School of Environment is not part of the Faculty of Medical and Health Sciences, which is where all healthcare related education and research is conducted. This suggests there is research on planetary health but no dedicated interdisciplinary department for planetary health research, justifying a score of one.</i></p>	

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
<p><i>Score explanation: The Waipapa Taumata Rau University of Auckland has processes in place to ensure that communities disproportionately affected by climate change and environmental injustice can provide input on research priorities. While there is not a formal mechanism granting these communities decision-making power over the entire institutional research agenda, community voices are actively incorporated through advisory and participatory approaches. For example, Te Poutoko Ora a Kiwa (Centre for Pacific and Global Health) engages closely with Pacific communities to guide research design and ensure that studies address locally relevant health and climate challenges. Similarly, collaborative initiatives such as the Whareponga Valley workshops in Gisborne involve local iwi and community members in shaping research directions related to environmental and climate impacts. These practices demonstrate that community perspectives meaningfully advise the University's climate and environmental research agenda, supporting a score of 2 points.</i></p>	

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
<p><i>Score explanation: The Waipapa Taumata Rau University of Auckland provides online resources related to sustainability, health, and the environment; however, it does not currently maintain a single, dedicated planetary health website that fully centralises all ongoing and past research, leaders, events, and funding opportunities. The University's Sustainability and Environment webpages offer information on sustainability initiatives, teaching, research, and engagement activities across the institution, while SDG-focused pages highlight the University's contributions to global sustainability goals. Individual research centres, such as Te Poutoko Ora a Kiwa (Centre for Pacific and Global Health) and Ngā Ara Whetū – Centre for Climate, Biodiversity & Society, provide information about specific projects, events, and researchers, but these sites are not integrated into a single, institution-wide hub for planetary health. Overall, while relevant information is available online, it is dispersed across multiple pages and platforms, which aligns with a score of 2 points.</i></p>	

2.5. Has your <u>institution</u> 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
<p><i>Score explanation: The Waipapa Taumata Rau University of Auckland has demonstrated strong and ongoing engagement with planetary health and sustainable healthcare through a combination of institution-wide, faculty-level, and conference-based initiatives. In addition to hosting and supporting conferences and symposia related to planetary health, the University runs a Sustainability Teaching Network that holds monthly one-hour Zoom meetings where teaching staff and occasional external speakers share how planetary health, the Sustainable Development Goals (SDGs), and sustainability practices are incorporated into teaching. Members of the Faculty of Medical and Health Sciences regularly attend and present at these sessions, as outlined in the University's 2025 SDG summary.</i></p>	

Within the Faculty, further initiatives include the School of Pharmacy's organisation of two one-hour workshops on data management and sustainability, and a one-hour planetary health webinar hosted by Te Kupenga hauora Māori (Māori health) in October, primarily advertised to staff but open to all interested participants. The University has also hosted and participated in several relevant conferences, including the International Sustainable Healthcare Symposium held in Auckland in March 2025, the Te Poutoko Ora a [Kiwa Research Symposium](#) in June 2025 focusing on Global and Pacific health responses to climate change, involvement in The [Future of Sustainability](#) virtual conference in November 2025 through ACTS membership, and the [Blue and Green Technology](#) Conference hosted on campus in December 2025, all of which reflect sustained institutional commitment to planetary health and sustainability.

Within the School of Nursing The Waipapa Taumata Rau | University of Auckland sponsored the [Council of Deans of Nursing and Midwifery \(Australia & New Zealand\) Symposium 2025](#), which had a focus on 'Action for a healthier future'. There were [presentations](#) and posters that were directly about planetary health and the awareness nurses' need. Therefore a score of four is given.

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

Score explanation: The Waipapa Taumata Rau | University of Auckland is part of the Association of Pacific Rim Universities ([APRU](#)), an international network connecting universities from Asia, Australasia and the Americas to develop solutions in the Pacific regions. One of their three main goals includes improving sustainability.

The Waipapa Taumata Rau | University of Auckland runs [Te Poutoko Ora a Kiwa](#), a research centre dedicated towards improving Pacific and global health through collaboration with Pacific peoples in Aotearoa | New Zealand and Oceania. Their work includes a focus on climate change.

Due to this extensive involvement, a score of one is given.

Section Total (12 out of 17)

70.59%

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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 <u>institution</u> 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:	2
<p><i>Score explanation: The Waipapa Taumata Rau University of Auckland holds strong partnerships with iwis (tribes), NGOs, and industries that are built on commitments to Te Tiriti and tangata whenua (the Treaty of Waitangi and indigenous people of New Zealand, respectively). The institution's future vision plan is a responsibility to become a sustainable university by 2030; this strategy stems from the Sustainable Development Goals which prioritise creating a fair and ethical future. These targets are to be integrated in all partnerships and education plans, meaning that when the institution collaborates with external organisations, their sustainability plan gets referenced.</i></p> <p><i>The University provides some information on how a few of their partnerships work toward a sustainable environment as can be found in their estate plan; for example, they work with Auckland Transport to provide sustainable transport for students commuting between campuses. However, this is a council-run organisation, not community. Since there are no details as to how planetary health is promoted through community organisations, a score of two has been given.</i></p>	

3.2. Does your <u>institution</u> 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:

2

Score explanation:

The Centre for Climate, Biodiversity, and Society, [Ngā Ara Whetū](#), at the Waipapa Taumata Rau | University of Auckland hosts multiple events throughout the year that tackle issues of climate justice and planetary well-being. This group is the flagship of research for sustaining our planet by creating lasting natural resources. The group holds various seminars and workshops to discuss current environmental challenges and new innovations to resolve them. While these events are few, their podcast 'SUSTAIN', which debates global and local climate issues, are available to the community at any time. While the public are welcome at these events, they are unlikely to attend, unless subscribed to the newsletter, due to poor advertising. The group's marketing primarily targets students, alumni, and researchers who have a keen interest in environmental sustainability. For this reason, a score of 2 has been awarded.

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

Score explanation: The Waipapa Taumata Rau | University of Auckland website contains articles under the subpage 'News and events'; topics include '[Sustainable Impact](#)' which focuses on action that impacts the environment, society, and indigenous development. Coverage of planetary health is not always expressed in these articles, but does appear sporadically. This information is easier to isolate from other news pieces by searching for 'environment' on the home page and is equally accessible to all students.

Individual faculties sometimes communicate via email about ongoing events or projects that pertain to planetary health; however, since these are infrequent, a score of one is appropriate.

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:

1

Score explanation: The Waipapa Taumata Rau | University of Auckland provides some post-graduate and professional learning opportunities related to planetary health and sustainability, but these are not part of a formal, structured continuing professional development (CPD) programme. While the Faculty of Medical and Health Sciences offers a broad range of professional development and short courses for health practitioners, none focus specifically on planetary health or sustainable healthcare.

The university does, however, offer relevant learning opportunities through its research centre Ngā Ara Whetū – [Centre for Climate, Biodiversity and Society](#), established in 2022. The centre focuses on transdisciplinary research, education, and engagement for planetary wellbeing, and offers workshops, training sessions, seminars, and teaching events that postgraduate learners or health professionals can attend. In addition, UoA provides [sustainability-related courses](#) (e.g., SUSTAIN 100/200/300) and undertakes research linking climate change, biodiversity, and human health. These initiatives demonstrate the university’s engagement with planetary health, but do not constitute a formal CPD pathway for practising clinicians.

At the national level, [Sustainable Healthcare Aotearoa](#) develops and shares educational material with health professionals via email and their website. It functions as a professional network rather than a formal education provider, and participation is optional. [Te Whatu Ora \(Health New Zealand\)](#) has sustainability teams at both national and regional levels, including dedicated teams such as in the Waitaha-Canterbury region. While these teams focus on environmental sustainability and climate resilience, there is no structured, nationwide CPD programme in planetary health. Other organisations, such as [Healthify](#), provide some relevant resources, though these are not comprehensive or consistently aimed at sustainable healthcare.

Overall, while a range of resources and opportunities exist, engagement is voluntary, and these activities are not coordinated through the Waipapa Taumata Rau | University of Auckland itself.

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:

2

Score explanation: The [Te Whatu Ora \(Health New Zealand\) HealthEd website](#) is the primary resource for addressing national-level environmental health risks, rather than risks specific to local communities served by individual hospitals. It provides clear, accessible information on a variety of [environmental exposures](#), including “Climate change and environmental health,” “Heat,”

“Drinking water,” and “Sewage and grey water.” Te Whatu Ora also maintains public-facing pages covering pollutants, toxins, food safety, and the health impacts of climate change. The content is presented in a straightforward, easy-to-understand format, making it accessible to anyone with internet access. Patients can explore these resources at their convenience and follow links to expand their knowledge. For those without reliable internet access, healthcare professionals can provide printed copies or explain the relevant exposures directly.

The Waipapa Taumata Rau | University of Auckland Pharmacy Department actively incorporates Te Whatu Ora resources to support both medical and environmental health education. Additionally, [Healthify](#) is a valuable platform that patients can use independently, offering guidance on topics such as [heat stroke and heat exhaustion](#), [disinfectants](#), [water](#) and [swimming water quality](#).

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:

2

*Score explanation: Although individual hospitals may not maintain their own dedicated resources, there are several **national initiatives** that provide accessible information for the public in clear, patient-friendly formats.*

- [Healthify](#) offers guidance on climate-related health risks, including issues such as climate change anxiety.
- The [Ministry for the Environment \(Manatū Mō Te Taiao\)](#) hosts the page “Climate change and our wellbeing”, which outlines health impacts such as heatstroke, mental health challenges, and food security concerns.
- [Te Whatu Ora – Health New Zealand](#) has published the Royal Society Te Apārangi report “[Human Health Impacts of Climate Change for New Zealand](#)”, which explains both the direct and indirect health consequences of climate change, as well as the benefits of mitigation.

Because these resources are produced at the national level, they are available to patients across all hospitals affiliated with and without the Waipapa Taumata Rau | University of Auckland. While access may depend on digital literacy and the availability of devices, health professionals are encouraged to bridge this gap by printing materials or discussing the information directly with patients. Thus 2 points are awarded.

Section Total (10 out of 14)

71.43%

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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 <u>institution</u> offer support for students interested in enacting a sustainability initiative/QI project?	
Yes, the institution <i>either</i> offers grants for students to enact sustainability initiatives/QI projects <i>or</i> 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:	2
<p><i>Score explanation:</i> Students who are interested in enacting a sustainability/QI-centred project, whether aimed within the University itself or externally, have several opportunities for funding within the University. Through the Summer Research program at the Waipapa Taumata Rau University of Auckland, students can apply for any sustainability-related research projects available or a student can contact relevant supervisors with their own potential sustainability/QI project to undertake over the summer. Those who are successful are then eligible for a Summer Research Scholarship, providing them with a total of \$6,750 NZD given in fortnightly installments. As there is support given to students to apply and carry out the Summer Research program, a score of two has been given.</p>	

4.2. Does your <u>institution</u> 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:	1
<p><i>Score explanation:</i></p>	

As of 2025, the University provides opportunities for students in the summer break and/or in semester to partake in projects relating to [planetary health/sustainable healthcare](#). However, to partake in these, students must actively seek out supervisors among suitable faculty members or apply for the Summer Research program and be selected for a relevant project. Furthermore, there is no guarantee that sustainability-related projects will be available as it is dependent on staff offering such projects or being interested in supporting the student. There are no specific planetary health/sustainable healthcare research programs offered by the University itself. As a result, a score of one is given.

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:

1

Score explanation:

The Waipapa Taumata Rau | University of Auckland has a website in which there is a search function and a staff directory. This allows students to search for any current research initiatives/projects through [Rangahau | Research](#) along with searching for staff or postgraduate students who have similar research interests to themselves and would be willing to undergo a project. However, there is no specific section of the webpage dedicated to information on planetary health and sustainable healthcare and thus accessing current information on sustainability initiatives/projects and contacting potential mentors is difficult. Therefore, a score of one has been given.

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
<p><i>Score explanation: Waipapa Taumata Rau University of Auckland, student engagement (Sustainable Future collective) in sustainability and planetary health is supported by faculty and institutional initiatives. Academic networks such as Teaching and Learning for a Sustainable World bring together university educators to develop sustainability education and interdisciplinary collaboration across faculties. In addition, faculty-led research centres such as Ngā Ara Whetū – Centre for Climate, Biodiversity and Society support research, education, and student engagement on climate change, biodiversity, and environmental sustainability. These initiatives demonstrate that academic staff and university structures actively support sustainability and planetary health engagement for students as of 2026.</i></p>	

<p>4.5. Is there a student liaison representing sustainability interests who serves on a <u>department or institutional</u> decision-making council to advocate for curriculum reform and/or sustainability best practices?</p>	
<p>Yes, there is a student representative who serves on a department or institutional decision-making council/committee. (1 point)</p>	
<p>No, there is no such student representative. (0 points)</p>	
Score Assigned:	1
<p><i>Score explanation: There are currently two student representatives who serve on the Sustainability Management Board within the University which is responsible for coordinating the University’s sustainability agenda within the context of local, national, and international sustainability contexts. Given that there are two student representatives on this board, a score of 1 has been awarded.</i></p>	

4.6. In the past year, has the <u>institution</u> 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.	0
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

Score explanation:

There are a number of initiatives active at the Waipapa Taumata Rau | University of Auckland that allow students to interact with the environment in a positive and meaningful manner. Students are able to join a variety of [clubs and societies](#) with sustainability and planetary health at the forefront, such as the [Global Health Interest Group](#), [Generation Zero UoA](#), and the [Sustainable Future Collective](#). These groups help raise awareness of planetary health issues, bring together students from different faculties to discuss and implement meaningful sustainability initiatives, and advocate for environmental and policy change within the University.

Students are also able to participate in local volunteer opportunities facilitated through [UoA Volunteers](#), which include activities such as tree planting, upkeep of cycleways, and cleaning public spaces including beaches and parks. In addition, students living in [self-catered accommodation](#) have access to communal gardens, which they can utilise and help maintain, providing hands-on experience with sustainable food systems and environmental stewardship.

The University also offers wilderness and outdoor programmes through both faculties and student-led clubs. Within the Faculty of Medical and Health Sciences, wellbeing walks are offered to [pharmacy students](#), bringing together students and staff while encouraging appreciation of the natural environment and fostering social connection. Student clubs such as the [Tramping Club](#) and the [Rock and Alpine Club](#) further provide opportunities for outdoor engagement through activities such as hiking, tramping, and alpine pursuits.

Overall, the Waipapa Taumata Rau | University of Auckland offers multiple co-curricular initiatives that allow students to interact with the environment, develop an understanding of planetary health, and actively contribute to sustainability and community resilience.

Section Total (10 out of 15)

66.67%

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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 <u>institution</u> 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
<p><i>Score explanation:</i> <i>The Waipapa Taumata Rau University of Auckland has a Sustainability Office with a “vision and a set of principles to guide our actions to support sustainability and improve our environmental performance.” The office has a Sustainability Management Board made up of a number of appointed committee members including the Deputy Vice-Chancellor for Strategic Engagement as the Chair, along with lead representatives, nominees and student representation. This office convenes four times per year.</i> <i>However, as this office oversees all faculties there is no staff allocated specifically to the Faculty of Medical and Health Sciences or the Hospital.</i></p>	

5.2. How ambitious is your <u>institution's</u> 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

Score explanation:

The Waipapa Taumata Rau | University of Auckland has published a plan to achieve carbon neutrality by 2030, titled "[Te Taumata Tukuwaro-kore | Net Zero Carbon Strategy](#)." This outlines what the university plans to do in order to achieve carbon neutrality. It includes the Universities emissions, the source of the emissions, current trends and their priorities to reduce these emissions.

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:

3

Score explanation:

As of October 2024 the Waipapa Taumata Rau | University of Auckland utilises 100% renewable energy sourced from [Totitū carbonzero certified suppliers](#). The University also launched in 2024 the use of onsite solar generation at the B201 building on campus, marking a start to onsite renewable energy generation.

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

Score explanation:

The Waipapa Taumata Rau | University of Auckland currently abides by a [Sustainable Design and delivery guideline](#) which was published in 2024. These guidelines ensure that a number of various criteria are met, particularly for new constructions. Each new project (including renovations) must be 'Green accredited', meaning it must achieve a Green Building Certification of 6 stars or above to be accredited.

The planning and designing process of a new project requires certain subcategories to be fulfilled. Some examples of these include pedestrian safety/mobility, assessing the life-cycles of existing buildings in order to see whether their materials can be repurposed for new projects, analysing whether the aesthetics of the new building align with sustainability (e.g. passive solar design, green roofs, etc.), and prioritising energy performance.

Projects also undergo climate change analysis, such as energy and water usage demands, exploring whether the impacts of environmental/weather hazards can impede the building's normal operation, and a thorough review of best practice by an accredited professional.

Other sustainability considerations not mentioned above but also extensively covered in the guideline include evaluating energy consumption, construction materials, biodiversity, and minimising waste production.

For older buildings, the University prioritises retrofitting and remodelling initiatives, in order to strengthen the existing structures. Almost all of the older buildings have undergone or are currently undergoing remodels to their existing frameworks, by repurposing the original materials/spaces (with adherence to the sustainability guidelines). This is in exception to the University's Clock Tower building, which is a heritage landmark and therefore will not be remodelled.

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:

1

Score explanation:

The Waipapa Taumata Rau | University of Auckland has implemented meaningful and accessible strategies to encourage environmentally friendly commuting, many of which are actively utilised by its community. Since 2018, the University has prioritised [sustainable commuting](#) for staff and students by converting existing carpark spaces into secure bike stores, with nine communal bike storage locations now available across campuses and accommodation buildings to support cycling and micromobility. Additional initiatives include participation in the [Aotearoa Bike Challenge](#) (with a student category), free bike and scooter safety checks, e-bike partnerships with the Electric Bike Team, and designated rideshare carpool parking bays, such as those in the Owen G Glenn Building.

The University's [Sustainability Policy](#) explicitly promotes walking, cycling, public transport, and electric vehicles, and its city-based campuses are well integrated with [Auckland's public transport network](#), including buses, trains, and ferries, with walking and cycling infrastructure actively promoted to students.

While the University has expressed commitments in its Sustainability Policy to further promote walking, public transport, and electric vehicles, these strategies remain largely proposed rather than fully implemented or widely advertised to students. Partnerships with Auckland Transport and existing public transport concessions support accessibility, but overall progress in implementing comprehensive, sustainable transport initiatives across the University is limited. For this reason, a score of one is awarded.

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:

2

Score explanation:

The Waipapa Taumata Rau | University of Auckland offers general rubbish, paper recycling, and can/bottle recycling bins across the campus. Additionally, commercial kitchens within campuses expect users to separate any pre- and post- consumer food waste for [composting](#). Staff-driven models are in place in staff kitchens also.

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 **adequate** sustainability 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

Score explanation:

The Waipapa Taumata Rau | University of Auckland's formal [Sustainability Policy](#) demonstrates a commitment to reducing single-use disposable materials and minimising waste. This is done by recovering resources for reuse and recycling. When planning campus events, the university uses a [Sustainable Events Guide](#). The Guide offers sustainable recommendations for catering, including the use of reusable cutlery and serving local products whenever possible. A recent example is the

campus campaign "[Plastic-Free July](#)". The campaign involved students and staff bringing reusable containers, which earned them rewards from retailers. However, there is still no information on whether the retailers were encouraged to promote sustainable eating practices. While there is a commitment to reduce waste and packaging, it is rather an optional choice than an enforced set of campus-wide requirements.

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

Score explanation:

The Waipapa Taumata Rau | University of Auckland has formal, enforceable policies that incorporate sustainability requirements into procurement processes. The University's [Procurement Policy](#) and [Sustainability Policy](#) outline environmental, ethical, and social expectations for purchasing decisions, including reducing environmental impacts, minimising waste, and supporting suppliers that meet responsible environmental and social standards. The Procurement Policy explicitly states that breaches of policy may result in disciplinary action, demonstrating that these requirements are enforceable rather than optional.

In addition to these formal requirements, the University is actively engaged in efforts to improve the sustainability of procurement practices, such as incorporating sustainability considerations when selecting suppliers (including renewable energy providers) and promoting responsible sourcing of laboratory and operational supplies. Together, these policies and initiatives demonstrate that the University has established sustainability requirements for procurement and continues to work toward strengthening sustainable purchasing practices across the institution.

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

Score explanation:

The Waipapa Taumata Rau | University of Auckland has a [Sustainable Events Guide](#) that provides organisers with information on how to implement a Net Zero Strategy in their events. The Guide draws from the ISO20121. The Guide ensures that all events are coordinated and run in accordance with the University Sustainability Policy. The Guide then has a formal checklist that the organisers are meant to complete, such as ensuring reusable cutlery and minimising single-use plastics. While these guidelines exist, they rely solely on individual event organisers to implement the recommendations, making them a non-mandated requirement.

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

Score explanation:

[Sustainable Laboratories in science](#) is an initiative designed to educate lab managers, student researchers, lab users, staff, and academics on more sustainable lab practices. The initiative provides practical tools and resources to reduce waste, power and water in labs, thus encouraging eco-friendly alternatives for lab practices. There is a working group called [the Science Sustainability Network](#). The groups span different departments in the University and aim to reduce electrical, environmental, and water wastage in the labs. Furthermore, Liggins Institute at the University earns [MyGreenLab certification](#). The Liggins research lab is the first university lab in Aotearoa | New Zealand to receive this certificate. The changes that were [implemented](#) were increased recycling, reuse of laboratory material and many [more](#). From June 2024, the School of Pharmacy department has also earned a MyGreenLab certification. This represents how the university consistently aims to make more lab spaces more environmentally sustainable.

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:	4
<p><i>Score explanation:</i></p> <p><i>The Waipapa Taumata Rau University of Auckland has demonstrated a clear commitment to fossil-fuel divestment through its Foundation. In August 2019, the University announced its intention to divest from fossil fuel investments, specifically those listed in the Carbon Underground 200, and established a Responsible Investment Policy under an Environmental, Social, and Governance (ESG) framework. The policy explicitly states that the Foundation will not invest in funds deriving revenue from fossil fuel reserves, illegal or nuclear weapons, or the manufacture of tobacco products.</i></p> <p><i>According to the Foundation’s Donor Reports, residual exposure to fossil-fuel investments has been progressively reduced. The 2023 report indicated 0.0075% of investments still derived revenue from fossil fuels, while the 2024 report noted a slightly higher residual exposure of 0.025%. Despite this minor fluctuation, the Foundation consistently reports that fossil-fuel holdings have been effectively eliminated from the portfolio.</i></p> <p><i>Although the University has transitioned to 100% renewable energy on campus as of October 2024, there is no publicly available information indicating whether divested funds have been actively reinvested into renewable energy companies or other sustainability initiatives, though this commitment exists.”</i></p> <p><i>Overall, the Waipapa Taumata Rau University of Auckland has fully divested from fossil-fuel holdings and maintains a clear, formal commitment to exclude fossil-fuel-derived revenue from its investment portfolio. Despite minor year-to-year fluctuations in residual exposure reported in donor statements, the Foundation consistently affirms that fossil-fuel investments have been effectively eliminated. The University has also demonstrated a forward-looking approach by committing to reinvest divested funds into renewable energy companies or renewable-energy-focused campus initiatives, reinforcing its broader sustainability goals and supporting its transition to 100% renewable energy use on campus.</i></p>	

Section Total (27 out of 32)	84.38%
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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 Waipapa Taumata Rau | University of Auckland’s School of Medicine.

The following table presents the individual section grades and overall institutional grade for the Waipapa Taumata Rau | University of Auckland’s School of Medicine on this Planetary Health Report Card.

Section	Raw Score %	Letter Grade
Planetary Health Curriculum (30%)	$(69/75) \times 100 = 92.00\%$	A
Interdisciplinary Research (17.5%)	$(12/17) \times 100 = 70.59\%$	B
Community Outreach and Advocacy (17.5%)	$(10/14) \times 100 = 71.43\%$	B
Support for Student-led Planetary Health Initiatives (17.5%)	$(10/15) \times 100 = 66.67\%$	B
Campus Sustainability (17.5%)	$(27/32) \times 100 = 84.38\%$	A-
Institutional Grade	$(A \times 0.3 + B \times 0.175 + C \times 0.175 + D \times 0.175 + E \times 0.175) = 78.89\%$	B+

Report Card Trends

Section Overview

This is the first Planetary Health Report Card for the Medical Programme, therefore trends are not available. Trends for sections 2-5 at Waipapa Taumata Rau | University of Auckland will be available through the Pharmacy and Nursing Report Cards this year.