

8 April 2009

The Hon Peter Garrett AM, MP  
Minister for Environment, Heritage and The Arts  
PO Box 6022  
House of Representatives  
Parliament House  
Canberra ACT 2600

Dear Mr Garrett

**Re: Nomination to list the koala as Vulnerable under the EPBC Act.**

I am aware that the Australian Koala Foundation has nominated the Koala Coast koala population to be listed under the EPBC Act and the Australian Government is reviewing their previous nomination for Vulnerable in the coming months. I hereby convey to you my strongest support for their application both personally and also on behalf of our organisation, Wildlife Warriors. My reasons for this are as follows:

1. Many koala populations across the country are in rapid decline.
2. Most of the NSW and Qld koala populations are suffering from a prevalence of clinically significant disease virtually unprecedented in any wildlife population.
3. The key threatening processes of habitat loss/fragmentation and epizootic disease remain unmanaged.
4. Current federal and state legislation has failed to adequately protect koalas from anthropogenic threats.

At recent koala crisis taskforce meetings, convened at the request of the Premier of Queensland, I, and others stated plainly that as scientists we could not assure the government of the survival of koalas in the wild *even if all habitat clearing were to cease immediately*. Our reasons were simply that the population is highly fragmented, largely distributed across land of unprotected tenure/use, and subject to high risk of ongoing and frequent extirpation events due to unmitigated threats.

I reiterate this to you, as a leading koala scientist and veterinarian: I cannot honestly assure the Australian Government or people of Australia that koalas will survive in the wild without a significant and meaningful elevation of their level of legislative protection. Even if this were to occur (and it must), the pervading threat of unmanaged disease may still result in the same adverse outcome, that is: extinction of koalas from the wild.

I recognise that there are criteria that guide the listing or otherwise of species under the EPBC Act. If these criteria currently unequivocally prevent the listing of the koala, then they must be changed. On the other hand, if the listing is dependent upon the discretionary powers of the scientific committee, then I respectfully urge you to most strongly relay my sentiments to the committee – or indeed form a forum where I can meet with them.

The major program of our organisation is the operation of the Australian Wildlife Hospital – a 24-hour dedicated veterinary facility for the treatment of sick and injured wildlife, based at Australia Zoo. Our

hospital is the largest purpose built veterinary wildlife hospital in Australia, and (unfortunately) the busiest too. We treat in excess of 6000 wild animals each year of which approximately 600 are koalas. Despite providing state of the art veterinary care, the success rate for return of koalas to the wild is only around 35%. Approximately 50% of our koala admissions are due to injury, mostly as a result of motor vehicle strike or dog attack, and we save perhaps a little over 60% of those admitted to the hospital alive. Of the remainder, most are suffering from disease. Of these patients perhaps only 25% are released. Most are suffering from chronic Chlamydiosis and are incurable.

In operating a well resourced wildlife hospital we are able to see first hand the impacts of poor decision making and planning on our wildlife. We are also able to monitor disease in our wildlife far better than any other organisation or agency simply as a consequence of the overwhelming volume of admissions to the hospital.

It is becoming quite clear that the koala population in Queensland and NSW is not a robust healthy population. In all of the populations that we are studying, disease prevalence is around 30%. This includes populations living in areas free of urbanisation or habitat pressures. In other words, I believe that epizootic disease is affecting koala populations in both secure and "stressed" habitat equally. The implication of this is that even if large areas of contiguous koala habitat are protected, there is no guarantee of the viability of their populations because of the impact of disease on both survival and fecundity. Another way of interpreting this impact is that tipping points (for extinction) will occur much earlier with respect to population density and total number (per habitat fragment), than might otherwise be the case.

I would be happy to make further representation to you or the scientific committee regarding the issues facing koala conservation, or provide additional data if you require. Once again, I urge you to do whatever you can to ensure that the koala's level of protection is increased.

Mr Garrett, I believe that you should visit the Australian Wildlife Hospital, and I hereby extend an invitation to you to do so. If your workload precludes this in the near future, then your Species Listing Director Mr Saravan Peacock and his Assistant Dr Ivan Lawler must visit to see first hand the devastating consequences that inadequate protection is having for our national icon.

Yours sincerely

A handwritten signature in black ink, appearing to read 'JH', written in a cursive style.

Jon Hanger BVSc (Hons), BVBiol, PhD  
Director of Research and Ecological Services  
Senior Veterinarian  
Australian Wildlife Hospital