



Psychiatry's Role in Responding to Climate Change

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I am pleased to offer this commentary on the editorial on climate change by Dr. Coverdale and his colleagues in this issue of *Academic Psychiatry* [1]. It was during my 2016 campaign for president-elect of the American Psychiatric Association (APA) that the importance of this issue was brought front and center for me. During a gathering with other candidates at a meeting of the Washington Psychiatric Society, Lise Van Susteren, M.D., a psychiatrist in Washington, DC, asked about our positions on climate change. Her question resulted in my first public statement on the matter, which was then included in my campaign materials and resulted in the invitation to write this commentary.

The APA's 2017 position statement on climate change [2] acknowledged that recent events—droughts, flooding, and extreme weather—affect health and mental health, and the APA has initiated efforts to understand more about the longer-term impact of these environmental changes and how strategic plans may prevent and mitigate the damaging consequences.

APA is fortunate to have among its members experts such as the authors and many others who are leading the effort to educate the profession regarding this important issue. However, the position statement was not the first evidence of the APA's concerns or work in this area. As far back as 2011, in a *Psychiatric News* article titled "Psychiatry Needs Eyes Wide Open About Environmental Issues" [3], members who were interviewed encouraged more APA involvement in the psychological consequences of environmental and climatic events. They argued that with the APA's long history of responding to natural and man-made disasters, with an emphasis on mental health needs of the populations impacted by them, it seemed to be a natural next step for the organization.

In the past, APA has directed resources to these areas and assisted district branches and local psychiatrists in affected areas as they endeavor to respond to these crises. Moreover, the 2008

report by the American Medical Association [4] included input from the Section Council on Psychiatry, whose members include representatives from the APA, the American Academy of Child and Adolescent Psychiatry, and the American Academy of Psychiatry and the Law. That report concluded that the effects of global climate change may be widespread, with a potential for serious health implications, including extreme heat and cold events, flooding and droughts, increases in vectors carrying infectious diseases, and increases in air pollution. The report's recommendations included educating the community about the potential adverse public health effects of global climate change and encouraging physician involvement in advocacy efforts regarding policymaking. A public opinion poll conducted by APA at the 2017 Annual Meeting [5] included the question "Is the following statement true or false? 'Climate change is already impacting the health of Americans.'" The majority of respondents indicated definitely or probably true (63%) versus probably or definitely false (22%). Fifteen percent responded not sure.

More recently, APA leadership met with the steering committee of the Climate Psychiatry Alliance in October 2017 to discuss how our organizations might work together to create capacity within the APA to address climate change issues. At that time, I proposed that we work toward a strategy of forming effective alliances instead of standalone efforts to address the full breadth of this issue and to focus on creating a mechanism for long-term sustainability of our joint efforts beyond "disaster psychiatry."

Finally, whether one considers the issue of climate change as a moral imperative, an environmental crisis, or both, there is no escaping that we cannot ignore this issue if we are to truly address the medical, physical, and psychological consequences of this growing public health issue.

In their editorial [1], Dr. Coverdale and his colleagues provide a review of what we understand regarding the science of climate change and accompanying observations of global warming, with the associated economic, health, and mental health consequences. They effectively connect various examples of several major environmental disasters with likely mental health consequences and specifically identify the disproportionate impact of

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these events on vulnerable populations. The exploration of the involvement of various professional organizations highlights the variation in levels of engagement by many in the medical and psychological communities regarding the role for the helping professions in addressing these issues. I think we all understand now that significant psychological stressors are associated with climate change. A growing body of science supports the concerns expressed in the editorial regarding the specific outcomes and the associated changes in coping behaviors within the population. While there continues to be debate in some circles regarding the full impact of climate change as sources of psychological distress for a significant segment of the population, the editorial suggests that with climate change, those stressors that are now included in the category of social determinants of health correlate directly with certain mental health consequences, such as posttraumatic stress disorder and anxiety.

The recommendation to address climate change using the “CARE” framework—clinical, administrative, research, educational—within institutions represents a model consistent with strategies used in medicine and psychiatry to address social determinants of health and mental health and should be considered by professional organizations, including APA, to address this growing challenge to the physical and psychological well-being of the entire population. It is especially important that we create appropriate responses to the increasing stress and distress caused to many people with existing mental health issues.

While I am not certain how much work is being done regarding implementing the recommendations in the clinical or research initiative areas, several of the recommendations in the other identified areas are already being implemented or under consideration. For example, thanks to several very active APA members, most psychiatric treatment facilities are now non-smoking, and many more are adopting that practice, creating improved air quality and healthier environments in those settings. Access to videoconferencing capability to support more telepsychiatry and other communication technologies have increased alternative methods for reducing travel to services, thereby reducing the carbon footprint associated with transportation. Many health and mental health care treatment facilities have already adopted some of the green practices mentioned in the editorial. Psychiatry is more often at the table for discussions of disaster preparedness and regularly offers both initial support and long-term response in those situations as needed. It is worth noting here that for almost a decade now the APA has restructured its operations to be more efficient and green. For example, most materials used by the governance bodies (the Board of Trustees and its components, as well as the Assembly) are now online, reducing the amount of paper formally distributed to members. The reduction in the number of components and replacing meetings with conference calls in many instances has increased the APA’s efficiency and reduced airline travel and therefore the APA’s carbon footprint. APA has recently moved into a new office building

in Washington, DC, where it has achieved Gold certification for Leadership in Energy and Environmental Design (LEED) from the United States Green Building Council.

In the area of educational initiatives, APA currently has an online course titled “Climate Change and Disaster Mental Health,” which offers an overview of the problem and its impact on mental health. The faculty includes Drs. Joshua Morganstein and Robin Cooper, who review ways to address the mental health issues consequent to climate-related disasters. Most APA-sponsored meetings have sessions on their program agendas related to mental health consequences of climate change, and more are planned for the future. Additionally, APA has decreased printing program booklets and now has an interactive meeting app for participants.

I am pleased to say that APA recognizes the importance of working in this area and will continue these efforts through its existing components, as well as through alliances with other organizations. And, as we continue our work in the areas of physician wellness and burnout, diversity and inclusion, workforce development and distribution, and health care as a right, we will continue to look for ways to mitigate negative impacts of climate-related events on the population’s mental health. If indeed climate change is the biggest global health threat of this century, then we have an obligation to make concerted efforts to mitigate its effects.

Compliance with Ethical Standards

Disclosure At the time of writing, Dr. Stewart was president-elect of the American Psychiatric Association. The views expressed here are hers and do not necessarily represent those of the organization.

References

1. Coverdale J, Balon R, Beresin EV, Brenner AM, Guerrero APS, Louie AK, et al. Climate change: a call to action for the psychiatric profession. *Acad Psychiatry*. 2018; <https://doi.org/10.1007/s40596-018-0885-7>.
2. American Psychiatric Association. APA position statement: mental health and climate change. Available at <https://www.psychiatry.org/patients-families/climate-change-and-mental-health-connections>. Accessed 3/8/2018.
3. Moran M. Psychiatry needs eyes wide open about environmental issues. *Psychiatr News*. 2011. Available at https://psychnews.psychiatryonline.org/doi/10.1176/pn.46.5.psychnews_46_5_17_1. Accessed 3/8/2018.
4. American Medical Association Council on Science and Public Health. Report 3 of the council on science and public health (I-08). *Glob Clim Change Human Health*. 2008. <https://www.ama-assn.org/sites/default/files/media-browser/public/about-ama/councils/Council%20Reports/council-on-science-public-health/i08-csaph-climate-change-health.pdf>. Accessed 11/23/2017.
5. American Psychiatric Association. Climate change and mental health connections. Available at <https://www.psychiatry.org/patients-families/climate-change-and-mental-health-connections>. Accessed 3/8/2018.