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General Medical Council v Diana Warner GMC ref: 2580395

Expert Statement of Caroline Hickman on Mental Health & the Climate Crisis

Introduction

1. My name is Caroline Hickman. My address is

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Bath. UK. BA2 7AY

Home address: [REDACTED]

I request that any notices or other correspondence are sent to me via email to:

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2. I have been asked by Dr Diana Warner to provide an expert statement on the mental health effects of the climate and ecological emergencies on both adults and children, their significance, and the impact on health that results from failure of health professionals to consider them. I have agreed to do so on the basis that my role is to assist the Medical Practitioners Tribunal (MPT), the General Medical Council (GMC) and Dr Warner on the question of the unaddressed mental health effects of the CEE; it is not my role to advocate for one side or another.

3. The Medical Practitioners Tribunal Service is not a court. It is a legally constituted committee of the General Medical Council which sits as a tribunal with legal powers to impose sanctions.

Its decisions can be appealed to the High Court of Justice. It has an obligation to respect the rule of law in its proceedings.

4. This statement is intended to be

- a. Fair, objective and non-partisan; and
- b. Related to matters that are within my area of expertise.

5. I am not an expert on medical law or the procedural requirements of the medical profession.

6. Qualifications & relevant experience to give this report.

I have a background in mental health social work and have been a practicing psychotherapist since 2000 using a depth psychology, ecopsychology and analytic relational approach. I am a lecturer in social work at the University of Bath researching children and young people's emotional responses to climate change globally for 15 years examining eco-anxiety & distress, eco-empathy, trauma, moral injury, and the impact of climate anxiety on relationships. I deliver talks & workshops in climate psychology, emotional resilience, and mental health internationally. Clinically I have been developing a range of therapeutic approaches to ecological distress including a

psychological assessment model for eco-anxiety, emotional resilience, and reframing mental health in an archetypal and cultural lens. I list key publications below and I am co-lead author on a 2021 quantitative global study into 10,000 children & young people's emotions & thoughts about climate change published in The Lancet Planetary Health.

Academic & Professional qualifications:

1979 – 83 Sheffield Hallam: BA (Hons) Applied Social Studies & Social Work

1987 – 1989 South East London College: Further Education Teachers Cert

1995 – 1997 Sussex Therapy: Adv Cert Transpersonal Psychotherapy

1997 – 2000 Thiasos, London: PGDip Archetypal & Cultural Psychology

1998 – 2001 Revision, London: Integrative Psychosynthesis Psychotherapy

2011- 2014 University of Bath: MSc Social Research

2015 - present University of Bath: PhD candidate (Department of Education) researching climate anxiety internationally with children & young people.

Current employment:

2001 – Psychotherapist in private practice

2008 – University of Bath

Lecturer BSc (Hons) Applied Social Studies & Social Work

2018 - Climate Psychology Alliance

Previous Employment:

2005 – 2008 Lecturer - University of Plymouth

2002 – 2003 PADI Diving Instructor & Dive Centre Manager (Sinai, Egypt)

1994 - 2002 Psychosocial Studies Lecturer - University of East London

1988 - 2002 Independent Trainer, Supervisor & Project / Staff Consultant & Independent Psychotherapy Practice

(Azubuike Family Centre, St Marylebone Counselling Centre, National Aids Helpline, Chance for Children, The Maudsley Hospital, Lambeth & Lewisham Council, The Everyman Project)

1991 - 1997 Brixton Women's Counselling & Therapy Project Coordinator

1992 - 1996 University of North London Lecturer

1994 - 1995 South Bank University Lecturer

1991 - 1997 Croydon College Lecturer

1991 - 1994 Social Work Practice Learning Centre Coordinator

1985 – 1991 London Borough of Lambeth, Mental Health Social Worker

Publications

Hickman, C. (2024) Eco-Anxiety in Children & Young People – A Rational Response, Irreconcilable Despair, or Both? *The Psychoanalytic Study of the Child*. Jan p1-13.
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Marks, E & Hickman, C (2023) Eco-Distress is not a pathology, but it still hurts. *Nature Mental Health*. Vol 1. June. p379-380.

Hickman, C. (2022) *Borrowed Time: On death, dying & change*. Art. Earth. Hickman, C (2022) *Eco Anxiety & Planetary Hope*. Springer Nature

Hickman, C. (2022) *Enacting Equitable Global Citizenship Education in Schools: Lessons from dialogue between research & practice (Critical Global Citizenship Education)*. Routledge.

Hickman, C. Marks, L, Pihkala, P. Clayton, S. Lewandowski, E. Mayall, E. Wray, B. Mellor, C. Susteren, L. (2021) *Young People’s Voices on climate anxiety, government betrayal and moral injury: a global phenomenon*. *Lancet Planetary Health*

Hickman, C (2021) *Effective Climate Change Communication with Children*. *Climate Change & Mental Health*. London Climate Action Week.

Hickman, C (2021) *Radical Hope for the Future*. Royal Scottish Geographical Society. *The Young Geographer: The Climate Justice Edition*. p16-17.

Hickman, C. (2020) We need to (find a way to) talk about ... Eco-anxiety, *Journal of Social Work Practice*, 34:4, 411-424, DOI: 10.1080/02650533.2020.1844166

Harvey,A; Manley, J; & Hickman,C. (2020) Editorial: Ecology, Psychoanalysis & Global Warming: Present & Future Traumas. Special Edition Journal of Social Work Practice Vol 34, Issue 4.

Hickman, C. (2019) Climate Psychology: On Indifference to Disaster. Palgrave Macmillan

Four articles on climate anxiety, children and young people published in The Conversation (2019).

<https://theconversation.com/im-up-late-at-night-worrying-about-global-warming-please-can-you-put-my-mind-at-rest-124940>

<https://theconversation.com/im-a-psychotherapist-heres-what-ive-learned-from-listening-to-children-talk-about-climate-change-123183>

<https://theconversation.com/what-psychotherapy-can-do-for-the-climate-and-biodiversity-crises-116977>

<https://theconversation.com/a-psychotherapist-explains-why-some-adults-are-reacting-badly-to-young-climate-strikers-125079>

7. Literature on the mental health impacts of climate change

Introduction

When the health impacts of climate change on people is examined there are multiple direct and indirect effects of climate change identified, including acute short term stress reactions (shock and anxiety) to extreme weather events (such as a panic attack during extreme heat), the longer term impacts of infrastructure and resource disruption (such as being unable to go to school following wildfires or flooding), and the psychological distress in response to the overarching threat of climate change which is a chronic long-term stressor. The World Health Organisation (2022) and recent IPCC reports (2022) recognise that ‘the climate crisis is a health crisis.’

Young people are physically, physiologically, and psychologically more vulnerable to climate and environmental changes than adults. Physically they are not as strong as adults, and so are less able to cope with increased heat and heatwaves, floods, wildfires, drought, or storms. During periods of increased heat or heatwaves children’s bodies adjust more slowly than adults to changes in environmental temperature and so are less able to regulate their body temperature, leading to both physical and psychological stress. Physiologically they are at greater risk than adults (for example to the effects of air pollution combined with increased heat). Psychologically children and young people are more vulnerable than fully developed adults to stress from multiple stressors from

climate change such as: extreme temperatures, disrupted education due to wildfires and heat, sleep loss from heatwaves, anxiety about both current climate events and the likelihood these will get worse in the future, and anxiety about how both they and younger children will cope.

Climate Change impact on Mental Health

The mental health impacts of climate change (Berry et al, 2009); Hickman & Marks, 2021) are increasingly recognised as causing a global mental health crisis. There are long-term implications for physical and mental health because of acute (short term) and chronic (long term) environmental changes, from storms and wildfires to increasing temperatures. Climate anxiety can often become too intense and overwhelm people with considerable suffering, linked to a range of emotions including worry, fear, anger, grief, despair, guilt, and shame. Fears are tied to both current and anticipated losses and both direct and indirect impacts, and the threats from climate change on children and young people should be understood as unremitting psychological stressors. There is no respite from them because climate change is impacting all parts of the globe. One cannot get relief by moving away from the threats, so nowhere offers physical or emotional safety.

Substantial levels of climate related distress are now reported globally with a 2021 UNICEF report estimating that one billion children are at extremely high risk as a result. In 2020, the Royal College of Psychiatrists reported that over half (57%) of child and adolescent psychiatrists surveyed in England are now seeing children and young people distressed about the climate crisis and environment reporting low mood, helplessness, anger, loss of sleep, panic & guilt.¹

Hickman & Marks (2021) found that children and young people around the world reported emotional, cognitive, and functional responses to climate change, with respondents across all countries reporting a large amount of worry, with almost 60% saying they felt “very” or “extremely” worried about climate change (mean score of 3.7 on a scale from 1 to 5 [SD 1.7]). More than 45% of respondents said their feelings about climate change negatively affected their daily lives (the proportion of respondents varied by country but was consistently high).

These high levels of distress, functional impact, and feelings of betrayal will negatively affect the mental health of children and young people. Climate anxiety might not constitute a mental illness, but the realities of climate change alongside governmental failures to act are chronic, long-term, and potentially inescapable stressors. These factors are likely to increase the risk of developing mental health problems, particularly in more vulnerable individuals such as children and young people, who often face

¹ <https://www.rcpsych.ac.uk/mental-health/parents-and-young-people/information-for-parents-and-carers/eco-distress---for-parents-and-carers>

multiple life stressors without having the power to reduce, prevent, or avoid such stressors.

It is also important to examine beliefs as well as feelings when looking at climate anxiety. Hickman & Marks et al (2021) found that 75% of respondents said the future was frightening, almost half (48%) reported that other people had ignored or dismissed them when they tried to talk about how they felt about the threat of climate change events, and 58% said they felt humanity was doomed. Fear for the future was also correlated with a loss of security, with 58% saying that their family's security would be threatened (p868). Pessimistic beliefs such as: people failing to take care of the planet, humanity is doomed, things they value will be destroyed, security is threatened and hesitancy to have children were strongly evidenced across all counties (p868).

Negative thoughts, anxiety about climate change and impact on daily functioning were all positively correlated and showed a clear connection with feelings of betrayal and negative beliefs about government responses (p870). 'Distress appears to be greater when young people believe that the government response is inadequate, which leads us to argue that the failure of governments to adequately reduce, prevent, or mitigate climate change is contributing to psychological distress, moral injury, and injustice' (p871).

Adverse Childhood Experiences (ACE's)

Adverse childhood experiences (ACE's) have been shown to lead to physical and mental health problems throughout the whole of a person's life. These experiences have now been shown to include threatening climate change related events such as wildfires and floods (Nelson et al, 2020). Depression, anxiety, post-traumatic stress disorder (PTSD) and other mental health difficulties in childhood and throughout adult life are all more likely (Nelson et al, 2020). The effects on the child or young person following such trauma can be both psychological and developmental. Depending on the age of the child when first exposed to trauma, research shows that in infants and young children trauma can alter brain development, nervous system regulation and stress responses. It can lead to increased risk of chronic physical health conditions, autoimmune system problems, self-harm, and increased risk of suicide. The impact can also be seen through psychosocial factors such as poor academic achievement, low life satisfaction and difficulties building and maintaining long term relationships in adulthood (Hughes, Bellis & Hardcastle et al, 2017).

Adverse childhood experiences can be direct or indirect: direct exposure to traumatic events (wildfires, floods, or extreme heat) or indirect adverse experiences observed by witnessing the harm being caused to others (such as news reports showing animals and people fleeing wildfires or listening to stories told by survivors of traumatic events) (Lawrence et al, 2021; Obradovich et al, 2018). In my professional opinion this is

particularly applicable to climate change trauma where there is also considerable media and social media reporting which exposes a young person to a traumatic event about which they can do nothing except watch and listen helplessly, either close-by or from a distance.

Further, a helpless anticipation of a future traumatising constant event such as climate change, leads to a young person remaining in a constant state of anticipatory anxiety and readiness to run away from the threat or to try to fight it. But with climate change there is nowhere to run to because it is a globally adverse experience and traumatising event. Children and young people have few resources to either mitigate or avoid the multiple stressors of climate change. The sense of helplessness and powerlessness combined with a real threat such as extreme heat or wildfires will lead to them being in a constant state of anxiety (Shemmings & Shemmings, 2011).

Moral Injury

Children and young people are facing numerous stressors in relation to climate change but have few resources to mitigate or avoid them. This is directly linked in the research (Hickman & Marks et al, 2021) to a human rights failure, with children feeling betrayed and abandoned by governments failing to protect them from harm (Ojala, 2020), and a failure of ethical responsibility to care (p864). The research shows that this leads to moral injury or institutional betrayal which is a distressing psychological experience when a person feels that actions have been taken that violate your human rights, morals, and core beliefs (Weintrobe, 2021) and seen as a normal human response to an abnormal traumatic event (Haleigh et al 2019). Emotional distress is felt through symptoms of depression, anxiety, problems sleeping, sadness, loss of faith in a secure and safe future and betrayal and abandonment by previously trusted authority figures. Acknowledgement by others of ethical violations they have suffered is important for the person who has been hurt.

Moral injury was first recognised as a mental health condition affecting soldiers who felt psychologically injured by the betrayal of their leaders, whom they initially trusted. They then became disillusioned in their leaders as they realised that they had been lied to and that there was a casualness about killing (Alford, 2016). Weintrobe (2021) draws a parallel with government inaction on climate change: children and young people might experience this as abandoning their futures, as if they were not cared about, with decisions made to protect short term interests rather than the long term future survival of young people.

Negative thoughts, anxiety about climate change and impacts on daily functioning were all positively correlated and showed a clear connection with feelings of betrayal and negative beliefs about government responses (Hickman & Marks et al, p870). 'Distress appears to be greater when young people believe that government response is inadequate, which leads us to argue that the failure of governments to adequately reduce,

prevent, or mitigate climate change is contributing to psychological distress, moral injury, and injustice' (p871).

The significance and direct correlation of political leadership and actions in addressing climate anxiety in people cannot be overstated, 'Good leadership on the climate crisis improves mental health and wellbeing' (p469 Lawrance et al, 2022).

Impact on daily functioning

Impact on daily functioning has been examined by several researchers such as Clayton & Karazsia (2020) who found that climate change makes it difficult to function in day-to-day tasks (26-27%), with 17-19% reporting cognitive impairment (problems with studying, concentrating or thinking).

Qualitative research and clinical case studies can offer a more detailed picture based on clinical data gathered from work with 300 children and young people since 2015 (Hickman 2020 p417). Hickman (2020) examined how climate anxiety can be defined and categorised on a psychosocial climate anxiety scale ranging from mild to critical. Since publishing this research in 2020 I have added further data to the model as I have found children and young people presenting increasingly severe psychological distress in practice, detailed below.

Psychosocial climate anxiety scale (Hickman, 2020)

The scale below differentiates between different levels of climate anxiety from mild to critical. As people first become aware of climate change there is a tendency to start at the milder end, progressing towards severe and critical as they become increasingly informed and aware. Sometimes people have a sudden and more shocking awakening and rapidly go from being relatively unaware to severe or critical, which tends to lead to a psychological crisis. The crisis can be accompanied by a breakdown of existing beliefs, securities, and trust in other people and in the world generally. Based on clinical case studies the scale is useful in differentiating between levels of suffering and disruption to daily life.

Mild: Some feelings of upset, less than weekly. Strong beliefs that other people (such as scientists and governments) hold answers to the climate emergency, which provide reassurance and relief from distress. The feelings of distress can be transient and respond to reassurance. The feelings of anxiety can be reduced by a focus on individual and local actions such as food choices (eating less meat, reducing dairy consumption) and recycling. Some defences of disavowal are present (such as minimising the scientific evidence). Strong evidence of rationalisation of fears. Little interest in reading news articles about climate change or watching documentaries. There is a focus on optimism and hopeful solutions. Avoids painful feelings such as depression or despair. Little disruption in cognition/thinking. Can feel security by reassurance by others ('it will all be

ok, humans have faced crises before and survived’, ‘we survived a world war, we can survive this’). Can show evidence of reacting strongly to others’ fears (upset briefly but then making jokes, silencing the anxious person, or changing the subject quickly). Psychological equilibrium is achieved by dismissing the fears and avoiding evidence.

Medium: Feeling upset more frequently (weekly) and has some doubt in others’ solutions to the emergency but still retains fundamental beliefs that technological solutions will be found before it gets too bad, or that ‘if things were that bad then authority figures would take action as an urgent matter – wouldn’t they?’. Psychological defences are less efficient in minimising distress. Some disruption in cognition/thinking, but not pre-occupied by the emergency. Making some lifestyle changes such as reduction in flying/meat eating/dairy consumption, but still choosing to mostly maintain life as before with minimum significant changes. Can be defensive if challenged (such as redirect challenge to ‘well what about China? We are doing enough here’). Can be reassured by discussion with others. Some limited knowledge about facts and figures, but not obsessed or preoccupied, happy to ‘leave the science to the scientists’.

Significant: Daily upset and feelings of distress. Minimal defences against guilt, grief, and fear. Some fears of social collapse can be seen alongside fears about climate change. Anxiety is much harder to mitigate by reassurance. For example, reassurance will have to be repeated frequently and trusted authority figures will be sought out (IPCC reports). Increase in signs of cognitive/thinking changes such as guilt and shame in relation to children & grandchildren (their own and/or others). Hesitancy to have children of their own in the future because of climate change. Very little faith in others finding or acting on solutions. Willing to end relationships with people who are in perceived denial about the climate emergency including friends at school or within the family. Partnerships and marriages can be threatened, especially if one partner is in denial or minimises the emergency. Frequently feels insecure and anxious, but group actions reduce anxiety to a more manageable level. Significant impact on lifestyle. Tendency to try to reduce own carbon footprint and then feel it is never enough, leading to further and further reductions, none of which lead to satisfaction: ‘I can never feel as if I can do enough’. Some intrusive thoughts and dreams, but infrequent in comparison with Severe category below. Often turns to nature-based work/leisure for emotional support. Intolerant of climate deniers. Still holds some beliefs in government & democratic political solutions but with some cynicism and doubt.

Severe: Severe cognitive/thinking changes such as intrusive thoughts. Sleep is affected and there is preoccupation with the climate emergency leading to a struggle to enjoy any aspect of life because of fears for the future. No defences against the terror felt, or the defences are easily overwhelmed. People can manage daily life by compartmentalising their feelings and thoughts, but they return frequently and can be intrusive (force their way into consciousness even when the person really doesn’t want them to do so, for example during conversations, meetings or in a class at school).

Strongly held beliefs (certainty) that the climate emergency will lead to social collapse and social breakdown. Anticipation of extinction of human species leading to terror rather than anxiety. No belief or trust in others to act sufficiently swiftly or decisively to take steps to adapt or mitigate against climate change - this is supported by evidence as they fail to take action or fail to take what is believed to be sufficient action to protect people. Supported by considerable knowledge about the crisis. Knowledge of the climate crisis as a systemic global injustice with a preoccupation with 'fairness' and 'unfairness' and injustice. Extensive awareness of the impact of climate change both nationally and internationally. Can feel as though people who don't understand or empathise, or care are being abusive and cruel. Can be intergenerational tensions such as children who are angry with their parents' generation for failing to act on climate change.

Unable to manage or contain strong emotional responses all the time – these will come and go - such as crying a lot, and impulsive anger at people who don't seem to care about the climate crisis. May affect daily functioning – may, for example, be unable to go to school or to work some days. Thoughts about being unable to have children of their own either now or in the future as the world will be inhospitable or uninhabitable. Feelings of guilt and shame and heightened distress when thinking about their own potential future children, or the impact on their current younger siblings having to grow up in such a dangerous world. Sometimes there is less personal concern, and the anxiety is directed towards more global anxiety, empathy, guilt, and shame. This can be driven by a need to gain knowledge of climate change facts and figures. Dreams about climate change occur. Some fleeting thoughts about suicide as a future option if things get worse, but no immediate plans to act.

Critical: At most extreme there may be thoughts of suicide in children and young people as well as adults. Distress and crying at the thought of never being able to have children of their own in the future as they will be unable to protect their children from harm.

Extreme guilt and grief about the impact of climate change on all parts of the world ('nowhere is safe') with very high levels of guilt felt towards populations vulnerable to the emergency.

Obsessive need to get information about climate change or checking weather reports repeatedly throughout the evening in anticipation of the following day's weather, looking for evidence of worsening climate figures related to heat, rainfall, air quality, or temperature. Intrusive thoughts about human survival.

Dreams or nightmares about climate change. *(Note: the loss of sleep and dysregulation from nightmares is particularly damaging as the person is unconscious when asleep and so is unable to have any control over these experiences.)*

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8. Dr Diana Warner Psychological Report 2 June 2024

I met with Diana in May 2024 and agreed to provide an expert witness report on the emotional and mental health impact of climate change on people and comment how it has impacted on her. I have provided previous expert witness reports for the ECtHR climate change cases and in the UK & Europe. I have been a qualified social worker since 1983 and psychotherapist since 2000. Specialising in the mental health impact of climate change since 2010.

Diana has been committed to her career in medicine for 32 years, retiring as a GP in March 2019. During these 32 years of service to the public as a GP she did not receive complaints from her patients or colleagues about her practice. She seems to have enjoyed a high level of trust from her patients and has in turn delivered a high level of care.

Whilst she has been aware of the climate and ecological crisis for many years, she has devoted herself to fighting the emergency since retirement with many hours of voluntary work. During this time, she has seen increasing harm caused to people because of climate change including increased deaths in older people due to heat, and children's health damaged by air pollution including the death of a child in London. As she has watched things get progressively worse, especially for vulnerable people children, older people and people living in poverty this has caused her considerable distress as her professional career has been devoted to reducing harm and protecting people.

Watching things get worse has been increasingly painful for her, she has a strong duty of care to people as a doctor and extends that to all aspects of her life as an ethical and moral decision.

Diana believes strongly that the public need doctors and other health care professionals to raise the alarm. About deaths from heat, fires, smoke and air pollution, increased risk from diseases and other heightened risks due to climate change. These

all fall within a doctors remit and public health message, and Diana has clearly understood this.

Her concerns for the safety of children's health, both mental and physical are a continuation of her duty of care to patients, and to stay silent for Diana would be failing them as a doctor.

Caroline Hickman

June 2024