Pandering to Ignorance on Climate Change: Lessons from an Investment Strategist

Frederick M. Burkle, Jr., MD, MPH, DTM

Section Editor for Humanitarian Affairs, Prehospital and Disaster Medicine; Harvard Humanitarian Initiative, Harvard University, Cambridge, Massachusetts USA; and Woodrow Wilson International Center for Scholars, Washington, DC USA

Keywords: climate change; future humanitarian crises; health consequences of climate change

Received: November 21, 2012 Accepted: December 2, 2012

Online publication: April 10, 2013

doi:10.1017/S1049023X13000307

Abstract

An investment strategist recently published, in the journal *Nature*, an impassioned plea to all scientists that they must begin to speak out on the resource crisis exacerbated by global warming. In this Editorial response, the author reminds health professionals that they can no longer stay silent and pander to the ignorance of others, and challenges them, along with multidisciplinary partners and stakeholders, to define a strong collaborative and cooperative stance on climate change.

Burkle FM Jr. Pandering to ignorance on climate change: lessons from an investment strategist. *Prehosp Disaster Med.* 2013;28(3):200-201.

Catalyzed by an impassioned call to all scientists to speak out on resource crises exacerbated by climate change, this Editorial addresses the unique role that the science of medicine and health care providers in general can play in sounding a realistic and desperate warning on the health impacts, often ignored, of global warming. Health professionals have been silent on international treaty obligations to not postpone preventive measures when environmental threats occur.

In a recent "World View" article published in *Nature*, Jeremy Grantham, a well-known investment strategist and co-chair of the Grantham Foundation for the Protection of the Environment in Boston, Massachusetts (USA) wrote an impassioned plea to all readers. The title was eye-catching: "Be persuasive. Be brave. Be arrested (if necessary)." As a respected financier, Grantham makes a strong case to the scientific readership that a resource crisis exacerbated by global warming is looming, and that more scientists and health care providers must speak out. He concludes that we must "take more career risks and sound a more realistic, more desperate, note on the global-warming problem." Why did this crisis happen and why are we being reminded of our failings by a business leader, rather than by a leader in science or medicine?

Nature and other journals have recently published a number of commentaries on how governments (eg, the US, UK, Italy and France) listen to economists, but not scientists, when making everyday critical environmental decisions that impact the future of our planet.²⁻⁴ Today in the US, despite President Obama's views to the contrary, there is "no prospect of moving climate change legislation through Congress." As I write this Editorial, there is more bad news: a report from the World Meteorological Organization in its annual Greenhouse Gas Bulletin that atmospheric volumes of greenhouse gases blamed for climate change hit a new record in 2011. One Nature commentary suggested that, accepting that scientists do not know how to talk to legislators, the only way to get the message across would be to have scientists run for elective office. Unfortunately, that process might take more time than the planet has to survive. Today in the US, there are more physicians in Congress than ever before, yet few have proven to be advocates for climate change legislation.

Health care professionals have a greater responsibility. It starts with the oaths we took for our professional degrees in medicine, nursing, and prehospital care. However, once you become a health professional, it is not long before you realize that the greatest challenges to our beneficiaries are not in clinical care alone, but rather in the social and physical environment in which they live. We, not the investment strategists and certainly not the decision makers in government, have been dealing for many decades with the symptoms of climate change, biodiversity crises, emergencies of scarcity in food, water, energy, and large-scale tragedies that have a strong cause and effect relationship with climate change (eg, the Fukushima Daiichi nuclear catastrophe). We regularly treat

Burkle 201

victims of rapid unsustainable urbanization, urban heat islands, air and water pollution, vector- and marine- borne diseases, severely threatened food supply, increasing weather-related disasters, rising sea levels, and cancers from ozone depletion.7 Keribati, which straddles the equator, will be the first nation state to disappear below the sea. Once a paradise, its population of 100,000 is urbanized, without adequate water and sanitation, and suffers an infant mortality rate twice that of any Southeast Asian country. Adaptation strategies are no longer viable, leaving evacuation as the only option.8 International treaties, including the Declaration signed in 1992 at the Earth Summit in Rio de Janeiro, Brazil, contain language stating that "governments when it comes to serious threats to the environment must not wait until a population is about to disappear." These are all symptoms of a process that should need no introduction to health care providers, yet, as a group, we have been silent participants in the controversies and debates surrounding climate change.

As health care providers and sometime advocates, we do what we do well. Yes, we conduct research and actively publish, and at times write exemplary diatribes about what the consequences of humanitarian crises are doing to mankind. We have made remarkable progress in the science and care of our victims. But these documents, for the most part, remain exclusively in the health literature, a reminder that we recognize that we do not have an effective bully pulpit beyond our professional boundaries. We trespass those professional boundaries with trepidation.

We herald the few who do, but they are too few and far between, especially concerning the looming crises today. If we thought we were being effective, our governments have proven us wrong. I suspect that for the broad scientific audience that reads *Nature*, the status quo is a shared excuse. It took an investment strategist, not a health professional or other scientist I would normally turn to as an advocate, to shake up the science community. We must heed his call.

We know that global health issues will not be solved by the health profession alone. Solutions are necessarily multidisciplinary in nature, arising from a working relationship of disciplines such as the social sciences, political science, anthropology, civil engineering, the legal profession, and economics. And yes, even investment strategists, because they currently enjoy a bully pulpit with the legislative decision makers that we do not have. At the age of 73, I have been in too many meetings over the years where colleagues (me included) turned a deaf ear to the opportunity to speak out on what we all recognized at the time as a long-term threat to our survival.

We can no longer stay silent and pander to the ignorance of others. We must clearly define our collaborative and cooperative stance on climate change, along with our newly-found multi-disciplinary partners and stakeholders. They will learn from what we tell them about how many have already suffered and died before their time. They will, of course, ask, "Why didn't you tell us this earlier?"

References

- 1. Grantham J. Be persuasive. Be brave. Be arrested (if necessary). Nature. 2012;491(7424):303.
- Macilwain C. Science's attitudes must reflect a world in crisis. Nature. 2011;479(7374):447.
- 3. Meyer R. Finding the true value of US climate science. Nature. 2012;482(7384):133.
- Cattaneo E, Corbellini G. Science under politics: an Italia nightmare. EMBO Reports. 2011;12(1):19-21.
- UNIFEED. World Meteorological Organization, Greenhouse Gases for 2011. UNITED NATIONS NEWS & MEDIA. http://www.unmultimedia.org/tv/unifeed/2012/11/ wmo-greenhouse-gases/. Published November 20, 2012. Accessed November 21, 2012.
- Kassen R. If you want to win the game, you must join in. Nature. 2011; 480(7376):153.
- Burkle FM Jr. Future humanitarian crises: challenges for practice, policy, and public health. Prehost Disaster Med. 2010;25(3):191-199.
- Kiribati must urgently address rights to safe water, sanitation. Citing Catarina
 de Albuquerque, UN Special Rapporteur, on the right to water and sanitation. UN
 NEWS Centre. http://www.un.org/apps/news/story.asp?NewsID=42549&Cr=Water
 &Cr1=Sanitation. Accessed November 21, 2012.
- 9. Editorial. Water wars. Nature. 2012;491(7425):496.