

The Public Health Crisis Is Planetary—and Nursing Is Crucial to Addressing It

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If the Earth were our client, her status would be multisystem failure. She is not ready for hospice, but she does need intensive care to survive. Signs and symptoms include catastrophic wildfires, unprecedented and extended periods of severe heat, climate-related disasters of historic proportions, massive biodiversity loss, deforestation and desertification of the land, emerging infectious and zoonotic diseases including COVID-19, severe air pollution, and changes in water quality and availability. Each of these changes profoundly impacts the health of humans and often impacts structurally vulnerable populations disproportionately.

In September 2021, more than 200 global nursing, medical, pharmacy, dental, and public health journals issued a joint statement titled, “Call for Emergency Action to Limit Global Temperature Increases, Restore Biodiversity, and Protect Health.” Its authors wrote:

As health professionals, we must do all we can to aid the transition to a sustainable, fairer, resilient, and healthier world. Alongside acting to reduce the harm from the environmental crisis, we should proactively contribute to global prevention of further damage and action on the root causes of the crisis.^{1(p1135)}

PLANETARY HEALTH

To accomplish these goals, we must work collaboratively to redesign our current model, shifting from illness care to health care based on principles of planetary health.

“Planetary health is a solutions-oriented, transdisciplinary field and social movement focused on analyzing and addressing the impacts of human disruptions to Earth’s natural systems on human health and all life on Earth.”²

The planetary health movement calls for a great transition of all human sectors. Public health nurses are perfectly positioned to lead this transition because they have always addressed sources of harm, promoted strategies to protect our nation’s most vulnerable citizens, and advocated for policies that protect our water, air, and land. Now the planetary health paradigm connects the knowledge and skills of public health nursing to a global movement for change.

Appreciation for the broader context in which people live, work, commune, and connect has been a foundational feature of all nursing from Florence Nightingale and Lillian Wald onward, as is working with individuals, communities, and populations collaboratively to prevent poor health outcomes, enhance

wellness, and advocate for more equitable health outcomes for all. This framework of nursing—now the most trusted profession in the United States for the 20th year in a row³—is a powerful force to guide the contribution of public health-focused nurses and health professionals to address what is the greatest public health crisis of our time. Nurses and other health workers are needed not only to ensure that public health and health care delivery is made more environmentally sound (given that the health sector contributes approximately 8% of all US greenhouse gasses, a proportion that has increased⁴) but also to help reduce the need for the volume of health care delivery itself. Prevention of illness, thus reducing health care service use,⁵ is a cardinal goal of public health nursing that will bring even further benefit in the Anthropocene era. The National Academy of Medicine, among others, has called for decarbonizing the health sector,⁶ which will contribute to global goals as well as bring health cobenefits to populations.⁷

PUBLIC HEALTH AND THE GREAT TRANSITION

Public health and health care delivery systems likewise must do a better job of adapting to the multiple health impacts that are ensuing from planetary health stresses, including the COVID-19 crisis. Needs include improved surveillance and data systems, as well as best practices in communicating the climate crisis and how it affects people locally. Annual surveys show that most of the American public now believes that the climate crisis is already affecting their health and the health of their communities. This recognition must be leveraged in advocating to enhance public health infrastructure. The Centers for Disease

Control and Prevention's BRACE (Building Resilience Against Climate Effects) framework should be funded at a level that is more commensurate with the urgent crisis.

Representing a key portion of the global health workforce, nurses form the backbone of public health and health care delivery systems. Planetary health concepts must become part of the curriculum for preparation and continuing professional development of the nursing workforce. This has been recognized in the American Association of Colleges of Nursing's competencies for nursing, which include a call for planetary health content (see additional resources in the Appendix, available as a supplement to the online version of this article at <https://ajph.org>). Curricular elements of such a planetary health approach have been identified, and alliances including the Global Consortium on Climate and Health Education are working to ensure uptake in clinical schools.

An agenda for public health and nursing in the Anthropocene must include addressing mitigation and adaptation strategies at every level, emphasizing prevention and including a laser focus on equity. This can begin with education as health professionals, which could be enhanced by credentialing and licensing board inclusion of planetary health content. For nurses, this includes a continuation of the shifting emphasis from acute care or "illness care" to broader population health using a "planetary health care" framing. As trusted messengers, nurses can provide anticipatory guidance to patients and communities. Higher engagement of health departments in this work can leverage the BRACE framework, and public health nurses can be engaged in developing green offices with best practices to support community

sustainability. Regional planning should be better supported and integrated across public health and health care systems. Workforce resilience must be addressed, including mental health services. Finally, reversal of the decline in public health spending must occur, now more than ever.

CALL TO ACTION

Global nursing organizations have called for significant action on climate change and other issues that threaten planetary health. Some organizations are leading the way with practical ways for nurses to get involved. For example, the Alliance of Nurses for Healthy Environments sponsors Nurses Drawdown (see additional resources in the Appendix), which offers tangible steps that all nurses, including public health nurses, can take to draw down greenhouse gases and improve the health of humans and the planet. In addition, the American Nurses Association has launched an innovation committee on planetary and global health to support nurses who are taking action on planetary health.

We must take bold action to eliminate the causes of our current crisis, including challenging continued use of fossil fuels that impact air quality and contribute to climate change. We must work to adequately protect structurally vulnerable populations. The nation's public health infrastructure needs a massive investment of federal and state funding. Public health must be universally recognized as the first line of defense if we are to have a sustainable health care system. Policies need to ensure equitable access to knowledge and resources to protect structurally vulnerable populations in a world undergoing climate change. Public health nurses can be

part of redesigning our cities and communities to ensure access to clean air, water, green space, and healthy foods for all people. Finally, public health messaging must convey a sense of urgency and preparedness. We need to take mitigation steps now while also promoting adaptation and resilience to the changes already in play. At the same time, public health nurses and all health professionals must convey hope that if we work together across disciplines and political parties, we can build a healthy future for humans and all life on Earth. **AJPH**

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CONFLICTS OF INTEREST

The authors have no conflicts of interest to declare.

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Moving Life Course Theory Into Action: Making Change Happen

Edited by Sarah Verbiest
DrPH, MSW, MPH

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