

The Nexus between Climate Change, Mental Health and Wellbeing and Pacific Peoples

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Very few people in the Pacific region will be unmarked by climate change, particularly as half the population live within 1.5 kilometres of the ocean.¹ Noticeable rises in sea-level, more frequent cyclones and floods, and changes to seasonal weather are attributable to climate change in the area.² Extreme weather has significant implications for Pacific peoples' health outcomes.¹ For example, Niue's only hospital was devastated by cyclone Heta in 2004, extreme flooding in Papua New Guinea in 2008 destroyed vital hospital equipment¹ and rises in temperature have contributed to the increasing prevalence of malaria and dengue fever across the Pacific region.³

Much of the health research on climate change in the Pacific is dominated by the vulnerability of ecosystems and only recently have mental health impacts of climate change been recognised by public health experts.⁴ Although the research is still limited, it is projected that disruption resulting from climate change will have serious damaging effects on mental health worldwide.⁵

Impoverishment, political and cultural rigidities, economic dependency and environmental degradation create particular vulnerabilities, which are compounded by the effects of climate change. These five characteristics are variously shared throughout the Pacific, and individually they exacerbate emerging mental health and wellbeing issues related to climate change.⁶ The fact that the Pacific is commonly affected by natural disasters, even before the onset effects of anthropogenic global warming, provides further rationale to investigate further the interconnection between climate change and mental health risks.

Climate change has direct and indirect effects on mental health risks for Pacific peoples.⁵ A direct impact occurs via the increased frequency and severity of natural disasters.⁷ This may be a compounding effect; little is known about the impact of natural disasters upon those with a pre-

existing mental health disorder.⁶ Natural disasters disrupt access to public health services and may obstruct access to appropriate medication and care. Indirect effects of climate change include population movements, as a result of urbanisation, economic collapse, and the degradation of coastal cities.⁵ Additionally, post-disaster devastation to the physical environment, in turn, may affect social, community and economic factors related to place, which may induce stress, anxiety and displacement.⁷

Albrecht's 'solastalgia,' is the feeling of distress caused by an environmental transformation affecting a home environment.⁸ It may be considered a 'psychoterratic' illness, whereby peoples' mental wellbeing is threatened by the severing of 'healthy' connections to their homeland.⁸ It also draws on the concept of nostalgia where instead of a longing for home when away, it is a longing for a particular 'state' or idea of home while living at home. This is caused by changes in the natural environment of one's home like floodings, droughts, land erosion, or mining. Solastalgia occurs when there is the lived experience of the physical ruin of home.⁸ It may be a particularly useful concept in describing the nexus between mental health and wellbeing and climate change. As migration is often seen as a 'last resort,' it is likely that many will experience solastalgia in the Pacific region, as the effects of climate change continue to increase. The question remains, how do Pacific peoples themselves define this type of distress?

In an i-Kiribati study, McIver et al. concluded that climate change poses a threat to i-Kiribati livelihood, their country's sovereignty and the national identity of its inhabitants. This is further exacerbated because little is known about mental health in Kiribati, which makes it more difficult to understand the magnitude and nature of the impacts of climate change on mental health and wellbeing. This may very well be a recurring theme throughout the Pacific as there is little research and data to draw from.⁹

As mentioned, migration is an indirect impact. An estimated 75 million people from the Asia-Pacific region will be forced to migrate by 2050 as a result of climate change.¹ Moreover, New Zealand and Australia will become a potential relocation destination for many Pacific peoples. New Zealand was the first country globally to be tested by 'climate refugees' seeking protection and resettlement in another country. In particular, in response to a number of cases from Tuvalu and Kiribati. This call to action is timely as the current government proposes to provide climate migration visas for Pacific peoples displaced by rising sea levels.

New Zealand's 2006 national Mental Health Survey - Te Rau Hinengaro, indicated that Pacific peoples have higher 12 month prevalence rates of mental disorder (25%) in comparison to the general New Zealand population (20.7%).¹⁰ Pacific adults had the highest rates of anxiety or depressive disorder (12.9 %) when compared with Māori (10.8 %), Asian (7.7 %) and European/Other (6.1 %) ethnic groups.¹¹ Moreover, Pacific peoples reported suicide attempts that were three times the rate of the general population.¹⁰ Evidence suggests that Pacific peoples living in New Zealand suffer from high rates of mental illness, yet are less likely than the remainder of the population to access mental health services.¹²⁻¹⁸ Reasons vary, depending on age, gender identity, cultural identity, socio-economic position, religion and spirituality, language capabilities, sexual orientation and stigma. However, the motif amongst this evidence is that Pacific peoples need better-equipped culturally competent and specific services.

It is believed that those who will be forced to relocate will be at higher risk of mental disorders, due to the cultural loss and stress of climate induced migration.¹⁹ An understanding of this by the mental health and wider public health sector in New Zealand is crucial, particularly with regard to service readiness.

Mental health and wellbeing services will need to cater to Pacific climate migrants in culturally inclusive and relevant ways, taking in to consideration the distinct reasoning for migration, and forced relocation as a result of climate change and recognising that this will bring new challenges to the already visible barriers to mental health access and appropriateness of services. As is commonly agreed, the post-migration experience of recent migrants is important in the resettlement process. The sociocultural conditions of a host country can have powerful influence on mental health.²⁰

If cultural dimensions of climate change are disregarded, one can expect that both adaptation

and mitigation responses will fail to be effective as they will not resonate with Pacific.²¹ Whilst questions around the types of adaptation strategies are largely unanswered, the planning starts now.⁵

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