

Episode: *Author Interview: “How Should Organizations and Clinicians Help Marginalized Patients Manage Loneliness as a Harm of Climate Change?”*

Guest: Lisa Fuller, PhD

Host: Tim Hoff

Transcript by: Cheryl Green

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[bright theme music]

[00:00:04] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me in this episode is Dr Lisa Fuller, a senior policy analyst in ethics at the American Medical Association in Chicago, Illinois. She's here to discuss her article, “*How Should Organizations and Clinicians Help Marginalized Patients Manage Loneliness as a Harm of Climate Change?*,” in the November 2023 issue of the Journal, [Health and Loneliness](#). Dr Fuller, thank you so much for being on the podcast.

DR LISA FULLER: Thank you for having me.

[00:00:44] HOFF: So, what's the main ethics point of your article?

FULLER: I think there's really two main points. The first one is that climate change is a collective action problem, and when we don't deal with problems of this type collectively, that is at the level of society, we run into two ethical issues. One is that if we don't deal with it at the level of society, then the worst off among us in terms of health, socioeconomic class, and people from other marginalized groups are harmed the most of all the people in society. And then when they seek help, say, from a health care practitioner, the available options will not, will be very limited and will not address the underlying causes of the problems. So, when collective problems are not addressed at the right level, they trickle down to the individual level, and they can't be solved effectively.

[00:01:55] HOFF: So, what do you see as the most important thing for health professions students and trainees specifically to take from this article?

FULLER: So, the powers that be are often slow to recognize that things have changed. And I think students and trainees are in a position to recognize that climate change events are the new normal and try to make changes in how health care facilities operate in light of that fact. They can advocate within their organizations and within professional organizations like the AMA, but they also should, as they progress through their careers and develop more autonomy, consider themselves instrumental in making changes that integrate disaster preparedness into the fabric of health care institutions. It should be the case that the kinds of climate change events that happen in a given region are things that those health care systems are prepared for on a regular basis and not only as the exception to the rule.

[00:03:18] HOFF: And finally, if you could add a point to your article that you didn't have the time or the space to fully explore, what would that be?

FULLER: Physicians need to advocate for the changes and transformation at the level of society, and not only at the level of health care that will allow the harms of climate change events, such as increased isolation and loneliness, to be prevented. They should recognize that they need to push back against the overmedicalization of climate change events. By that I mean the idea that climate change events are inevitable, and their harmful health care effects are inevitable, and it's the job of only the health care system then to take on the responsibility to heal those people who are harmed and fix them to the best of their abilities.

What's really needed is the recognition that this massive systems of infrastructure are interdependent and only if systems outside of the health care system can be transformed, for instance our utilities, such as electricity—so, for instance, having the reliable power at the level of the electrical grid, or sewers and flood prevention can be upgraded so that waterborne illnesses don't overpower the health care system in a flood—these kinds of systems need to be put in place at the same time as the health care systems improve themselves. [00:05:15] It's not enough to just send sick people once a disaster has happened to the existing health care system resources. We need to prevent those people from arriving at the door of the emergency room, or the health care systems will simply not be able to manage the volume of patients and the difficulty of helping them at that stage. It's not a medical issue only that people are harmed by climate change in various ways. [theme music returns] It's an issue that requires massive change at the level of society.

[00:05:54] HOFF: Dr Fuller, thank you so much for your time on the podcast today, and thanks for your contribution to the Journal this month.

FULLER: Thanks. This has been great.

HOFF: To read the full article as well as the rest of this month's issue for free, visit our site, [journalofethics.org](http://journalofethics.org). We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.