Climate Centre

IFRC Psychosocial Centre

TOOLKIT

Climate Change and Mental Health:

Tools for Decision Makers from a Humanitarian Perspective

connecting climate minds

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Imperial College London Projects

Tools for decision makers from a humanitarian perspective

Guidance and tools

This toolkit is intended for practitioners and policy makers involved with, or interested in, the climate-related compound risks and mental health impacts which fall under the remit of the humanitarian sector. It outlines mental health impacts of climate hazard events and highlights eight key messages to improve support and awareness within the sector of this climate/mental health nexus. Existing tools and materials which may guide practitioners and policy advocates are included in the resource boxes.

Introduction to climate hazards and compound risks

There is a growing body of evidence showing that climate change has significant adverse impacts on mental health (IPCC, 2023). Since 2000, climate hazards such as extreme heat events, flooding, landslides, and cyclones have grown by 46% (Watts, 2018). These events have contributed to heightened levels of food insecurity, increased levels of poverty, reduction in access to education and healthcare and an increase in people experiencing mental health challenges (Austin, 2016, Chersich, 2019, RCRC, 2019). Numerous studies also highlight the correlation between climate variability and the re-emergence of infectious and non-communicable diseases (NCDs) which are often linked to multiple stressors (Franklinos et al., 2019, Friel & Frumkin, 2011, Rother, 2020). For example, with NCDs, climate variability aggravates and increases the risk of – amongst others – allergies, pulmonary disease, adverse mental impacts, injuries and malnutrition (Rother, 2020). Low- and middle-income countries accounted for 86% of that premature burden from NCDs which is also linked to a third of deaths in sub-Saharan Africa (Frumkin & Haines, 2019, Rother, 2020).

As outlined in the IPCC synthesis report, human activity has adversely affected all of the major climate systems and is present in every inhabited region of the world (IPCC, 2023). We are also aware that each region and locality is affected and impacted differently. With that in mind, the synthesiszed observed climate hazards, projected changes per global region and the pathways and mechanisms linking these hazards to mental health outcomes are available through the Connecting Climate Minds Global Hub.

The heightened intensity and frequency of climate events also means there are shorter recovery periods between disruptive events. This poses a considerable challenge to humanitarian operations and affected populations, as humanitarian operations typically operate on a disaster cycle of disaster-response-recovery. Increasingly, the recovery stage is delayed by the magnitude of damages, interrupted by a subsequent extreme weather event, or is limited due

to protracted conflict situations – all limiting psychological recovery time. Similarly, more gradual changes in climate can cause the slow degradation of climate-sensitive livelihood options or resources on which communities depend, creating high levels of uncertainty and distress about the future. The survivors of flood disasters, for example, report ongoing anxiety during heavy rain and panic attacks, nightmares and difficulty concentrating on everyday tasks years later (Cruz et al, 2020, RCRC, 2022).

In addition to preparing for and responding to increasingly frequent climate hazards, the humanitarian sector is also grappling with changes to the nature and duration of conflicts. The below figures highlight the changing landscape of global conflict which the humanitarian sector must address – including conflict and climate stressors happening simultaneously, creating compounding effects on mental health and wellbeing.

The **Armed Conflict Location & Event Data Project (ACLED)** assesses every country and territory in the world based on analysis of political violence event data collected annually. In the dashboard below we see the data around people's exposure to conflict.

ACLED Conflict index dashboard, updated January 2024.

Extreme weather events, compounded by conflict, violence and fragility, present cascading risks to people and are increasingly driving displacement in every region of the world. Understanding the climate hazards, health impacts and the escalating severity of climate-related events is crucial for humanitarian actors and organisations seeking to support humanitarian efforts.

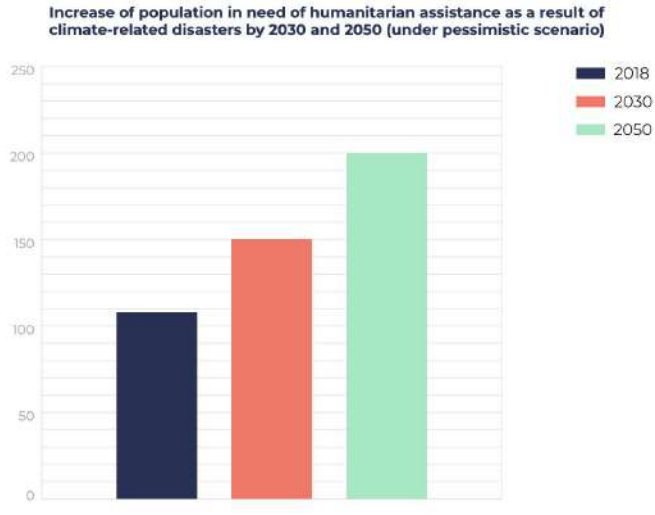

Figure from IFRC: *The cost of doing nothing, 2019. By 2050, 200 million people every year could need international humanitarian aid as a result of climate-related disasters and the socioeconomic impact of climate change.*

The mental health and psychosocial impact of climate hazards

The impacts of climate-related events, whether sudden or gradual, deeply affect mental health and overall wellbeing. For example, a hazard event such as a flood can cause death, injury, sickness from water borne disease, reduced quality of life and profound losses to cultural heritage. Heatwaves and increased temperatures for multiple days can have significant adverse impacts on people's health and wellbeing (WHO, 2018). These include strained social relationships, sleep related disorders (Obradovich, 2017) and an increase in interpersonal violence (Chersich, 2019). In tandem the destruction of critical infrastructure, due to a landslide or cyclone, for instance, can disrupt healthcare systems, limiting access to both physical and mental health services.

> "Populations located in contexts of armed conflict and violence are **particularly exposed to the impacts of climate change** due to the **compounding consequences of conflict** such as violence, socio-economic vulnerability, lack of institutional capacity and erosion of coping mechanisms...." (ICRC 2020)

The ability to rebuild homes, restore infrastructure and re-establish income streams and access to education and services requires resilience. Individuals with pre-existing mental health conditions are more likely to experience injury, death or worse mental health outcomes after a hazard. The reason behind the higher vulnerability is not well documented but can include: reduced ability to understand and follow through on emergency messaging; fewer financial resources; and reduced ability to cope(Woodland, 2023).

In 2021, it was estimated that over 80 million people were forced to leave their homes due to armed conflict and violence (WHO 2021). While not all displacement is due to climate hazards, climate change is known as a 'threat multiplier' as it aggravates existing vulnerabilities. The WHO report noted that one in five refugees or internally displaced people (IDPs) are likely to have a mental disorder such as depression, anxiety, post-traumatic stress disorder, bipolar disorder or schizophrenia. These elevated levels of displacement, and the stressors accompanying this, require mental health and psychosocial support (MHPSS) interventions to be integrated and sustainable.

Many humanitarian actors, who are often first on the scene during or immediately after an extreme weather event, offer mental health and psychosocial support services. However, these services can be limited due to financial constraints, the prioritisation of other timely supports, stigma associated with MHPSS need and access constraints, as populations are on the move or in insecure areas. Examples of MHPSS support provided by humanitarian actors include integrating psychosocial considerations across humanitarian clusters including child safespaces, referral mechanisms for gender-based violence, and keeping families and social support groups together. It also includes providing psychological first aid and training and resources to response staff and volunteers. (IASC, 2010).

Relevance of foregrounding mental health impacts of climate change within the work of the humanitarian sector

Displaced populations

Climate change is considered a threat multiplier and can contribute to displacement due to natural hazards and conflicts. Displaced populations are particularly vulnerable to mental health challenges, emphasising the need for mental health support in humanitarian responses.

Integrated approaches

Humanitarian action is most effective when it addresses interconnected challenges. Integrating mental health considerations into response and recovery efforts enhances the overall impact and sustainability of humanitarian interventions.

Vulnerable populations

Vulnerable communities, such as those in low-income areas or hazard-prone regions, are disproportionately affected. Recognising and mitigating these impacts is essential for social equity.

Resilience and adaptation

Mental health resilience is integral to community and individual adaptation strategies. Building mental health resilience can enhance the overall capacity of communities to cope with climate-induced stressors.

Overview Resources

IFRC, 2019. The cost of doing nothing: The humanitarian price of climate change and how it can be avoided.

ICRC, 2020. When rain turns to dust: understanding and responding to the combined impact of armed conflicts and the climate and environment crisis on people's lives.

ICRC and MSF, 2022. Joint statement: The triple threat of climate change, conflict, and health emergencies: A deadly mix for teh most vulnerable in fragile settings.

IASC, 2021. Technical note on Linking Disaster Risk Reduction (DRR) and Mental Health and Psychosocial Support (MHPSS) Practical Tools, Approaches and Case Studies.

RCCC, 2022. Anticipatory action in Refugee and IDP Camps: Challenges, Opportunities and considerations.

Anticipation Hub, 2024. International humanitarian law, anticipatory action and the Jeddah Declaration.

Eight key messages

1. Early and sustained access to MHPSS services for people adversely impacted by climate related events is essential

Mental health cannot wait. It cannot be a nice-to-have service nor something to come long after a crisis has happened. While physical wounds may heal and houses are rebuilt with time, emotional wounds can linger long after a crisis is over; they often remain hidden and have serious long-term impacts on individuals, families and communities.

Libya – In Benghazi, a man is reunited with his wife.
Conflict and disasters leave more than physical wounds. In the turmoil, panic and terror, family members can be separated in minutes, sometimes leading to long years of anguish and uncertainty about the fate of children, spouses, or parents. Trying to locate people, and put them back into contact with their relatives, is a major challenge for the ICRC and National Red Cross and Red Crescent Societies.
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Resource Box 1

WHO, 2021. Providing mental health support in humanitarian emergencies: an opportunity to integrate care in a sustainable way.

UNHCR, 2015. Operational Guidance Mental Health & Psychosocial Support Programming for Refugee Operations.

IFRC Psychosocial Centre, 2024. MHPSS and the climate crisis: Short workshop guide.

IFRC Psychosocial Centre, 2023. Impacts of Climate change and Mental health (video).

IFRC, 2021. RedTalk: Dealing with climate anxiety (webinar recording).

2. MHPSS must be integrated across sectors

The essential services should be integrated across all stages of the disaster management cycle, to ensure people are reached before, during and after disasters. This includes climate adaptation, anticipatory action and disaster preparedness, risk reduction, response and recovery. Integration of MHPSS will ensure that persons in need of more specialised MHPSS services are identified and properly referred. Integration is also critical to reducing stigma, discrimination and exclusion.

Resource Box 2

IFRC Psychosocial Centre, 2023. Building the resilience of young people affected by the climate crisis (workshop guide).

UNICEF, 2022. Global Multisectoral Operational Framework for Mental Health and Psychosocial Support of Children, Adolescents and Caregivers Across Settings.

IFRC, 2020. Protection, Gender and inclusion in Emergencies Toolkit.

3. MHPSS responses must work to reduce long-term vulnerability and exposure

Addressing the MHPSS needs of people affected by climate change requires long-term, multi-stakeholder solutions. No single player working in a silo can respond to this challenge. Multi-layered systems of complementary support that meet the needs of diverse groups are needed to ensure that the varied MHPSS needs of those impacted by the climate crisis can be met. More partnerships and sharing of expertise, resources and knowledge are needed.

In the photo training in integrated risk management for Red Cross volunteers in Andhra Pradesh state. (Photo: IRCS)

Resource Box 3

Partners for Resilience: Disaster Risk Reduction Game Kit, Decisions for the decade [While particularly suited for government officials at local to national level, this game can be useful to a wide range of stakeholders affected by long-term climate risks.]

OCHA, Anticipatory Action Toolkit.

WHO, 2022. Mental health and climate change: Policy brief.

RCCC. Heat action toolkit.

4. Support local solutions

Efforts must be sustainable and support the strengthening of local healthcare systems and community-based approaches, such as the development of risk communication strategies to disseminate essential information around climate risks to mental health. The development of community early warning strategies can also provide clearer pathways to safety and reduction of stress due to climate events.

For instance, in the 2024 Global Plan the International Federation of the Red Cross (IFRC) has set a target of reaching 15 million people annually with psychosocial support. To support implementation, 21 national societies in the Asia Pacific are collaborating on mental health and psychosocial support. “A strengthened community-based approach is needed to ensure that people can access health services whenever they are needed. At present, more than a billion people worldwide are cut off from these services (IFRC, 2023).”

Resource Box 4

WRI, 2022. Locally Led Adaptation: From Principles to Practice.

IFRC, 2020. Community Early Warning Systems: Guiding Principles.

IFRC. Vulnerability and Capacity Assessment (VCA) and other Assessment Tools.

5. Strong collaboration is required to build and maintain MHPSS systems that can respond to the demands of the climate hazards and their impacts

The development of effective systems of integrated support for individuals and communities affected by climate related events requires strengthened collaboration among all responders. These may include psychiatrists, psychologists, social workers, school workers, academic institutions, UN agencies, NGOs and people from communities themselves.

Resource Box 5

IASC, 2010. Mental Health and Psychosocial Support in Humanitarian Emergencies: What should Protection Programme Managers Know?

WHO, UNHCR, 2015. mhGAP Humanitarian Intervention Guide (mhGAP-HIG): Clinical management of mental, neurological and substance use conditions in humanitarian emergencies.

IPCC, 2023. In: Climate Change 2023: Synthesis Report. Health and Nutrition.

6. Agile, adaptable funding solutions are required.

Funding needs to be allocated to MHPSS to ensure services reach those in need. Programs and funding need to be agile and ready to adapt quickly to new challenges to mental health anticipated in a changing climate. Mental health needs to feature more prominently in National Adaptation Plans (NAPs), funding opportunities, adaptation and loss and damage proposals.

As the case studies from the Red Cross Red Crescent (nd) National Adaptation Planning reveal, pilot national societies have worked hard within their specific contexts to bring their knowledge on local vulnerability to the attention of policy makers and engage in the national adaptation planning processes. However there is a tendency in NAPs to list aspects of country-level impacts, but they generally do not include inter-relationships between climate change and mental health. For instance, in the 2010 WHO Mental Health Gap Action Plan climate change is not included as a risk factor (Rother, 2020), and in the 2021 WHO survey where 95 countries provided data, only nine have included mental health and psychosocial support in their national health and climate change plans (WHO, 2022).

Through this toolkit we advocate for more directed case studies and NAP planning to focus on the mental health impacts of climate change.

Resource Box 6

Red Cross Climate Centre (RCCC), 2021. Climate Change impacts on health and livelihoods Mongolia assessment.

Adaptation Fund, 2020. Local leadership in adaptation funding.

Climate Action Toolkit, nd. Module 3 Advocacy, policy dialogue and funding

RCCC, nd. National Adaptation Planning: Why should the Red Cross and Red Crescent engage?

Miller, et al, 2023. Assessing Psychosocial Health Impacts of Climate Adaptation: A Critical Review.

7. Caring for carers and responders must be embedded in our responses to climate events

Supporting those working to address climate crisis adaptation and preparedness is crucial to ensure a healthy and sustainable global workforce. Investing in building the skills of staff and volunteers is imperative to the provision of quality MHPSS services and care and to ensuring that MHPSS is prioritised within all programming. Training, mentoring support and supervision are needed to effectively build a workforce to respond to MHPSS needs in the face of the climate crisis.

Resource Box 7

WHO, et al, 2011. Psychological first aid: Guide for field workers.

UNICEF, 2021. I Support My Friends Resource Kit: Equipping Children and Adolescents to Support a Friend in Distress.

IFRC, 2018. Caring for volunteers: A psychosocial support kit.

UNHCR, nd. Emergency Handbook: Mental Health and Psychosocial Support (MHPSS)

Humanitarian Leadership Academy, 2018. Psychological first aid for children.

IOM, nd. Psychosocial Needs Assessment in Emergency Displacement, Early Recovery, and Return.

8. Data collection and research: Support research on the climate-mental health nexus to inform evidence-based policymaking

Reports of uneven data collection; disparities between data held at country level and with international agencies; and variations in the quality of data and metadata are widespread (UNFCCC, 2021, IPCC, 2023). Yet within communities and regions there are already resilience strategies in place, developed by communities through generational learning (such as lived experience case studies). There is a call for generating evidence for interventions or informal coping strategies that have already been developed (either by organisations or by communities) but do not currently have documentation or evidence supporting them. In humanitarian practise, we sometimes call this autonomous/local or indigenous adaptation. It will be important to usher some research on existing adapting and coping practises to mitigate mental health impacts surrounding extreme weather events, some of which may be maladaptive, but all of which will contribute to a more nuanced and complex understanding of the impacts of climate change on human health and wellbeing.

Resource Box 8

Useful databases and platforms utilised within the Humanitarian Sector EM-DAT contains data on the occurrence and impacts of over 26,000 mass disasters worldwide from 1900 to the present day. The database's main objective is to serve humanitarian action at national and international levels. The initiative aims to rationalise decision-making for disaster preparedness and risk reduction strategies and provide an objective base for vulnerability assessment and priority setting.

Reliefweb is a humanitarian information service provided by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA).

Humanitarian data exchange (HDX): contains data from World Health Organization's data portal including mental health as a category.

The Armed Conflict Location & Event Data Project (ACLED) assesses every country and territory in the world based on analysis of political violence event data collected annually.

The Anticipatory Hub is a platform to facilitate knowledge exchange, learning, guidance and advocacy around anticipatory action - which refers to actions taken to reduce the humanitarian impacts of a forecast hazard before it occurs, or before its most acute impacts are felt.

INFORM is a multi-stakeholder forum for developing shared, quantitative analysis relevant to humanitarian crises and disasters. Included in the tools is the INFORM Climate Change Risk Index which provides quantified estimates of the impacts of climate change on the future risk of humanitarian crises and disasters. The results are intended to inform policy choices across climate mitigation, climate adaptation, disaster risk reduction, sustainable development, and humanitarian assistance.

There is much more we need to know about the impacts of climate change on mental health and wellbeing, especially in under-researched geographies and how the impacts are experienced differently within those populations. Investment in research is crucial. However, there is much we know from existing work, research and experience following extreme weather events, hazards and conflict, requiring immediate action by humanitarian actors and those supporting humanitarian efforts.

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