

Some reflections on a Living with the Climate Crisis group

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I am writing from co-facilitating and co-participating in an online Living with the Climate Crisis group running during the first half of 2023. The group emerged from a large online platform of medical mothers, not least in response to finding posts about the climate crisis were often met with silence. Out of this seven met, connecting from across the UK and a variety of medical specialities, with different ages of children and different places on a climate journey.

The context of this very specific group feels important. The health impact of the climate and biodiversity breakdown is part of what has been called a syndemic. This is not just where ills coexist but where they exacerbate each other in biological and social interaction “clustering within social groups according to patterns of inequality deeply embedded in our societies”. The current state of the health service is arguably one of human extractivism and exhaustion. The medical model balances narrative, relational, social, ecological and preventative perspectives in the hands, minds and leadership of some. For others it is synonymous with individualisation and a kind of industrialised efficiency, establishment machine of health consumerism, centralised control and compulsion. Tackling climate and ecological breakdown is absolutely about health and the failures to grasp and act are part of the moral injury territory and alienation of modern health care. Doctors as professionals can feel caught in a state of accountability without responsibility, perhaps harnessed by what has been seen as privilege though this is eroded. Arguably, though supposedly a leadership profession, we are still often caught by the immediate survival needs of our patients and ourselves – and if we look up what we see is transgressive and then where do we look?

This along with parenthood can feel a syndemic of feelings of accountability, responsibility and paralysis – fight, flight and freeze.

In the chapter on “Raising children to grow resilience amid climate and social collapse” in *Holding the hope* Jo McAndrews writes “We cannot protect them from what is happening but we can and must protect them from being alone with it”.

There is something about “horrified witness” in all this both as parent and as medic – most clearly written about for me in relation to racism by Helen Morgan in “The work of whiteness” – but of course all is entwined – and we need to see all to see clearly and we need collective support of some kind to do this. It is easy to find myself without words in Roger Duncan’s place of narrative collapse. As I write, “sharp rise in number of schools in England with collapse risk concrete” comes up on my phone – offering itself as a layered or tentacled or syndemic metaphor - before I even think about everything else in the news including floods in Libya 50 times more likely due to climate breakdown and in a country with collapsing or collapsed infrastructure.

In a climate café recently a participant was puzzling why we can’t do stronger messaging and somehow it seemed so clear we can’t do right messaging unless we are continually working with the impact. It’s the same in medicine and parenting - maintaining the toughness of compassion is a continual practice.

So the small group of us came together sharing anxiety, concerns, need and possibility of action and the experience of the bewildering silence and negation of others. The specificity of the group seemed important – so though we didn’t share a locality we shared a common experience and perhaps also a difficulty feeling we could be part of other groups. The dads were supportive enablers of the group and I don’t think there is a medical fathers group but that is another

conversation – though of course again interwoven in this system and culture of ours. I am writing this very much from my perspective but some comments from others are included:

“For me the hardest thing was turning up. Not necessarily because I was otherwise engaged, but more because the thought of doing something challenging, potentially emotional, and with distressing topics to consider, was always difficult to accept of an evening when one naturally wants to wind down and shut off. Yet, in much the same way as I find I must force myself to exercise, it was always so worth attending and I was grateful every time I did.”

“I enjoyed the balance between the imaginative and mindful versus the scientific and specific. I personally found one aspect easier than the other, but liked that I was taken a bit out of my comfort zone, as after all, the entire concept of the climate crisis puts us all well outside our comfort zones.”

“I have already been involved in activism for a while so didn’t feel that this moved me along in that direction, but for others who aren’t there yet it might be helpful to have more Active Hope elements. I did find it helpful to explore communication around climate more and this is not something I’d had any training on previously.”

Why LWCC and how did we find it?

It was LWCC partly because it was newly launched and therefore freshly vibrant on top of the pile. The main obvious alternatives could have been Chris Johnstone’s *Active Hope*, linking into the potential and depth of the *Work That Reconnects* and also gifted with all materials online; or going straight to a psychodynamic/systemic work/action discussion group working through feeling and relationship or something specifically from the parenting perspective. Perhaps LWCC had more that would be familiar to medics in its structure which would help with a sense of a known base and opening into the balancing with the more imaginal. But I honestly could make equivalent arguments about *Active Hope* with Chris Johnstone’s own medically based experience. In the pandemic I did some Active Hope based work online with medics as part of reflective practice and that group in that part of our metacrisis was very creative. The online Active Hope and the LWCC group are designed differently – you could do the Active Hope online on your own though I would recommend doing it as a group. LWCC feels to me very much about the group experience as integral to the process.

The modules and the order of sessions worked well for us. There is plenty of material and we found ourselves slightly simplifying though keeping the underlying structure of some sessions, valuing the encouragement to use the material as fitted our context. There is lots in medical training in terms of communication and making changes – for example a force field analysis is in Active Hope, medical Quality Improvement teaching and LWCC. I always want to add the “way of aikido” to the force field analysis bringing our objections and resistances into service to improve solutions – blending and bringing back into harmony with the universe. There is an issue about how much “solutioneering” can reinforce the problem and this is quite a key point for medics where so much of medical practice may be as much part of the problem as the solution. However there is much from medical “solutioneering” to bring in and to reflect upon and much in medical experience about how to seek and find balance to sustain action and for action which will bring us into a zone of tolerance or into Kate Raworth’s doughnut between ensuring a social foundation and not overusing our natural resources and capacities. This is not to say medicine has the answers but it does have the discussion and we can need to make spaces to connect with that discussion in the hamster wheel of everyday. The LWCC became a valued space for us.

I almost didn’t write about the self as a tree and the group as forest and I think I feel very protective of that part of the group and don’t want it to become in any way performative. It is deep and wide

as an exercise like a river with many tributaries and flowing into an ocean – and holds the magic of healing which contact with nature can bring. Some of us lost our trees which may mean a discarding of the experience, unless nearly forgetting is protective or that we are all too well trained in losing that emotional nature connection.

The Marshall Ganz story of self, us and now and writing my own story and thinking through that story to the ask I make of others was new and challenging and a welcome expansion on the general idea of using your own experience and narrative to frame communication on the climate crisis. I also and ruefully re-realised how much I can give up on some conversations and again how talking with close friends and family can be the most difficult. Communicating with others feels so much about communicating with myself – my own relationship with my anger and avoidance. As suggested it is worth looking at the pictures of the postcards you choose for the end of session reflection – one of mine for this module had a pouncing cat amongst flowers and contained reflection on my anger. In one way maybe the practice of medicine is a way to harness a predator self – how do we make ecological niches for our predators that harness them to care? I maybe now find myself ranting more. While doing this module I was writing an introductory input to a reflective day to think how we hold the “climate and ecological and narrative” (meta)crisis in the sense making of the clinical encounter and relationship. The Ganz story work influenced me though perhaps not in the obvious way – it took me out of my immediate prejudices about what I was trying to speak to – and took me into images from a Cornish artist of my youth which expressed the feeling and progression of hope, witness and endings – took me into a different relationship with the speaking.

I am aware I am writing as a participant facilitator and that is a stance open to discussion about what is needed to facilitate. The hardest thing to hold felt the need that someone had the answers: or had the way to hold the feelings without it hurting; or the way of activism or action which would work. This wasn't something to not hold in my sense of participant facilitation but more a belief that the group is what can hold a way with all this – is greater than the sum of its parts. It's a bit like I hear from some indigenous knowledge discussion – we need to come together bringing different parts of the whole – we need to yarn or dream – to be a forest. In this we all need to balance our participation and facilitation and current models are inevitably influenced by our colonial and patriarchal social structures.

What next?

Thank you to Ro, Rebecca and Daniela for the work, depth and generosity of the materials and imaginal spaces for roots and shoots. Thank you to Mel co-facilitator and who brought the group together.

I look forward to more groups and practice. For example I am in discussion about the idea of working with more groups in a green health space – more connections, more evolutions, more practice, more ever shifting meadow ecologies of groups and conversations.

Part of my practice is struggling with the title and worrying at each element – living with, climate and crisis: practising living with as about balance, climate about everything around us, unspoken, we can't see it, and crisis – this definition comes up top on today's internet search.

crisis
'krʌɪsɪs
noun

a time of intense difficulty or danger.

a time when a difficult or important decision must be made.
the turning point of a disease when an important change takes place, indicating either recovery or death.

References:

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