

# Climate change: Clinical considerations

Dennis Haseley LCSW

Training and Supervising Analyst,  
Psychoanalytic Association of New York, an  
affiliate of the NYU Langone School of  
Medicine

## Correspondence

Dennis Haseley, Training and Supervising  
Analyst, Psychoanalytic Association of New  
York, an affiliate of the NYU Langone School  
of Medicine.

Email: dlhaseley@msn.com

## Abstract

Psychological reactions to climate change run the gamut from a sense of the need for urgent action to utter denial. This paper looks at some categories of defenses that block acknowledgement of this pressing threat. It cites the work of Renee Lertzman, an analytically oriented social scientist, whose research suggested that disavowal, negation, or denial could be deconstructed and viewed as defenses against intolerable anxieties, feelings of helplessness and disappointment, loss and guilt, and warded-off wishes for agency and reparation. Clinical examples and personal self-reflection are employed to posit that when anxiety over climate change, a serious disquiet in its own right, gets confused with childhood traumatic anxiety, with its attendant feelings of helplessness, smallness, hopelessness, shame, isolation, and useless rage, then dysfunctional defenses and affects are more likely to come to the fore. In contrast to this, realistic anxiety over our changing climate and need to shift from a carbon-based culture can be made more tolerable and can allow one to face the uncertain future, to feel one's feelings, to work them through, to share them without shame, and to feel a certain amount of agency in confronting the climate future and working to cope with it, both individually and societally. Finally, the paper suggests that we clinicians need to listen with new awareness to patients' references to and defenses against climate change, as not simply displacements but also as allusions to a looming reality that is a thing in itself. It is suggested that although we cannot impose our agendas on our patients, as climate change disavowal breaks down, we do have in our tool kit ways of helping our patients with it,

depending of course very much on the state of our own disavowal.

**KEYWORDS**

childhood helplessness, climate change, denial, denialism, environmental melancholia, stages of grief, traumatic anxiety

## 1 | INTRODUCTION

My office overlooks Washington Square Park in New York City, and the weather is a constant presence outside my large windows, be it beating rain, light drizzle, clear blue skies, or great ships of clouds floating by. Patients often remark on the seasons, the color of the leaves, the snow, and the buds on trees. In my office, however, as I listen and speak to my patients, there are other forces pressing on us: the changes in our climate, and their registrations, conscious and not, in our psychologies.

Our culture—including our psychoanalytic culture, the planes we catch, the taxi rides from the airport, the traffic, this building where we hold meetings, the construction we passed on the street, these lights, the commutes we take to our offices, our heating and air conditioning systems, our food systems, and the far-off wars we are fighting—rests on fossil fuels. We are surrounded by and dependent on their utility. They, and the cultural tropes that support them, are imbricated in our material and psychological existences—the ways we symbolize, our dreams, adolescent rites of passage, our unconscious fantasies of power and desire. We are influenced, consciously and unconsciously, by their omnipresence.

And at the same time, we may be aware both of the dangers that our current course entails and the necessity that we need to shift to a new practical and theoretical framework that is dependent on energy that is not supplied by fossil fuels. And if one really thinks about this, one cannot help but be struck by the enormity of the transition, and the ways we defend against it.

The London-based psychoanalyst, Sally Weintrobe (2013), outlines in her book, *Engaging with Climate Change*, three forms of denial: denialism, negation, and disavowal.

Denialism, as defined by Diethelm and McKee, is “the employment of rhetorical arguments to give the appearance of legitimate debate where there is none, an approach that has the ultimate goal of rejecting a proposition on which a scientific consensus exists” (Diethelm & McKee, 2009, p. 3).

A second form of denial is negation. It is an assertion that a fact is not a fact, that something that is, is not. It is often a transient state, as in the first stages of mourning, or when one wakes up and reads the headlines about California fires or monster hurricanes with Biblical-scale floods or triple digit temperatures and thinks, “This can't be happening.”

A third form of denial, which is arguably the most widespread, the most frequently employed by us and our patients, and therefore arguably the most pernicious, is that of disavowal. Disavowal is the state of knowing and not knowing at the same time: Toward the extreme end of the scale, it is the stuff of perversion. It is when something disturbing that is known is minimized; in our clinical work, it may manifest as versions of, “Yes, but.” We can see this phenomenon in a recent piece in the NY Times, with data maps from surveys taken by the Yale Program on Climate Change Communication (Popovich, et al. 2017). The results state that although most people know climate change is happening and a majority agree it is harming people in the United States, most do not believe it will harm them.

But looks can be deceiving. As we psychoanalysts have demonstrated, individuals are not consciously aware of many of the significant attitudes and dynamic patterns shaping their thinking and behavior and may not own up to those they are aware of.

Renee Lertzman, an analytically oriented social scientist, in her groundbreaking book, *Environmental Melancholia*, discusses a research project in which she did extensive in-depth interviewing with residents of Green Bay, Wisconsin, who were selected for their middle of the road views on the local and Great Lakes region environmental degradation, much of it due to the area's major employers, paper mills. Using a psychoanalytic framework, promoting "free-associative" like responses in her interviews, she found that many of the residents who seemed uncaring or apathetic or uninvolved regarding environmental matters were in fact deeply caring and concerned about the environment. She found, for instance, that apparent apathy was in fact a deeply conflicted compromise state; as opposed to numbness or uncaring, self-preoccupation or unawareness, she found in her interviews that so-called apathy could be deconstructed and viewed instead as a defense against intolerable anxieties, feelings of helplessness and disappointment, loss and guilt, and warded-off wishes for agency and reparation. She coined the term "environmental melancholia" to try to capture some of the depth psychological dimensions of what she found (Lertzman, 2015).

As I move into providing some individual and clinical illustrations of some of the above points, I offer this question for consideration: how much of this warded-off awareness, how many of these anxieties exist not only in us but in our patients, but are not expressed and instead defended against, for the reasons listed above, but also because patients may feel it is not within the framework of the clinical encounter to bring such things up. In other words, how much are we witnessing and, in some ways, are even unwittingly complicit in our consulting rooms, with the avoidance of environmental melancholia and anxiety?

As I was preparing for this discussion last summer, doing some extensive reading, having, as it were, my antennae up for matters related to climate change, I experienced, over some days, a disoriented reaction. Walking the streets of New York City, going to restaurants, to my air-conditioned office, occasionally driving in traffic, I experienced a kind of *jamais vu*, being surrounded by something familiar that was at the same time eerie and dislocating. Slowly, the realization dawned: Much of this will no longer be able to exist. Along with the realization came uncomfortable feelings, affects that were hard to tolerate, of anxiety and slow-burning panic. Over a span of several days, I had a series of nightmares, involving being lost in strange landscapes amid threatening people and painful anxious separations from loved ones. In the same period, I sent out an email to the members list of the American Psychoanalytic Association.

"For a project in which I am involved, I would very much like to hear from fellow clinicians who may have had experience in their practice with patients who are impacted by or concerned about climate change. For instance, a 1981 paper by Martin Waugh, MD (Waugh, 1981), looked at what its title promised: *The Psychological Fallout of Surface Nuclear Testing*, including its appearance clinically in anxiety and defensive manifestations. Although the threat of nuclear war and memories of atomic testing interwove with personal psychologies, it arguably also manifested as a thing in itself (not just a displacement). I am wondering if clinicians are currently encountering parallel phenomena in their patients (anxieties, defenses, guilt, etc.) related to the threat of climate change, as a thing in itself. And with child and adolescent patients as well."

I received just one response, from an analyst, who noted that although she had a number of patients who mentioned climate change in a worrying tone (which I am sure we all have experienced), there was one in particular she thought might be of interest: This was a woman married to a professional explorer who has made many expeditions to the poles: Although she has an ongoing anxiety disorder, both she and her husband are both quite anxious about climate change in general but especially what they have witnessed in Antarctica. The analyst writes, "there is no question in my mind that the anxiety she and he experience is 'a thing in itself.'"

One can imagine, I think, how direct witnessing of the current impact of global warming, for instance, at the South Pole, makes disavowal more difficult.

Following a separate inquiry of mine, a supervisee mentioned a 30-year-old patient, who brought up climate change in the following manner (again, probably not unfamiliar to us): "The thought of the catastrophe of that is too overwhelming. The realization, that in the world, there are no parents home." This dovetailed with his personal

history—especially the bit about no parents home—but again, I think this points to disavowal and some of the reasons for it.

Another colleague shared an insight about a male patient, who, despite his “knowing better” about the environmental implications, could not imagine giving up his powerful car, contemplating how even a sporty electric car would lack the vroom-vroom aspect of his internal combustion-powered BMW. Associations to masculinity and femininity ensued, and my colleague speculated to me, in a private correspondence, that there may be anxieties over the loss of power, castration anxieties, that might symbolize wind and water and solar technologies as feminine and fossil-fuel based technologies as strong, gritty, and masculine. (This last point was later also made by Paul Krugman (2018) in a column in the NY Times regarding the Trump administration and its support of dirty energy sources).

A clinical example from my own practice: A lawyer, prone to anxiety, was looking forward to her summer holiday, in Maine, where her family had a house. She had however read a recent Op-Ed by Noam Chomsky about the threat of nuclear arms and that, as well as other news, Trump, and particularly global warming, had put her into a tizzy. She wondered how her family house would fare so close to the sea. She was considering not listening to the NPR newscast she liked to have breakfast to, not watching television, not reading the paper. Maybe she would just read fiction. She was extremely anxious, and worried she would not be able to make the drive up due to anxiety symptoms. She associated, as did my supervisee's patient, with wishing for adults to be reasonable, responsible, to take charge. She spoke of some of her history, which she had avoided in detail: She referenced her father's drinking, which I knew about, but for the first time she used the word “alcoholism” to describe it. She remembered him being out of control, slurring words with company, with friends of hers at dinner, a time when he was sick in the bathroom. Once in high school, her mother picked her up from a part-time grocery store job in Maine, and her father was drunk in the back seat, and he threw up in a bag. She was furious at her mother who denied his addiction and never spoke to her about it. Years later, her father died of a metastatic lung cancer that led to a brain tumor; in his final weeks, he was out of control, dizzy, off balance, which she links with his drinking both causally and associatively. She recalled her mother's major denial about things, how for months the mother kept a dog that had a massive brain tumor and the patient only found out when the mother called her to say, the dog was not feeling well, and when she went to her mother's house, she was horrified at the animal's state and the neglect it had suffered. She remembered as a kid seeing reports about the Cuban missile crisis, and she recalled her terrified feelings.

As the session progressed, it struck me that there was perhaps something larger being communicated to me, a dynamic that not only applied to this particular patient but perhaps had some universal relevance for fears related to climate change.

My office is a little over 2 miles north of the site of the then-World Trade Center. After 9/11, both my established patients and new patients who arrived in an influx worked on their reactions to the event. The reality of the event was of course filtered through each of their individual psychologies and histories, but what was striking, in my first-hand experience—as opposed to theoretical knowledge—was the difference between those whose histories were more versus less traumatizing.

So my current patient, the lawyer who was about to holiday in Maine was reacting to current realities—including prominently, the impact of global warming—with a reaction determined by a kind of childhood post-traumatic stress disorder (PTSD), which flooded her with terror and panic, with traumatic anxiety that overwhelmed her and threatened to shut her down. The out-of-control prospects of the impact of climate change dovetailed with her history of feeling and witnessing out-of-controlness—her father's alcoholism, her mother's denial and neglect, exploding tumors tied in with her overwhelming childhood fears—and made her want to put her head in the sand. My own reactions, which I noted above, were familiar to me from associations to difficult childhood trials of my own. These constitute examples of overwhelming anxiety, tied in with past traumatic anxiety—versus a more tolerable anxiety, with affects about climate change that could be addressed and worked through but without the feelings of childhood helplessness and hopelessness and entrapment attached. In other words, when anxiety over climate change, a serious disquiet in its own right, gets confused with childhood traumatic anxiety, with its

attendant feelings of helplessness, smallness, hopelessness, shame, isolation, and useless rage, then dysfunctional defenses and affects are more likely to come to the fore. In contrast to this, realistic anxiety over our changing climate and need to shift from a carbon-based culture can be made more tolerable and can allow one to face the uncertain future, to feel one's feelings, to work them through, to share them without shame, and to feel a certain amount of agency in confronting the climate future and working to cope with it, both individually and societally.

So if we are able to understand that what stands in the way of effective action on addressing climate change are metapsychological considerations—largely resulting in disavowal, from so-called environmental melancholia, possibly from dynamics about power and powerlessness, and from intolerable anxiety due to past trauma—and that we are living in a culture that aids and abets such disavowal—then what are we, as psychoanalysts, to do?

Rosemary Randall, a British psychotherapist who is the director of Cambridge Carbon Footprint suggests that what is needed is acknowledgement of loss. She adapts the grief counselor William Worden's (2008) four stages of grief—accepting the reality of the loss, working through the pain and grief, adjusting to the new environment, reinvesting emotional energy in a new life—as a model for coping with and preparing for being an activist about climate change. There are several kinds of losses involved in the warming planet, be they absolute loss (such as the extinction of species or damage to environments); chosen loss (as when one commits to certain self-curtailling actions regarding carbon use); transitional loss (as in moving from one stage of life—but in this case—way of living—to another); and perhaps most importantly, anticipatory loss (as in facing a warming planet and its impact and preparing for it and mourning in advance). Of course, individual histories of early or traumatic loss will make such tasks more difficult.

As I suggested above, if we think of another cluster of anticipatory reactions to climate change as consisting of anxiety responses, then those that are entangled with past trauma and traumatic anxiety and helplessness will also need to be worked through, perhaps in parallel stages, involving the separation of past traumatic unmetabolized affects from fantasies about the future, projecting realistic survivable scenarios, working to make fears tolerable, and accessing personal agency in response to the crisis. What would emerge from this process? One thinks of mass humanitarian efforts in the wake of floods and storms, although in this case they have to occur in the foreshock. And what human drivers will make this possible, if our defenses are loosened? One thinks of Winnicott's (1963) "capacity for concern," urges for self-preservation and love of the other, parental love, empathy; Erikson's concepts of generativity and caring, or the solidification of wisdom versus despair, wisdom being defined as "informed and detached concern for life itself in the face of death itself" (Erikson, 1982, p. 6).

In our clinical work, we can all think of patients who are facing difficult impinging realities—prospects of job loss, illness, separations from growing children or aging parents, or even the need for practical plans for the future—and who flee to passivity or denial. In a parallel way, perhaps we need to listen with new awareness to patients' references to political and environmental concerns, and wonder, if they too might they avoiding their awareness, and sense of their personal agency, of a looming reality that is a thing in itself? We cannot impose our agendas on our patients, but as climate change disavowal breaks down, we do have in our tool kit ways of helping our patients with it, depending of course very much on the state of our own disavowal.

For instance, a supervisee discussed an analytic patient who had overwhelming nightmares about super-storms and floods. She had conscious terror about climate change that she discussed in the sessions, and a wish—expressed in the dreams—that her analyst would guide her through the floods in a boat, or meet her at the airport to usher her to a plane that would take them both to safety. One of her reactions is to isolate socially. Historically, she is from a seemingly stable family, but the one notable thing in her history is her experience, at 10, of moving to a so-called third-world country where there was seeming exposure to some overwhelming scenes. Typically, we would want the patient to elaborate on such events and memories and understand early influences on her present terror. And yet the displacement from earlier terrors is to something occurring in the present world that is frightening in its own right. How does one intervene then? Arguably, there may be a different approach now than we might have taken 10 or 15 or 20 years ago, when climate change was less of an obvious certainty: for this patient, arguably, is reacting both to past trauma and current anticipated trauma, and using an maladaptive defense—*isolation*—to try to cope. So

I think, over time, one would have to intervene on both levels: acknowledge the influence of the past on the present, but also, perhaps later, acknowledge that her overwhelming fears of the present are based on challenging, and yes, scary, present and future realities, but wonder with her if there are not other ways to react in the present if childhood helplessness is no longer the order of the day?

## 2 | ADDENDUM: COLLECTIVE ACTION ON PSYCHOLOGICAL RESPONSES IN THE PUBLIC

On a collective level, there are examples of analysts who have been influential, if not instrumental, in dealing with societal crises. Ernst Jones' successful efforts to save psychoanalysis, and many psychoanalysts, from the Third Reich, is a preeminent example; but efforts by Hannah Segal and others regarding nuclear disarmament, Robert Wallerstein with Human Rights, also stand out, along with many other examples that are beyond the scope of this presentation to cite.

So what of this current crisis? Here, in the United States, Columbia University's Center for Research on Environmental Decisions (2009) publishes *The Psychology of Climate Change Communication*, a guide for communicating scientific data to various audiences, but it appears to be more psychological and practical and less psychoanalytically informed. Climate Access, a network of concerned professionals, offers similar guidance. The Yale Program on Climate Change Communication investigates and tracks the American public on reactions to climate change—it finds for instance that fear-mongering has a negative impact—but again, it seems to favor a less dimensional approach, viewing individuals as single actors rather than complex individuals with histories and unconscious fantasies and defenses. The Breakthrough Institute in California cuts a little deeper perhaps, looking at how political affiliations impact the reception of information on climate change, finding, for instance, that efforts to link current natural disasters to climate change motivate liberals and environmentalists, but alienate moderates and conservatives, who instead tend to respond positively to framing pro-environmental efforts as leading to a better society or a better economic and technological development.

It is primarily in the United Kingdom, however, that there are some groups that focus on the need to help with the kinds of reactions I have been speaking of, on depth psychology, both among the public and also among various organizational actors such as policy makers and community and environmental groups. For instance, the Climate Psychology Alliance aims to use analytically oriented understandings to “illuminate the individual and cultural responses as the crisis unfolds, [get] people to engage with the unthinkable, and develop resilience, so they can contribute to sustainable communities and prepare for change.” To this end, they try to foster so-called safe spaces where individuals in communities can speak to and work through both conscious and unconscious feelings of hopelessness, grief and outrage; they provide talks, workshops, and seminars to communities and organizations to help in understanding and communicating depth psychological dynamics, as well as providing a way for individuals and communities to counter feelings of shame and isolation—which feeds denial—by fostering connections and it seems, in a Hartmann-esque way—promoting adaptation to the changes upon us.

I will also mention Carbon Conversations, also in the United Kingdom, which is an organization founded by a psychotherapist and an engineer as a psycho-social project to address the practicalities of carbon reduction while taking account of the complex emotions and social pressures that make this difficult. They run groups focused dually on the emotional reactions to climate change and practical steps to reduce carbon use and offer many materials that can be downloaded from their website to help with these twin challenges.

Whether the American Psychoanalytic, local societies and institutes, or individual analysts here in the United States can or will take on these challenges to promote a more in-depth view and outreach—as those in the United Kingdom have done—remains to be seen.

## REFERENCES

- Center for Research on Environmental Decisions at Columbia University (2009). The Psychology of Climate Change Communication, [www.cred.columbia.edu](http://www.cred.columbia.edu).
- Climate Access. <https://climateaccess.org>.
- Climate Psychology Alliance. <https://www.climatepsychologyalliance.org>.
- Diethelm, P., & McKee, M. (2009). Denialism: what is it and how should scientists respond? *European Journal of Public Health*, 19(1), 3. <https://doi.org/10.1093/eurpub/ckn139>
- Erikson, E. (1982). *The Life Cycle Completed*. New York: W. W. Norton and Co.
- Krugman, P. (2018). The Depravity of Climate-Change Denial, *The New York Times*, November 26, 2018.
- Lertzman, R. (2015). *Environmental Melancholia*. New York: Routledge.
- Popovich, N., Schwartz, J., & Schlossberg, T. (2017). How Americans Think About Climate Change, in Six Maps, *The New York Times*, March 21, 2017.
- Randall, R. Carbon Conversations, [www.carbonconversations.co.uk](http://www.carbonconversations.co.uk).
- The Breakthrough Institute. <https://thebreakthrough.org/>.
- Waugh, M. (1981). The Psychological Fallout of Surface Nuclear Testing, *American Imago*. *Fall*, 38(3), 305–322.
- Weintrobe, S. (2013). Introduction. In S. Weinbrobe (Ed.), *2013 Engaging with Climate Change*. New York: Routledge.
- Winnicott, D. W. (1963). The Development of the Capacity for Concern. *Bulletin of the Menninger Clinic*, 27, 167–175.
- Worden, J. W. (2008). Grief Counseling and Grief Therapy. *A Handbook for the Mental Health Practitioner* (4th ed.). Springer Publisher.
- Yale Program on Climate Change Communication. <https://climatecommunication.yale.edu>.

**How to cite this article:** Haseley D. Climate change: Clinical considerations. *Int J Appl Psychoanal Studies*. 2019;16:109–115. <https://doi.org/10.1002/aps.1617>