The inconvenient truths of health and climate crises that can’t just be ignored

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The campaign to elect the UK’s next prime minister is dominated by competing pledges to cut taxes (doi:10.1136/bmj.o1726). The candidates seem intent on pretending that covid has gone away (doi:10.1136/bmj.o1779, doi:10.1136/bmj.o1780). Acting as if our plans to tackle the climate emergency are on track (doi:10.1136/bmj.o1741, doi:10.1136/bmj.o1772), and ignoring the real funding, staffing, and infrastructure challenges facing the NHS.

Current workforce gaps are equivalent to 110 000 full staff in NHS trusts in England and 100 000 in adult social care (doi:10.1136/bmj.o1726). More than half of advertised consultant physician posts in England and Wales went unfilled last year (doi:10.1136/bmj.o1782). The campaign group EveryDoctor has called for urgent talks with medical unions and the General Medical Council to tackle “unacceptable” working conditions (doi:10.1136/bmj.o1773).

As the NHS struggles with workforce pressures and the need to tackle elective care waiting lists, hospital admissions caused by covid are once again rising and disrupting services. Alastair McLellan and Kamran Abbasi argue (doi:10.1136/bmj.o1779) that the government has been “gaslighting” the public about the threat still posed by covid. Ministers must now, they say, be honest about the need to return to some of the measures taken in the past two years to help control the pandemic. And the Independent Scientific and Advisory Group for Emergencies has outlined a seven point plan for how the UK can suppress SARS-CoV-2 infections and reduce disruption (doi:10.1136/bmj.o1803). David Oliver also calls for honest recognition of the pandemic’s impact on the NHS, writing movingly about how covid has affected him (doi:10.1136/bmj.o1761).

Yet more honesty is needed about the consequences for public health of the climate emergency. Despite rising global temperatures, and repeated warnings about health risks, many countries did not act to tackle the health risks of extreme heat until high temperatures led to sudden and alarming deaths (doi:10.1136/bmj.o1741). England’s heat plan was drawn up only after a heatwave in 2003 that led to thousands of excess deaths (doi:10.1136/bmj.o1772). Knowledge about heat stress and the risks of extreme heat is still not yet being shared adequately worldwide. The UK’s Met Office estimates that the extreme heat experienced in the past week was made 10 times more likely by climate change. The UK government’s advisers have warned that current policies will not be enough to deliver its net zero targets.

It may suit political agendas to ignore the climate crisis and the crisis in health services or to pretend that current policies are sufficient. The facts and our experiences tell a very different story. By wilfully ignoring the major challenges facing us, we will only deepen the harm and the damage from crises that confront us with inconvenient truths.

6 Wise J. Record number of consultant physician jobs are unfilled, census shows. BMJ 2022;378: doi: 10.1136/bmj.o1782 pttid: 35850972.
10 Oliver D. David Oliver: My personal pandemic experience is just one of many. BMJ 2022;378.