

The Syndemic of Climate Change, Migration, and Mental Health: A Global Health Perspective

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ABSTRACT

This paper explores climate change as a catalyst for mass migration, emphasising the resulting mental health consequences for displaced populations. The tendency of social ties upon migration is substantial, as these provide both resources and stress, while the severance of such ties tends to worsen mental illness. Insufficient access to mental health services for migrants has been attributed to a lack of resources, legal barriers, and negative attitudes of the community. Furthermore, migration related to climate change may provoke competition over scarce resources which will worsen the mental health situation. Although some psychosocial support arrangements have been shown to work, people are still unable to obtain such treatment, especially in resource-poor countries. Such findings demonstrate why it is essential that any response to climate migration policy incorporate mental health as a component of most, if not all, climate policy measures. In this regard, it calls for the promotion of comprehensive and flexible mental healthcare systems, increased a funding for programmes targeting refugees, and redesigning a priority setting oriented in addressing the chronic mental health problems among refugee populations.

Key Words: Syndemic, Climate change, Migration, Mental health, Global health.

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INTRODUCTION

The term syndemic describes the convergence of two or more health conditions that interact synergistically, exacerbated by social, economic, environmental, and political factors.¹ This approach indicates that it is necessary to make poly-focal impact, paying attention to the structural and social factors fueling such health inequalities. Migration decisions are closely intertwined with social networks because the risk and benefits of migration are spread within current networks.^{2,3} These networks can be sources of stress from social and financial obligations as well, but at the same time act as a safety net through resource and emotional sharing, which is essential for population health. Breaking these ties can aggravate psychiatric illnesses with notable increases in depression, anxiety, and stress disorders. The use of syndemic framework assists in grasping the intricate facets in the relationship between migration, mental health, and climate change.

This paper first explores the climate change as a trigger for mass migration and outlines the outcoming mental health consequences.

Subsequently, barriers that migrants face in the effort to seek out interventions for mental health conditions and aspects of geopolitical conflicts that can make mental health conditions worse will be explored. Finally, the authors will review current practices and suggest specific steps for decision-makers.

People are compelled to relocate owing to climate change, environmental degradation, and disasters, severing their social, economic, and cultural links in the process. Mass migrations brought on by climate-related calamities have reached alarming levels. There has been an unsettling rise in the number of mass migrations caused by climate-related disasters; as of June 2022, the number of internally displaced people reached a record high of over 100 million people, many of whom are at a high risk for mental health disorders.^{4,5} Without urgent climate action, there will be mass migration expected with an estimate of approximately 1.2 billion people by 2050 as a direct result of climate change within the South Asia, sub-Saharan Africa, and the Latin America.^{5,6}

The mental health impact of migration is particularly concerning, with studies indicating that approximately 30% of refugees have a diagnosis of mental health issue related to psychiatric disorders, notably depression and post-traumatic stress disorders.^{7,8} Recent climatic disasters, such as the floods in Pakistan have underscored the need for a timely global health response. Such incidents not only put a strain on healthcare delivery but also create a demand for bridging policies and legislation on migration, mental health, and climate change.

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Understanding the syndemic framework allows us to recognise the complex nature of this issue.⁵ Climate-induced migration has significant and complex mental health impacts, including trauma, anxiety, depression, and PTSD. Those affected by the destruction of their homes, communities, and livelihoods often face additional stress from living in temporary shelters, uncertainty about the future, and challenges in integrating into new communities. The loss of social networks during migration further exacerbates mental health issues. Migrant youth and unaccompanied refugee minors (URM) are especially vulnerable to experiencing anxiety, depression, PTSD, and suicide because of trauma, acculturative stress, and intersectionality.⁹⁻¹¹

Furthermore, climate-induced migrations may escalate geopolitical tensions which, in turn, affect mental health. Conflicts over water, food, and land may heighten and could lead to instability and war. A recent study suggested that climate shocks increase the risk of the onset of conflicts, not only through rising extreme heat or rain deficit events but even through movement of people.¹² Displaced populations often face restrictive border policies and marginalisation, which compound their mental health challenges. Food insecurity in the Sahel region is rising because of a severe crisis caused on by armed conflict, poor development investment, and climate change, jeopardising the progress towards sustainable development goals.^{13,14} Of the 3.7 million internally displaced people, over 500,000 are currently registered as internally displaced persons who have found shelter in the countries bordering the nation at the tri-chronic of displacement.¹⁴ This instability poses risks of further destabilisation in regions such as the Mauritania, Chad, Benin Co Kate d Ivoire, Ghana, and Togo.¹³

Despite growing recognition of these mental health consequences, significant barriers remain to providing adequate care for the displaced populations. These repercussions include a higher prevalence of anxiety, depression, and PTSD among migrants; yet, due to inadequate infrastructure and resources, access to care remains severely limited in both middle and low-income countries.^{7,8,10} The access of immigrants can be restricted in the case of developed countries because of legal status on residency, measures such as lack of health insurance, and cultural issues such as language barriers and unfamiliarity with the healthcare system of the region.

Moreover, the stigma and discrimination related to mental health can deter displaced people from seeking help, with only 35% of refugees with mental health problems reported to get treatment.¹⁵ The overwhelming difficulties these communities undergo have made it hard for the global health system to accommodate their mental health needs as the services are lacking.

The global health system has come short on the specific and very critical mental health needs of the displaced population leaving millions to cope unsuccessfully with the draining stress of migrations. It is worth noting that displaced individuals, mainly due to exodus caused by climate change, face severe

mental health problems, such as anxiety, depression, PTSD, and acculturative stress. And yet, so far, the efforts made to meet the mental health needs of climate migrants have not been very successful, mostly because of their disconnection. Psychosocial support programmes, mental health services provided at the community level, and trauma-focused treatment methods have shown effectiveness in some cases, although these programmes are mostly poorly funded, poorly implemented, and generally small-scale.¹⁶ Although most of the programmes seeking to enhance access to mental health services for refugees have enhanced the care access, the care-seeking behaviour often surpasses the capacity for service provision.¹⁶ In addition, most of the measures taken are public health approaches without factoring in the determinants of mental health among climate change migrants that will guarantee long-term effectiveness.

Such policies aimed at safeguarding human rights have often remained superficial, such as many other programmes designed to assist such transitions. Climate change migration exacerbates several geo-political challenges including conflict over resources and rigid migration policies that compound the situation of migrants. These programmes cannot effectively address the underlying causes of the population movements, namely environmental degradation, civil unrest, and the disruption of established social structures in the long-term. Moreover, stigma and discrimination attached to mental health, absence of legal status as well as financial and cultural barriers to care have also impeded migrants from receiving care even within countries that have more resources, particularly developed nations.¹⁶

For example, the Sahel region in Africa, experiences climate change and severe climatic conditions, which gives rise to hunger and uproots many people.¹³ Armed violence as well as lack of resources and little attention to improving the development indices adds to the complexity of the challenges in a cross-border humanitarian emergency.¹⁴ Displaced populations in the Sahel region are at high risk of mental health problems owing to the violence and their loss of shelter, jobs, and social relationships. Yet, the global response has been inadequate, with programmes either underfunded or narrowly focused on short-term relief rather than long-term mental health support, highlighting the need for a consensus-based research agenda that prioritises system-oriented implementation research and equitable funding in low- and middle-income countries.¹⁷

Considering the scale of the problem, it is important to accept that the problem of mental health of displaced people cannot be solved with easily accessible means only. A comprehensive approach to health and well-being, including correct and timely mental health and local and social support activities should be enforced. That includes the establishment of efficient, effective recipients of mental healthcare delivery system that are adaptable and *in-situ* with other health programmes, legal and fiscal issues on when and where to receive help and designing on-message solutions for diverse and displacement prone

people.¹⁸ Additionally, there is a need for a consensus-based research agenda for mental health and psychosocial support (MHPSS) interventions that prioritises systems-oriented implementation research and equitable funding in low- and middle-income countries.¹⁷

Moreover, all the factors cannot be separated out without returning to the broader framework – the syndemic conditions – that allows the study of the problems of climate change, displacement, and mental health at the same time. If no urgent action is taken, the trend of rising occurrences of climate disasters and forced migrations resulting from such disasters shall persist and with it the consequence of mental health issues which present systems are ill-equipped to address. There is a need for policies that acknowledge these challenges are multi-causal in nature with an emphasis on solutions that will be more socially and psychologically sustainable over time.¹⁹ Some concrete recommendations for policy makers aimed at addressing the synergistic nexus of climate change, migration, and mental health include:

Increasing funding for mental health programmes designed specifically for the needs of the displaced populations.

Providing training for healthcare providers, so that they can identify and treat the mental health problems of migrants more effectively.

Developing policies that take into account the social and cultural background of the displaced individuals and support the inclusion of the communities.

Encouraging the global effort towards reversing the processes of climate change and climate-induced migration.

It is critical to address the nexus of migration, mental health, and climate change. Failure to act timely has moral and ethical ramifications for society as well as the individuals who are immediately impacted. Therefore, a unified, evidence-based global health response that prioritises mental health services within broader climate migration and adaptation efforts is essential to mitigate the long-term consequences of climate-induced displacement. We can only hope to mitigate the forthcoming mental health crisis caused by the current and future climate migration through coordinated, scalable, and sustainable solutions.

COMPETING INTEREST:

The authors declared no conflict of interest.

AUTHORS' CONTRIBUTION:

WQ: Conception of the study, in-depth literature review, drafting of the article, editing, and journal correspondence management.

MQ: Contributed to the literature review, manuscript review, conducting revisions, and participating in the editing process. Both authors approved the final version of the manuscript to be published.

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