

Dr Elanor Lewis-Holmes, Clinical Psychologist, West London NHS Trust

Note that this is a personal narrative. The content, links and views expressed do not necessarily reflect APC-UK's position.

I am a clinical psychologist and I work part time in an NHS Trust's older adults service. My professional work has focused upon helping others, initially through academic research into the stigma affecting people with mental illness at the Institute of Psychiatry and into care for dementia patients at University College London, and then as a clinical psychologist offering assessment and psychotherapy to prisoners at HMP Bronzefield with experiences of trauma. I have a Doctorate in Clinical Psychology and a BSc in Psychology from UCL, and a number of academic publications and the occasional prize. I also am a mother of two school-aged children.

Since my teens in the 1990s, I have been aware of the risks posed to humans by climate change and biodiversity loss. I have always believed that it is a moral imperative to try and peacefully push for societal change to decrease these risks. I have supported environmental charities such as Friends of the Earth and Greenpeace, and been active in 'green' campaigning all my life. In 2010 I joined the Green Party in the hope of bringing about change through the political system, and am standing again in my local council elections for them this year, after having done so in 2018.

Until I read the IPCC's 2018 report on climate change, I had, however, somehow managed to convince myself that it would all be OK, that governments would sort things out, that we would not allow ourselves to make the Earth uninhabitable for us and for all the other living beings that also had a right to be there. I had been avoiding watching nature documentaries, because the ending was always the same, and made me feel so despairing and afraid. I had noticed the seasons being funny, the summers getting hotter and records being broken year after year, and tried to think it was going to be all right. I had had a sense of being in a prodrome before a crisis, but tried to tell myself that I was doom mongering, that my own worries about my own life, my own marriage even, were being projected outwards onto the Earth. Allowing myself to read the report, and allowing myself to acknowledge that no, things were not at all all right, was a strange relief.

I read the report in October 2018, on the afternoon of the day I had failed to get Glastonbury tickets, yet again, and reading it did nothing to improve my mood. The climate modelling in the report gave a stark message: 12 years remain before the point at which human actions are unlikely to be able to reverse or even stop global heating, when we reach 1.5 degrees of extra global heating. The urgency of this message had a profound impact upon me – I had been planning for 2030 as this was the year that my youngest child would turn 18 and I was hoping to spend some time travelling and having

back some of my headspace! The idea that such a short period of time remains for effective action to take place was, and is, terrifying. Since then, more recent IPCC reports have been even more hair-raising and many experts (such as Sir David King, former UK Chief Scientist) are clear that the window of opportunity for meaningful change is closing more quickly, and that the next two to three years are critical for governments and corporations to act in, before it really is too late.

It is clear in my workplace that the effects of global heating are already affecting my patients. Every summer since I started working in the service (2018) we have had at least one and usually more than two trustwide 'Level 3 Heatwave Alerts'. These alerts mean that temperatures have reached levels where older adults, especially those with dementia, or residing in care homes are at risk of death, mainly from heart attacks caused by the extra blood circulated to the skin to keep them cool. Further deaths are caused by respiratory problems being exacerbated by the heat and further worsened by air pollution. Between 2016 and 2019 there have been 3400 excess deaths in the UK caused by heatwaves such as these. We are only at 1.2 degree of extra global heating today.

After reading the IPCC report, I realised I needed to do something, and, encouraged by Facebook posts written by a friend's friend's partner (e.g. <https://tinyurl.com/2p8rs4jm>), I joined Extinction Rebellion (XR) in early 2019. I wasn't sure about it at first; it seemed, from the outside, to be somewhat militant. I was also worried that the scientific reports and opinions they quoted regarding the climate and ecological emergency might not stand up to scrutiny, and I would look foolish. Reader - they did, and I didn't. I wish in a way that they were wrong, that I could go back to ignoring the vast danger that we are putting ourselves and other living creatures in. The profound ethical commitment of XR's 10 principles and values, with its dedication to non-violence, avoiding blaming and shaming, and regenerative culture, reflected many of my professional and personal values and inspired me. I have met many inspiring people both from my profession and from a wide range of backgrounds, who are deeply committed to bringing about change, quite possibly as I am, through being scared and horrified at the consequences of doing nothing.

In XR I took on a role supporting the wellbeing of people who attended demonstrations (known in XR as 'actions'), using my skills as a clinical psychologist to ensure that members of the public and activists alike were well supported in stressful situations. I have carried out this role in a national coordination capacity over the last three years. I also coordinate a local group which regularly carries out community-focused work such as litterpicks and rewilding activities. I have also taken part in non-violent direct action, such as occupying a road with other activists to the point of arrest. This has resulted in reporting myself to the HCPC, and after describing my reasons for my action and what I actually did, the HCPC decided that I did not need to

be investigated. I hope that in the future more clinical psychologists (as well as others!) feel empowered to take similar steps.