

1 **Global Nurse Agenda for Climate Justice**  
2 **Alliance of Nurses for Healthy Environments (ANHE)**  
3 **Climate Justice in Nursing Steering Committee 10-20-21**  
4

5 **Introduction and Background**  
6

7 This document has been created by an international group of nurses representing seven nursing  
8 organizations and two continents\*. Developed over a six month period leading up to the twenty sixth  
9 meeting of the United Nations Conference of the Parties (COP26) to the climate change accords and the  
10 UN Framework Convention on Climate Change. It is inspired by the leadership of the Alliance of Nurses  
11 for Healthy Environments who are applying for observer status to the convention and have a long-  
12 standing interest in the human and planetary impacts of climate change. Our intention is to draft a  
13 document to catalyze discussion and action for all nurses on climate justice.  
14

15 We realize the urgent need for nurses to play a more significant role in climate justice. The idea of an  
16 “Agenda” is conceived to give space for the inclusion of the voices of others in the development of  
17 particular actions. We approach our role with humility in positioning this document as a way to stimulate  
18 discussion and debate amongst nurses across the globe who are working in international, governmental,  
19 regional, and local contexts.  
20

21 The text for the agenda is modeled after the Principles of Climate Justice inspired by the Bali Earth  
22 Summit (2002), the Principles of Environmental Justice (1991), and the Mary Robinson Foundation-  
23 Climate Justice organization. Committee members identify several theoretical frameworks for  
24 conceptualizing climate justice from a nursing frame: Ways of Knowing in Nursing (Carper, 1978; Swift  
25 & Twycross, 2020), the United Nations Sustainable Development Goals, Human Rights, the Rights of  
26 Indigenous Peoples, Planetary Health, and the Just Transition Framework. These frameworks help the  
27 committee move conceptions of climate justice from empirical to emancipatory, reframing the  
28 interconnection of nursing with caring for Nature, and shifting from extractive to regenerative orientations  
29 for research, education, advocacy, and practice.  
30

31 The committee is developing and curating a podcast series devoted to conversations with nurses across  
32 the globe with the intention of hearing new voices and ideas for climate justice in nursing. Two podcasts  
33 were conducted in Spanish in partnership with ANHE LatinoAmerica. The committee also considered  
34 input from a set of previously published ANHE podcasts with leading nurse scholars in climate justice  
35 and a bibliography on climate justice in the nursing literature.  
36

37 The value-filter of the Just Transition framework (2016) provides the inspiration principles within five  
38 domains of the agenda: Shift economic control to communities (economics); Advance ecological  
39 restoration (ecology); Drive racial justice and social equity (ideologies); Democratize wealth and the  
40 workplace and relocalize most production and consumption (politics); and retain and restore cultures and  
41 traditions (social systems) while amplifying an intergenerational commitment to the future. What follows  
42 is a preamble stating our position and defining terms, followed by the five domains with suggested  
43 principles for action, and a brief conclusion for the way forward.

\*Alliance of Nurses for Healthy Environments (ANHE) USA, ANHE Latinoamérica, Canadian Association of Nurses for the Environment, Association of Asian American Pacific Islander Nurses Association, Coalition of Public Health Nursing Organizations, & Philippine Nurses Association of America

## Global Nursing Agenda for Climate Justice: Preamble

44  
45  
46  
47 Whereas nurses practice healing at the frontiers and frontlines of  
48 human experience; engaging systems, populations, communities,  
49 people and the environments they live in for advancing health  
50 ecology  
51  
52 Whereas more than 28 million nurses are working on the planet,  
53 accounting for 53% of the health workforce\*\*  
54  
55 Whereas the climate footprint attributed to healthcare is  
56 equivalent to 4.4% of global net emissions, equivalent to the  
57 annual greenhouse gas emissions from 514 coal-fired power  
58 plants\*\*\*  
59  
60 Whereas nurses are present in nearly every clinical encounter  
61 with people and support the health of communities across  
62 contexts of caring such as schools, businesses, and industries  
63  
64 Whereas human health is integral with the health of the planet  
65  
66 Whereas all people have a right to health; to safe food and  
67 agricultural practices; to prevention and protection including  
68 products that are free from harmful chemicals; to healthy  
69 communities including conditions for living, schooling, working,  
70 worshipping, and playing in; to stable shelter; to education; to  
71 determine the needs of one's community and its future; and to a  
72 stable climate with healthy ecosystems and thriving biodiversity  
73  
74 Whereas health is determined by the socio-environmental  
75 determinants of health  
76  
77 Whereas human ideologies of racism, patriarchy, speciesism,  
78 capitalism, and colonialism have driven and maintained unequal  
79 distributions of power and downstream health inequities  
80  
81 Whereas human-centered extractive economies, particularly those  
82 in wealthier nations, have released excessive greenhouse gas  
83 pollution precipitating climate change  
84  
85 Whereas a just transition is necessary to build economic and  
86 political power to shift from an extractive economy to a  
87 regenerative economy. The transition itself must be just with an  
88 equitable distribution of resources for life; redressing past harms  
89 and creating new relationships of power for regeneration; and  
90 with engagement in holistic and circular (waste free) approaches  
91 to production and consumption  
92  
93 Whereas Nature in all its life forms has the right to exist, persist,  
94 maintain, and regenerate its vital cycles  
95  
96 Whereas multispecies justice expands the idea and practice of  
97 justice to encompass and respond to the destruction of  
98 multispecies lifeways, and rejects the idea of human  
99 exceptionalism  
100  
101 Whereas planetary health is a transdisciplinary field focused on  
102 understanding and addressing the impacts of human disruptions  
103 of Earth's natural systems on human health and all life  
159  
160 We, representatives of nursing organizations working for a Global Nursing Agenda for Climate Justice resolve to catalyze  
161 actions for climate justice from all nurses based on the following principles:

104 Whereas climate change has altered the balance in ecological  
105 systems of which humans are an integral part  
106  
107 Whereas frontline\*\*\*\* and fenceline\*\*\*\*\* communities are more  
108 impacted by climate change but are allocated fewer resources for  
109 mitigating or adapting to these impacts than other communities  
110  
111 Whereas communities that are marginalized and excluded in  
112 relation to their race, class (including economic status), gender,  
113 sexual identity, geographic location, occupation, religion, migrant  
114 status, age, and ability - experience an inequitable burden of  
115 climate health effects  
116  
117 Whereas these same communities and their ecologies hold  
118 significant wisdoms for responding to and enduring adverse  
119 climate, biological and geological change  
120  
121 Whereas climate migration is a humanitarian issue and not a  
122 national security issue  
123  
124 Whereas the roots of these systemic injustices are located in  
125 economic, political, sociological, and ideological structures  
126 created, maintained, and advanced by humans  
127  
128 Whereas the actions of the powerful to marginalize and exclude  
129 are masked by ideologies of personal responsibility for wellness  
130 and resiliency  
131  
132 Whereas nurses are ideally situated to collectively identify,  
133 mitigate, and transform these systemic injustices in partnership  
134 with frontline and fenceline communities at local, regional, and  
135 international levels  
136  
137 Whereas nurses are skilled in interdisciplinary collaboration for  
138 assessment, diagnosis, planning, implementation, and evaluation  
139 in order to restore planetary health for achieving climate justice  
140  
141 Whereas nurses have the relational opportunity to meaningfully  
142 engage with humans and environmental systems unjustly  
143 impacted by climate change  
144  
145 Whereas meaningful engagement involves recognition, inclusion,  
146 and the capabilities required for engagement, including health,  
147 control of one's environment, imagination, play, and affiliation  
148 with others  
149  
150 Whereas climate justice for nursing can be defined as "addressing  
151 the social, racial, economic, environmental, and multispecies  
152 justice issues of the climate crisis through centering the  
153 experiences and knowledges of frontline and fenceline  
154 communities and safeguarding the rights of Nature to achieve  
155 planetary health"  
156  
157 Whereas the Bali Principles of Climate Justice (2002) resolved to  
158 build an international movement of all peoples for climate justice

\*World Health Organization, 2020. State of the World's Nursing. <https://www.nursingcenter.com/ncblog/april-2020/who-state-of-the-worlds-nursing-2020>

—Health Care Without Harm, 2020. Health Care's Climate Footprint. [https://noharm-global.org/sites/default/files/documents-files/5961/HealthCaresClimateFootprint\\_092319.pdf](https://noharm-global.org/sites/default/files/documents-files/5961/HealthCaresClimateFootprint_092319.pdf)

—Frontline communities are those that are often the first to experience the impacts of climate change and who have important insights and skills in coping and policy solutions (Garibay & Arevalo, 2017)

—Fenceline communities are groups living close enough to an industrial or toxic environment to experience harm from the associated pollution (Radavoi, 2015)

## The Global Nursing Agenda for Climate Justice

### Economics and health

1. Engage nurses across all sectors to lead climate change and environmental initiatives<sup>1</sup>
2. Design and maintain circular economies in the greening of healthcare systems and other systems for providing basic needs <sup>1 2 3 4 5 35</sup>
3. Expose corporate greed <sup>1</sup>
4. Direct the allocation of resources for climate resilience to frontline and fenceline communities <sup>36</sup>
5. Establish partnerships with communities for adaptation in sustainable food, water, and agricultural practices <sup>37</sup>
6. Safe working conditions for farmworkers, fisherfolk, and other vulnerable workers <sup>38 6</sup>
7. Support a decarbonized, inclusive, equitable, and just transition of economies that encompasses a planetary health framework <sup>7 8</sup>

### Ecology and health

8. Develop deep practices in engaging the self and others with the environment to advance ecological respect, healing, environmental and planetary health, environmental stewardship, and justice <sup>1 9 10 20 34 39</sup>
9. Monitor and translate ecological assessment data on human-related risks and impacts to communities and systems <sup>10</sup>
10. Adopt the conception of Indigenous communities for the rights of Nature to maintain its ability to recover and defend itself from the actions of human beings (see for example the Godawinda Tayrona Organization)
11. Apply the precautionary principle in decision making related to introducing new technologies and employing old and untested technologies <sup>40</sup>

### Ideologies and health

12. Affirm the sacredness of Nature, ecological unity, and the interdependence of all species <sup>11 12</sup>
13. Confront worldviews that center racism, classism, sexism, ageism, ethnocentrism and anthropocentrism
14. Advance environmental health, planetary health and human rights in nursing, public health, and healthcare education systems <sup>13 14 41</sup>
15. Apply ways of knowing health beyond the boundaries of empirical knowledge to consider non-hierarchical, post-humanist, and relational orientations towards understanding rupture and repair <sup>15</sup>
16. Adopt holistic orientations to the intertwining of health, environment, and humans toward Indigenous ways of knowing and care for life <sup>16 17 39 42</sup>

### Politics and health

17. Adopt the 17 United Nations Sustainable Development Goals in working at the local, national and international levels <sup>1 4 18</sup>
18. Lead adaptation and mitigation efforts in partnership with policymakers and communities on the frontlines of environmental degradation <sup>19 21</sup>
19. Identify government roles in the environment and expose corruption <sup>1 2</sup>
20. Organize for infrastructure system change (food, water, air, earth) through participatory action approaches <sup>4 22 23</sup>
21. Transform international and national migration, immigration, asylum, and resettlement policies from concerns for border security to concerns for mitigating the human and ecological impacts of climate migration and advancing migrant health and adaptation <sup>24 25 26 27</sup>
22. Identify and mitigate the environmental risk factors to which the migrant population is exposed as a result of their displacement and insertion in new contexts
23. Assure the interdependence of biodiversity and human health is represented in policies <sup>21</sup>
24. Take collective action integrating western science with Indigenous knowledge holders to decolonize systems and address the effects of colonization <sup>16 21</sup>

### Social systems and health

25. Design healthy social systems, e.g. promote active transportation, green energy, healthy/sustainable food ways <sup>1</sup>
26. Improve responsiveness of healthcare/population systems to climate events, including health system coding for climate-change related health-status change <sup>4 28 29</sup>
27. Develop and promote emancipatory social and relational systems and practices for intergenerational, intercultural, interdisciplinary, and international collaboration and partnerships <sup>30 31 32 39</sup>
28. Learn from Indigenous frames for social systems: living well together, being kindhearted and caring, communicating honestly <sup>22 16 43</sup>
29. Advocate for Universal Health Coverage and renew commitments to primary health care
30. Transform access to Nature for marginalized populations <sup>44</sup>
31. Involve and participate with communities in climate justice actions through assessment, planning, activism, mitigation, adaption, & restoration <sup>33 45 46</sup>

**163 Conclusion and Call for a Way Forward**

164 The committee recognizes that this agenda as proposed is incomplete and written by nurses with a  
165 Western-orientation. We call for a change in attitude and language in global nursing in respect and  
166 engagement of diverse populations through the fostering the formation of action teams, particularly with  
167 Indigenous peoples of the world, in all levels and phases of this work to regenerate a more global nursing  
168 agenda for climate justice.