

Planetary Health and the Naturopathic Profession: Back to the Future

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The term “planetary health” emerged from the holistic and alternative medicine movement of the 1970s and 1980s. It was used to signify that the relationships between personal health, the health of communities, and the planet itself are one and the same. Of course, this health continuum was already part of the ancestral wisdom of Indigenous cultures—“to harm the Earth is to harm the self.”¹ In 1980, a Canadian Chapter of Friends of the Earth expanded the World Health Organization’s well-known definition of health to include ecological and planetary health perspectives: “Health is a state of complete physical, mental, social and ecological well-being and not merely the absence of disease—personal health involves planetary health.”² In 1997, Canadian physician and public health expert, Trevor Hancock declared that among the many individual and collective factors that influence health, planetary health may be the ultimate determinant.³ Given the historic and growing interest in planetary health and its relationship to personal health, it is time for the naturopathic doctors’ profession to underline the connection between people, place, and planet in its priorities.

It is difficult to disagree with Dr. Hancock. Today, fueled by the landmark Lancet Planetary Health Commission Report of 2015, medical interest in the relationships between the health of persons, places and planet—individuals, communities and the Earth’s natural systems—has increased considerably.⁴ In April 2018, a diverse group of international experts, including Dr. Hancock, convened in Canmore, Alberta, to discuss the interdependence of personal, public, and planetary health. Participants with varied and diverse professional and disciplinary backgrounds presented research and perspectives on some of the most pressing issues of our time. These included, but were not limited to, infectious and non-communicable diseases, biodiversity losses, climate change, environmental degradation, socioeconomic inequality and poverty, health disparities, the dominance and marketing of ultra-processed foods, and mental health and its biopsychosocial underpinnings. The meeting produced the Canmore Declaration, which underscores that human vitality (i.e., what every naturopathic doctor seeks for their patients and the surrounding community) depends intimately on planetary vitality, which in turn depends on the behaviours of humankind, human kindness,

empathy, mutualism, responsibility, and reciprocity at the individual, community, societal, and global levels.^{5,6} I was thrilled to be in attendance at Canmore along with Canadian College of Naturopathic Medicine (CCNM) graduate Dr. Nicole Redvers, whom I had previously met at CCNM in 2014. Dr. Redvers has since gone on to become one of the leading voices in the planetary health movement, has published dozens of studies with international colleagues from different medical professions, and has even co-authored an updated version of the Hippocratic Oath in the *Lancet*—the Planetary Health pledge.⁷

Representatives of physician organizations, medical schools, and allied health professions have made urgent calls for the incorporation of planetary health principles into medical training. Sadly, there is a common perception that planetary health is merely another term for a focus on toxic environments or the study of climate change. Individual clinicians often find it difficult to see how planetary health is relevant to their day-to-day clinical efforts. Yet, the entire concept of planetary health proposes that the total lived experience, with its positive assets and detrimental exposures, shapes the health of the person in the waiting room. Dr. Redvers wrote recently that “[g]one are the times when focusing solely on human-centric approaches to health will make us and our communities well.”⁸ I couldn’t agree more; the absence of a larger context in the clinical encounter is a significant deficiency in traditional clinical encounters, even in our own profession.

In order to move past the typical human-centric approach that Dr. Redvers speaks of, my colleagues and I refer to planetary health in the health-care encounter as clinical ecology. We argue that the easiest way to understand planetary health in the clinic is through the microbiome, an ecological perspective that illustrates the bidirectional links between the health of person, places, and planet. For further details, the reader is referred to our long-form article in the journal *Challenges*.⁹ Briefly, we contend that the clinician must learn to see the patient through the lens of the holobiont, that is, the multicellular eukaryote and the inseparable colonies of persistent symbionts, which together form a critically important unit of anatomy, physiology, immunology, growth, and evolution. It is no longer tenable to view ourselves as functionally separate from microorganisms “residing” on and within us. Through advances in

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microbiome science and associated “omics” technologies, we can now see that the patient in the waiting room—their state of flourishing, or “dis-ease”—is a product of the *οἶκος* (“*oikos*”), that is, the “house,” from which the term ecology is derived. We can now look to the “the houses of the houses.” Understanding how ecosystems in the halls of power (and the ways in which they are influenced by multi-national traffickers of ultra-processed foods, tobacco, alcohol, etc.) facilitate the global transmission of unhealthy goods allows us to see how the vitality of the person in the waiting room is connected to the vitality of the surrounding community and to the flourishing of the Earth’s natural systems.

Once upon a time, the holistic health movement, including the naturopathic profession in particular, was celebrated for its progressive outlook and deep understanding of the connections between personal health and the natural environment.¹⁰ Is this what we are known for today? I don’t think so. Why is it that naturopathic doctors make headlines for the use of dubious modalities and suspect interventions? Media bias? Perhaps. Nevertheless, as a profession, we have little control over that; even if our professional organizations had the funds to invest in the best advertisement agency, it is doubtful much would change in the short term.

Dream with me for a moment. I propose that the path towards a better future for our profession, as well as for the health of patients and the places in which we work and play, is one that doesn’t involve PR flaks. It is an investment of mind and resources that prioritizes planetary health ideologies. And I don’t mean just tinkering around the edges of the curriculum in our schools and Canadian medical education (CME) courses. No, I am referring to a paradigm shift, a core curriculum that works from the perspective that the health of the individual, the community, and the Earth’s natural systems are indistinguishable. I am referring to a curriculum that genuinely reflects the line [emphasis is mine] in our own Naturopathic Oath—“I will assist and encourage others to strengthen their health, reduce risks for disease and preserve *the health of our planet for ourselves, our families and future generations.*”¹¹

Can we really say that our core curriculum matches that line of our pledge? How do we know? Knowledge of the person, place, and planet health continuum is not tested. It isn’t tested on Board exams, but it could be. We have to decide where our priorities lie. Is our profession merely a Potemkin house that only pays lip service to our pledge? Or do we have the foundation—and the will—to

get this right? Frankly, the patients in our waiting rooms, even the profession itself, cannot wait. And yes, this is a call to action.

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