

When climate literacy enters the therapy room: A commentary on Williamson et al

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To the Editor—Williamson et al. report that, compared with social-anxiety content, a climate-anxiety vignette yields lower clinician confidence, reduced willingness to help, and higher negative affect; this also exceeds the death-anxiety condition (Williamson, King, & Raiman, 2025). A key limitation is that clinicians' climate literacy was not measured. Climate literacy is an operational understanding of climate mechanisms, human drivers, and credible mitigation and adaptation levers (USGCRP, 2024). Methodologically, it is a plausible moderator of confidence, willingness, and affect. Conceptually, if moderation holds, it helps explain the dispersion in participants' impressions of the client's presenting problem in climate-related cases. Practically, because literacy is trainable, the observed penalty is likely attenuable, not inevitable.

To avoid conflating constructs, climate literacy is more than belief or acceptance; it is actionable understanding of mechanisms, impacts, and levers directly relevant to clinical work (USGCRP, 2024; Cissé et al., 2022). In this context, literacy denotes a capability set: grasping mechanisms, salient cross-system impacts, and role-consistent levers. It is distinct from attitudinal or affinity constructs and is modifiable through training and supervision.

Findings in Williamson et al. point to a competence account. In the climate condition, free-text labels ranged from grief to phobia to non-bizarre delusion, with some noting the concern was realistic. This heterogeneity appears specific to climate content; comparable dispersion did not occur for social- or death-anxiety vignettes. IPCC guidance notes that services need trainable competencies for identification and response (Cissé et al., 2022). The study also included a three-item responsibility measure (personal, professional, relevance) but did not test its relation to participants' impressions of the client's presenting problem in climate cases. Responsibility is not literacy; duty may align with a constructive stance, but literacy supplies the operational map. Future work should model literacy alongside responsibility to test independence and moderation.

External evidence points to a tractable remedy. Structured climate-education courses increase knowledge, self- and response-efficacy, shifting learners from diffuse concern to concrete next steps at personal, organizational, and community levels (Field et al., 2024). UK practice-based data converge: rising climate-linked presentations, concerns judged largely understandable, and a clear need for targeted training (Croasdale et al., 2023). This aligns with IPCC AR6 WGII Chapter 7 on workforce preparation and capacity-building for climate-resilient care (Cissé et al., 2022).

Together, these points support a testable claim: climate literacy and professional agency may moderate links to clinicians' confidence, willingness, and affect. Higher literacy and agency should attenuate the penalty; lower levels predict avoidance, mislabeling, and distress. Accordingly, studies should measure literacy spanning mechanisms, impacts, and levers, and model it with responsibility and relevance to test independence and interaction. This will sharpen inference, clarify cross-context differences, and equip clinicians to strengthen alliance and care quality rather than retreat from a legitimate and growing concern.

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Competing interests

none.

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