### PREVENTING WAR AND PROMOTING PEACE

*Preventing War and Promoting Peace: A Guide for Health Professionals* is an interdisciplinary study of how pervasive militarism creates a propensity for war through the influence of academia, economic policy, the defense industry, and the news media. Comprising contributions by academics and practitioners from the fields of public health, medicine, nursing, law, sociology, psychology, political science, and peace and conflict studies, as well as representatives from organizations active in war prevention, the book emphasizes the underlying preventable causes of war, particularly militarism, and focuses on the methods health professionals can use to prevent war. *Preventing War and Promoting Peace* provides hard-hitting facts about the devastating health effects of war and a broad perspective on war and health, presenting a new paradigm for the proactive engagement of health professions in the prevention of war and the promotion of peace.

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# PREVENTING WAR AND PROMOTING PEACE

A Guide for Health Professionals

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Cambridge University Press 978-1-107-14668-6 — Preventing War and Promoting Peace Edited by William H. Wiist , Shelley K. White Frontmatter <u>More Information</u>



University Printing House, Cambridge CB2 8BS, United Kingdom

One Liberty Plaza, 20th Floor, New York, NY 10006, USA

477 Williamstown Road, Port Melbourne, VIC 3207, Australia

4843/24, 2nd Floor, Ansari Road, Daryaganj, Delhi – 110002, India

79 Anson Road, #06–04/06, Singapore 079906

Cambridge University Press is part of the University of Cambridge.

It furthers the University's mission by disseminating knowledge in the pursuit of education, learning, and research at the highest international levels of excellence.

www.cambridge.org Information on this title: www.cambridge.org/9781107146686 DOI: 10.1017/9781316551158

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First published 2017

Printed in the United States of America by Sheridan Book, Inc.

A catalogue record for this publication is available from the British Library.

Library of Congress Cataloging-in-Publication Data NAMES: Wiist, William H., editor. | White, Shelley K., editor. TITLE: Preventing war and promoting peace : a guide for health professionals / edited by William H. Wiist, Oregon State University, Shelley White, Worcester State University. DESCRIPTION: Cambridge, United Kingdom ; New York, NY : Cambridge University Press, 2018. | Includes bibliographical references and index. IDENTIFIERS: LCCN 2017039919 | ISBN 9781107146686 (hardback) SUBJECTS: LCSH: Medical personnel – Professional ethics. | War – Health aspects. | Violence – Prevention. CLASSIFICATION: LCC R725.5 .P74 2018 | DDC 610.7306/9–dc23

LC record available at https://lccn.loc.gov/2017039919

ISBN 978-I-107-14668-6 Hardback

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Cambridge University Press 978-1-107-14668-6 — Preventing War and Promoting Peace Edited by William H. Wiist , Shelley K. White Frontmatter <u>More Information</u>

> William H. Wiist dedicates this book to Cynthia M.G.W. Shelley K. White dedicates this book to future generations, including Jarred, Kyle, Tyler, Arielle, Cameron, Brianna, Mikayla, Joshua, Jack, Logan, Tyler, Joey, and Brookelyn.

Cambridge University Press 978-1-107-14668-6 — Preventing War and Promoting Peace Edited by William H. Wiist , Shelley K. White Frontmatter <u>More Information</u>

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### Foreword

War causes much morbidity and mortality, directly and also indirectly by damaging the health-supporting infrastructure of society. War violates human rights and exacerbates social injustice. War destroys communities and sociocultural institutions. War damages the environment. War forces people to migrate. War diverts huge amounts of human and financial resources. And war leads to more violence. War and its long-term consequences may be the most important public health problem worldwide.

Prevention of war and the promotion of peace need to become the major priority of our global society. Prevention can take many forms, as demonstrated throughout this book. It includes achieving ceasefires and resolving violent conflicts that have already begun. It includes preventing imminent violent conflict from occurring, achieving resolution of disputes by non-violent means, and controlling conventional weapons and eliminating nuclear weapons and other indiscriminate weapons. And, by focusing "upstream," it addresses underlying and precipitating factors that lead to war, ranging from socioeconomic inequalities to militarism.

New and continuing challenges make the prevention of war and the promotion of peace more difficult. These challenges include the emergence of non-state actors and insurgent groups, the complexity of intrastate conflicts, the roles of water scarcity and climate change in causing collective violence, the international arms trade, the use of unmanned armed drones, and the failure of our global society to adequately address the continuing threat of nuclear warfare.

Health professionals and others have a responsibility to help prevent war – by documenting the consequences of war on physical, mental, and sociocultural health; by informing the public and policymakers of these consequences; and by supporting policies and programs that promote peace. Health professionals and others can act individually or, more effectively, through international and national organizations, such as the

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### Foreword

International Physicians for the Prevention of Nuclear War and its national affiliates throughout the world.

This valuable book provides a comprehensive and systematic review of the causes and the consequences of war. It provides a basis for curriculum development in educational and training programs for health professionals and others. And it provides a roadmap of how health professionals and others can help bring about a world without war and a culture of peace.

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Preface

War and militarism, and the call to prevent their calamitous health effects, are not new, and the genesis of this volume builds upon the work of generations of inspired health activists. Our hope in creating this book is that it will serve as a platform for action for generations of health activists to come, who, true to the roots of their professions and the codes of ethics that guide their practice, will work wholeheartedly to protect and extend human life, health, and well-being. In recognition of the existing, disproportionate, attention and effort directed to the aftermath of war and its health consequences, this book takes a decidedly different approach by directing our actions "upstream" to the prevention of war and militarism.

The journey to publishing this book began with two important moments that spurred the creation of the Public Health Working Group on Primary Prevention of War (referred to here as the "Working Group"). The Working Group formed in 2011, and has provided the intellectual and activist impetus for this work. In 2009, the American Public Health Association (APHA) passed a policy statement entitled "The Role of Public Health Practitioners, Academics and Advocates in Relation to Armed Conflict and War." The policy frames war as one of the most significant threats to public health, and one which is "entirely preventable," thereby requiring the concerted action of health professionals to proactively respond through primary, secondary, and tertiary prevention (APHA 2009). The Peace Caucus, in official relations with APHA, promoted the policy widely. A second inspiration for the Working Group came from Dr. Bernard Lown, Nobel Peace Prize recipient and co-founder of Physicians for Social Responsibility (PSR) and International Physicians for the Prevention of Nuclear War (IPPNW). As he approached his ninetieth birthday, having spent a great deal of his lifetime working tirelessly and successfully - to prevent war, he sought a research partner to examine public health's commitment to this practice. I gladly joined him. Together with Jon Rodhe, we assessed how educational practices were preparing

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future public health professionals to tackle the ongoing threats of war and militarism – and were dismayed by our findings. In a content analysis of the 2011–2012 curricula of the twenty top-ranked Schools of Public Health, we found that only 2% of the total 6,266 courses covered war and related topics, and a total of only four courses could be understood as advancing primary prevention (White, Lown, and Rohde 2013).

In presenting these findings at APHA's 2011 annual meeting, an unusual thing happened. Presenting to a packed audience, we urgently called on public health to move from a reactive to a proactive stance on war, and the paper received a standing ovation. It seemed clear that our call to action, along with APHA's recent policy statement, had hit a chord (White, Lown, and Rohde 2011). On the heels of this presentation, we gathered a small group of practitioners and academics interested in the issue, and together we formed the Working Group. My co-editor and many contributors to this book are original members, and since its inception, the Working Group has grown into an international, interdisciplinary, collaborative group of practitioners and academics from over a dozen universities. The overarching goal of the Working Group is to reframe the orientation of public health and related health professions from one that is *reactive* to war, responding to the process and aftermath of war, to one that is *proactive*, working to prevent war and to reveal patterns of militarism leading to war. Our work has included academic publications, curricular innovation, and advocacy both within and beyond academic spaces. (White 2017)

In 2014, nine members of the Working Group collaboratively published what could be considered akin to the "White Paper" for our work to date in the American Journal of Public Health. The article presented a rationale for health professionals to prevent war, and advanced preparing a comprehensive set of learning competencies (reprinted in this volume in Appendix 1) (Wiist et al 2014). The same year, Wiist (2014) expanded upon the use of complex systems modeling in war's prevention, reprinted herein as Chapter 11. Building on our work establishing a learning competency framework, the Working Group twice reached out with a direct solicitation to the deans of over 100 Schools and Programs of Public Health to request broader curricular coverage of the important topic of war's prevention, and received some enthusiastic, and indeed, grateful responses. To support curricular innovation, the group established a web resource, included in Appendix 3, to assist professors of health in designing content addressing war and its prevention, either as part of existing courses, standalone classes, conferences, one-time lectures, or to support student interest groups.

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The Working Group has also engaged in advocacy through letter writing, for instance, addressing the Institute of Medicine (IOM) on its 2014 report titled "Preventing Psychological Disorders in Service Members and their Families." Commissioned by the Department of Defense, the report includes no discussion of the importance of minimizing combat exposure by preventing war itself through diplomatic and non-violent means (Denning, Meisnere, and Warner 2014). The Working Group submitted a letter, signed by sixteen members - physicians, social workers, public health professionals, professors, and nurses - highlighting the IOM's mission and conflict of interest policy and requesting that the IOM amend its report or issue a separate report considering the importance of prevention of war (Jon Rohde, letter submission to IOM via email, on behalf of the Working Group, April 6, 2014). The IOM's decline of our request illustrates the unquestioned pervasiveness of militarism within our scientific institutions, as evidenced by its statement, "From our institution's viewpoint, whether the reasons for going to war outweigh the deaths and injuries war causes is not a scientific question; it is a moral and political judgment. Because the decision to enter into a war is inherently a political and moral one, we would be unable to objectively provide any recommendations related to avoiding war as a preventive measure" (Laura Aiuppa Denning, Senior Program Officer, IOM; email message to Working Group member Dr. Jon Rohde, April 10, 2014). As our Working Group then pointed out in an attempted opinion editorial to the New York Times, "In both its report and response, the IOM failed to consider the vast scholarly literature on the effectiveness of peace-building, mediation, and peaceful conflict resolution in preventing war." Ultimately, as the Working Group wrote, the track record of reports emerging from the IOM and other National Academies "conveys the assumption that perfecting the techniques of going to war is worthy of scientific analysis - but avoiding war is not" (Kathy Barker, op-ed submission to New York Times, on behalf of the Working Group, August 24, 2014).

While the Working Group was not successful in placing this op-ed, it has continued its attempts to publish op-eds as an important vehicle for exposing militarism and advocating against a culture of violence. Every year since its founding, the Working Group has also held sessions at the APHA annual meeting, thanks to the unwavering support of the Peace Caucus. Over the years, we have invited activists, including veterans, war tax resisters, street medics, and war surgeons, to join and lead our sessions and to inform our approach. Members have also given lectures far and wide at other professional conferences on militarism, war, and

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prevention. The Working Group received coverage for its work and its impact from the Association of Schools and Programs of Public Health (2014) and the APHA's *The Nation's Health* (McGill 2014). In 2015, we deepened our international reach from our original membership representing the United States, Canada, and South Africa to the United Kingdom when a burgeoning ad-hoc working group reached out to us. In a similar spirit, this collective was advancing frameworks for war's prevention across public health institutions (Flecknoe and Nozad 2015). We began to collaborate and share resources, and recently this group successfully created a new "Global Violence Prevention" special interest group within the Faculty of Public Health, the professional organization for UK public health professionals.

On the foundation of this vibrant collaborative community, the Working Group embarked on visioning this book in early 2015, a vision to which many contributed. A primary goal of this book is to create a paradigm shift in how health professionals learn about, think about, and respond to the threat of war and armed conflict. As reflected in health professionals' education, most publications about war and health focus on what health professionals can do during or after war to assist victims, rebuild infrastructure, or ameliorate environmental damage; actions that fall within secondary or tertiary prevention. This book is distinctly focused on primary prevention, aiming to impart a rationale, rich context, and examples, as well as providing a toolkit for health professionals to work to prevent war before it occurs. Following the Introduction, which provides an historical analysis and rationale for the book's focus, Part I provides a brief but essential analysis of the health consequences of war, which can serve as an important foundation for preventing war. Understanding this content as the predominant focus of most publications, however, we dedicate the majority of the book to two important areas of content. First, Part II provides a detailed analysis of militarism and its various mechanisms and manifestations. As militarism is often covert and accepted as part of the dominant culture, we felt that this section was critically important to prepare health professionals for the prevention of war. Second, Parts III and IV are designed to impart practical tools health professionals can utilize to prevent war and militarism. In addition to offering many inspiring and instructive examples, contributors have detailed the types of analyses, strategies, and tactics health activists and peace scholars may employ.

Ultimately, this book and the broader work of the Working Group have been driven by an understanding that the work of public health and other health professionals must be driven by a common ethic and duty to protect and promote health first. The best way to do this vis-à-vis war is to

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prevent its occurrence. Certainly, this is not a simple task, nor does it fall within the mainstream work of most health professions. Understanding and tackling the ubiquitous influence of militarism is political in nature, which is not a point of comfort for most health professionals (Everhart 2015). And yet improving the health of populations, and the determinants shaping it, has always been a political endeavor by nature, whether named as such or not. This work honors the roots of public health as a social movement and a social justice pursuit (Beauchamp 1976) and honors the deep and committed role of health activists from across the disciplines who, over the years, have understood the importance of questioning, deeply, the structural determinants producing and reproducing human suffering. These dedicated health professionals have understood the wisdom of Dr. Martin Luther King Jr.'s (2013) insight:

Cowardice asks the question, is it safe? Expediency asks the question, is it politic? Vanity asks the question, is it popular? But, conscience asks the question, is it right? And there comes a time when we must take a position that is neither safe, nor politic, nor popular, but one must take it because it is right.

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## Acknowledgments

First and foremost, we are tremendously appreciative of the vast expertise and great effort each contributor brought to this project. We are pleased with the broad interdisciplinary perspectives they offer, from public health, medicine, psychology and psychiatry, nursing, biology, neuroscience, sociology, history, political science, English and the humanities, law, and journalism. As their chapters and biographies evidence, they are an impressive group that is not only committed to teaching and scholarship on war's prevention, they also bring wisdom and insight from their advocacy and action countering war and militarism. We are enormously grateful to our fellow members of the Public Health Working Group on Primary Prevention of War, many of whom contributed to the vision and early outlines of this book: Neil Arya, Kathy Barker, Becky Bartlein, Marion Birch, Martin Donohoe, Wesley Epplin, Daniel Flecknoe, Andy Flescher, Bob Gould, Gerry Gorman, Amy Hagopian, Andy Kanter, Kaveh Khoshnood, Barry Levy, Pauline Lubens, Jon Rohde, Vic Sidel, and Patrice Sutton. Our Working Group provides an inspiring collaborative community for our ongoing work. We are grateful to the Peace Caucus, in official relations with the American Public Health Association, for providing conference space and ongoing support for our work. We also offer our special thanks to Barry Levy and Vic Sidel for writing the Foreword, and for their unwavering commitment to promoting peace as a public health imperative.

We thank Mary E. Northridge, former Editor in Chief of the American Journal of Public Health, for her boldness in encouraging submission of manuscripts about unconventional topics such as the Working Group's article about the role of public health in the prevention of war. We thank the Journal's publisher for allowing us to reprint selections from that article. We thank Taylor and Francis, publisher of the journal Medicine, Conflict and Survival, and the journal's editors for permission to reprint the article about complex systems modeling.

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### Acknowledgments

We are deeply indebted to our editor, Dave Repetto, for enthusiastically supporting our vision for advancing a paradigm shift and an actionoriented book for all health professionals, and for applying his expertise and influence within Cambridge University Press to obtain acceptance of our prospectus. We are grateful for the guidance he provided throughout the process of writing, editing, and production. We also appreciate the diligent work of content managers David Moore and Jane Bowbrick, project manager Karthik Orukaimani, copy-editor Matthew Bastock, editorial assistant Claudia Bona-Cohen, marketing manager Paris West, and other staff and the Board of Cambridge University Press. We thank Sunday Morning Studio for composing our vision of the book's cover, and the copyright holders of figures and quotations for permission to include those.

Finally, we owe a great debt to the generations of activists, some historically celebrated and some unacknowledged, who risked bodily harm, professional sanctions, financial costs, personal and relational losses, and sensationalized misrepresentations as they organized to prevent war, reveal the complicities of militarism, and promote peace against deeply rooted resistance. We are inspired and humbled by their devotion, and we ultimately dedicate this book to those who work tirelessly to create a more peaceful, safe, healthy, and hopeful world for future generations.