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The only thing certain is change

The founding editor-in-chief of *Medicine and Global Survival* steps down with this issue. Jennifer Leaning, along with John Loretz, the executive editor, have guided this enterprise through some rough seas with both great wisdom and unflagging energy. *M&GS* began as *The PSR* (Physicians for Social Responsibility) *Quarterly*, and has had several lives since. Jennifer has left an impressive legacy. I believe that in its current life, as the intellectual and analytic voice of IPPNW, *M&GS* is a necessity for the effectiveness of our federation.

In the organization’s early days, our issues, and what an international medical organization could do about them, seemed relatively simple: because nuclear weapons can end life as we know it; there is no alternative but to be rid of them. But now the nuclear threat has found a lower place on the list of the world’s troubles, and the public is generally resigned to the continuing existence of these weapons. Most disturbing is the quiet, but unbounded, enthusiasm for them, by those who profit most from their continued deployment. These include the corporations who gain from their manufacture and maintenance; the weapons labs who, without them, would lose their raison d’être; the military who, without them, would see their budgets and force size shrink; the industry’s workers, with their well paying jobs; and governmental policy makers, in the US especially, who use them to impose their national will worldwide. It will take deep understanding and powerful analysis, along with courage and perseverance, to contend with the weight of such massive corporate and governmental power.

Even so, a singular focus on nuclear weapons is not enough. The US and the other nuclear weapon states maintain them for possible use in armed conflict. We must, therefore, try to reduce the possibility of such conflict. And that means removing the causes of war: most prominently, the shameful economic and social inequities between the north and south, as well as within our own countries, and the ecological degradation of the planet. Thus, while the possession and use of nuclear weapons is the most dramatic manifestation of a chain of underlying causes, it is not the only one: to focus on nuclear armaments in isolation is appealing, but probably futile.

This journal can contribute to our understanding of these complex issues and to their profound interrelationships. We need clear, accurate, and thorough information. We need civil, but unfettered, debate on the issues on which we have not reached clarity. We must not be afraid to have our pet assumptions challenged. *Medicine and Global Survival*
should be a platform where these challenges can be presented.

In this issue—the first as a formal journal of IPPNW—political economist Jeff Dumas, a stalwart analyst of the social costs of reliance on nuclear arms, examines human fallibility and the many kinds of mistakes that could lead to catastrophe when error prone people and error-prone systems mix. Japanese scholar Naoki Kamimura offers a fascinating look at the emerging role of civil society in Japan, where non-governmental organizations and local officials are finding ways to collaborate creatively on matters of national and international security.

The global damage to public health and social well being caused by the unregulated and callous trafficking of small arms and military-style light weapons is thoughtfully reviewed by Canadian researchers Wendy Cukier and Antoine Chapdelaine, who have become key advisers to IPPNW’s nascent campaign on small arms. The ICRC’s Robin Coupland offers a theoretical model for determining effects of armed violence, effects so severe that such weapons should be banned. The campaign to ban one such class of weapons—antipersonnel landmines—continues, and Roman Dolgov presents an update on the unabated epidemic of landmine use in Russia and the former Soviet Union, including the tragic conflict in Chechnya.

The controversy over the use of depleted uranium (DU) weapons during the conflict in the Balkans and earlier, in Iraq, has been fueled by conflicting assertions over the health effects of DU. This issue therefore includes an assessment of what is known about the medical consequences of exposure to both radioactivity and chemical toxicity of exploded DU weapons, written by a panel of IPPNW physicians. Critical commentaries by Frank von Hippel, Steve Fetter, and Gunnar Westberg make it clear that agreement about the appropriate relationships among science, politics, and activism can be just as difficult to reach as scientific certainty alone.

In future issues of M&GS we will continue a dialogue begun last year on the medical and public health response to bioterrorism; we will examine the obstacles to nuclear disarmament posed by the weapons labs and their advocates; we will look at the health and environmental impact of military exercises such as those conducted by the US Navy in the firing range in Vieques, near Puerto Rico; and we will consider the ways in which environmental degradation could exacerbate conflict in already vulnerable parts of the world.

It is our dream that you will look forward to each issue as a necessity in your activist lives.

David Rush, MD
Editor in Chief
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Pay Attention to the Details and Get Engaged

In its preoccupation with the public health consequences of war, a singular harmony pervades this issue of M&GS. Ranging across many factors that promote or prolong the effects of war, the articles in this issue begin from one common position—that war is densely part of our human landscape—and arrive at another common position—that the means of war must be regulated. The rationale for the first position is not spelled out and need not be, in that sparing an astonishing reversal of history, war will continue to darken the human condition as our last worst resort to resolving conflict. The arguments for the second position are carefully crafted and so must be, because if war is always to be with us, we had better fast figure out how to live with it and survive from it.

A focus on mitigating the effects of war brings us immediately to a critical analysis of those consequences that cast a long shadow through time on ecosystems or large populations. Nuclear weapons dominate our concerns because of the massive immediate and extensive longer-term impact they exert. Among conventional weapons, there is growing recognition that landmines (and now perhaps cluster bombs), posing threats to civilian settlements for decades after their intentional use, constitute a class that must be ruled out of the world’s arsenals. Conventional weapons using radioactive alloys may soon constitute another such class.

In addition to types of weapons, certain economic and policy trends are beginning to command critical attention. The rampant commercial exploitation of the trade in small arms adds fuel to local conflicts, injecting incentives for rapid escalation in geographic extent and scale of suffering. These conflicts, once launched, are proving exceedingly difficult to contain, in part because warring parties find easy access to weapons an irresistible goad. Calling these weapons “small arms” also masks the fact that many of the newer forms of automatic machine guns, artillery, and rocket and grenade launchers can cause extraordinary carnage when wielded against civilian populations.

The authors in this issue of M&GS all carry their analysis to the logical conclusion that international regulation, whether effected through treaty, high moral suasion, or political action, is needed to contain or suppress trends in weapons development, deployment, use, and trade. This resort to regulation, indeed, an insistence on regulation, mirrors the strategic mission of public health in peacetime settings and activities. Protecting the health of populations in peace and war requires mobilization of civic action and targeting of key elite groups and authorities.

Thus the message of this issue of M&GS: pay attention to the details as analyzed here, and then participate in collective engagement with these questions at the social and political level. The world is getting sufficiently small and fragile, when weighed against our purposeful and inadvertent hostile activities, that the burden of positive action follows closely on the heels of positive understanding.

Jennifer Leaning, MD
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Key choices for global survival

Prevention of nuclear war is a medical imperative for global survival. Nuclear war could result from direct confrontation, including high technology or information war, armed conflict, miscalculation, or accident. If a state calls the deterrence bluff, the very threat of nuclear war could lead to the reality, since deterrence is based on the credibility of the threat and militaries have been training to carry out that threat. A nuclear detonation is the logical extension of current policies and probable future policies, when applied to circumstances that analysts are telling us have become increasingly worrisome.

These circumstances include ongoing armed conflicts, including genocide; proliferation of weapons of mass destruction; pursuit of military and commercial dominance in space, including national missile defenses; high technology and information warfare; and whatever new systems and technologies might emerge from the darker side of the human imagination. To name these is to risk sounding alarmist, but they are the substance of today’s security doctrines and are driving the formation of security doctrines for the 21st century.

Several patterns must be broken to make nuclear war less and less likely. These include resorts to violence as an answer to conflict, arms races, greed, and nationalism. For prevention of nuclear war, prevention of war is necessary. Wherever a cycle of violence is broken or a conflict addressed without weapons, a step is made away from the possibility of nuclear war.

This requires changing some courses that many see as inherent human aggression or a drive for domination. An influential school of thought is built on the concept that violent confrontation is inevitable or must be deterred by threats of greater violence. This school shapes national security policies that, while they might respond to something prevalent in the human psyche, as many security experts and defense intellectuals claim, are nevertheless choices about how to act in the world.

To base security on doctrines of force, domination, threat, and massive militarization is a choice made not out of rational calculations about survival in an interdependent world but out of weakness and cowardice. It is to react to threats with fear and with familiar—therefore predictable—shows of aggression. It is to seek domination rather than diversion or deliberate, original action. It is simultaneously tragic and tedious. We have another choice: to confront conflicts directly while laying down weapons.

Disarmament is a choice for global survival and a gesture in the direction of healthy human evolution. Breaking cycles that appear to have permeated recorded history means acting in constructive new ways as a sentient and conscious species.
To the extent that the international community speaks through its governments, it has chosen disarmament across a range of issues including arms control, non-proliferation, national missile defense, space, weapons research and development, and future forms of warfare. The umbrella international forum, the United Nations, makes disarmament a priority. On matters of international security and disarmament, UN member States are making strong, often intelligent, statements about what is wrong with current security policies and how to fix them. Numerous reports, statements, and resolutions carrying significant majorities have spelled out how to move on non-proliferation, where to cut off dangerous trends, and what regional and global arrangements are necessary to build trust. Yet action on these healthy human choices is blocked and undermined by tired trends: nationalism, greed, and violence.

The role of citizens, professional alliances, and non-governmental bodies is to hold governments to their obligations and to set examples of cooperation, dialogue, and alternative approaches to conflict. This includes becoming educated about policies pursued on our behalf or in our name, and letting our representatives know where we stand on these.

Over the past year we have seen some promising developments. The 2000 NPT Review Conference resulted in a commitment to 13 practical steps toward nuclear disarmament. The UN has commissioned important studies on disarmament education and on missiles. First steps have been taken towards bringing women into the mainstream of disarmament work. The UN will soon hold its first conference on illicit small arms and has indicated an interest in coordinating disarmament approaches with inherently related issues such as humanitarian action, armed conflict prevention, and development.

The international deliberations on disarmament, however, are hardly noticed beyond a small and primarily self-selecting group. Without visible and vocal support from the world beyond the halls of diplomacy and small academic and activist circles, positive change is not likely.

At a minimum, governments would be kept alert if they heard from their own and each other’s citizens—consistently and coherently—as policies affecting disarmament are formed. Changes in actual behavior might well follow.

Merav Datan, JD
New York, NY

A transition and a new commitment

We present this “inaugural” issue of Medicine & Global Survival, as a publication of the International Physicians for the Prevention of Nuclear War (IPPNW), with great anticipation. I use the quotation marks to draw attention both to the effort that has preceded this transition, and to the responsibility we carry forward.
M&GS was the inspiration of three stalwarts of the physicians' movement—Jennifer Leaning, Jack Geiger and Christine Cassel—who more than a decade ago envisaged a multidisciplinary, peer-reviewed medical journal that would serve as the professional voice for socially responsible physicians. Thus was launched The PSR Quarterly: A Journal of Medicine and Global Surviving in 1991. A few years later, the journal was brought to a wider international audience as a publication of the British Medical Journal Publishing Group, before pioneering on its own into the digital revolution as an online publication.

While many people have contributed to the development and success of M&GS, the prodigious efforts of its founding Editor-in-Chief were of singular importance. During her 10-year tenure, Dr. Jennifer Leaning maintained the highest standards of scientific and intellectual discipline, while at the same time encouraging authors and readers alike to explore the deeper connections among and between problems and solutions. Her approach not only produced a high quality journal, but also stimulated creative thinking in others beyond what they might have thought possible or acceptable in typical professional publications. The results are impressive.

Over the past decade, M&GS has looked deeply into the nature and consequences of the major threats to human and global survival. It has published the findings and opinions of world class researchers, scientists, physicians and public health specialists, politicians, and citizen activists. It has served as an authoritative resource on issues related to our collective fate, and has stimulated informed discussion and rigorous analysis, helping to define a unique medical perspective on those issues. Perhaps most important, it has helped to sharpen strategies for preventive action.

Indeed, the physicians movement has always had its strongest impact when a powerful medical message, based on careful and collaborative research, has been delivered effectively to concerned health professionals, to policy makers, and to the public. The Norwegian Nobel Committee recognized this in 1985 when it cited IPPNW's success in “spreading authoritative information and by creating an awareness of the catastrophic consequences of atomic warfare.” It is in that same tradition that we establish this formal union of M&GS and IPPNW resources and interests.

In assuming stewardship of this distinguished and essential enterprise, IPPNW will seek to maintain M&GS's universally respected role as a primary source of bold, creative, and authoritative scholarship. We intend to expand its reach through aggressive international marketing to medical libraries, universities, research institutions, non-governmental organizations, and the public policy community. We will continue to reach out to and enlist a broad constituency in an effort to form mutually supportive relationships with individuals and organizations that share our common will. In doing so, we hope to continue building the knowledge base for the international physicians' movement in order to inform new strategies for safeguarding human well being and the integrity of our fragile planet.

IPPNW is committed to ensuring this journal's longevity. We will benefit greatly
from the leadership of Dr. David Rush and John Loretz, long associates of both IPPNW and M&GS, as Editor-in-Chief and Executive Editor respectively. But we need your help in a number of ways. Your renewed subscription, of course, is vital. We also invite you to write for M&GS and to suggest articles and topics that you think should be covered in these pages and on the journal’s website. We also seek your help in promoting M&GS among your colleagues, your libraries, your departments, and your professional associations. Please join us as active participants in the development of the knowledge base that supports our work toward a safer, healthier, more just world.

Michael Christ
Cambridge, MA
The Immediate Future of IPPNW

Does our dear, battered world need organizations such as IPPNW? Sad as our times sometimes are, it seems probable that they would be worse without us, and other citizens’ organizations like ours, as a counterbalance to the usually self-serving, parochial and amoral agendas of the nation states.

Within our federation, however, we face some differences that we must address and deal with if the organization is to continue to be maximally effective. The problem is: how do we work when there are honest disagreements among us about important issues of war and peace, the current example arises from the response to the September 11th attack on the World Trade Center?

In IPPNW’s internal e-mail discussions, and at the historic 20th anniversary IPPNW Board meeting at Airlie House in November, the leaders of IPPNW have expressed strong disagreement about the appropriateness of the US government’s response to the attacks September 11. A few facts are clear. The US found, for the first time since 1812, its mainland under attack. The United States government defined these attacks as an act of war and responded, virtually unilaterally, with great force, directed at al Qaeda and at Afghanistan, the state which harbored it.

There are some IPPNW physicians, mostly from the US, who believe that a military response was justified; they are not willing to condemn the bombing on principle. They believe that the destruction of the terrorist infrastructure in Afghanistan was a worthy goal, and that, while there were many civilian casualties, the US military made a serious attempt to minimize them. They further argue that it is now hard to deny that Osama bin Laden and al Qaeda were the instigators of the attacks, and that an international network is in place for the purpose of conducting further attacks.

On the other hand, there are others, mostly from Western Europe and the former British Commonwealth, who are very critical of almost every aspect of the US response. They believe that the September 11 attack should have been treated as a criminal act and addressed by international action through the United Nations, though they do not specify how exactly this might have been done. They see the destruction wreaked on Afghanistan as unlikely to prevent the terrorist network being reconstituted elsewhere and say that destruction will intensify the bitter enmity towards the US in most of the Islamic world. Most importantly, they protest at the large number of non-combatants killed. They are
committed to the idea that it is difficult, perhaps impossible, to create lasting peace out of violence or, as A.J. Muste famously said, “There is no way to peace; peace is the way.”

Such differences are not confined to our organization; they reflect uncertainty and confusion within the health professions, the peace movement, and the larger society. It remains unclear what response to September 11 best balances the need to protect civilian populations, while sustaining their civil rights and humanitarian goals. It is easy to oversimplify the pathway to this balance; in reality, none of us really knows how to get there. Even the truism that we should stick to our principles is not so easily applied.

The words going back and forth across cyberspace have often sounded not so much like a dialogue as like a political campaign. But this not what we are engaged in! There are no votes, and this is not an election. We are an international federation of doctors with both the honor and the responsibility of a Nobel Peace Prize—and we will do the most good if our deliberations reflect the high trust placed in us. IPPNW won the Prize because US and Soviet physicians found ways to bridge their differences and sought and found common ground.

IPPNW has recognized that there are many threats to peace and has therefore extended its concerns beyond the dangers of nuclear weapons. As we leave familiar ground, however, there are fewer certainties, less unanimity, greater differences on how to proceed. Voluntary organizations such as ours often founder over accommodating differences. Activists tend to be articulate and passionate, and even self-righteous. On the other hand, if our differences are faced and dealt with successfully, our organization could emerge even stronger, chastened possibly, but better able to deal with devilishly complex problems we are challenged to solve.

We owe our origins to some visionary doctors, particularly Bernard Lown. They understood that a shared medical vocation allowed the bridging of many national differences and permitted a common voice that expressed the world’s yearning for peace and health. Their vision remains our mandate and our inspiration.

How might we face the current challenge? We need to tone down our rhetoric and remember how many goals and ideals we share. The world of Robert’s Rules and majority rule appears to be virtually useless since, whatever the vote, the federation cannot succeed without active, involved chapters that may have some very important minority positions on the events of the moment. I suggest that, in a spirit of tolerance and mutual respect, we try to clarify which of our differences may now appear to be unbridgeable and, for the moment, set them aside and address the numerous other issues that confront our beleaguered world. By returning to our roots, remembering our vision, offering respect and consideration to those with whom we disagree, we can go on to make a real contribution to leaving the world a better place.

To further our dialogue, M&GS, in this issue, presents a series of articles that, while they take a variety of positions, are all consistent with the goal of respecting international law and human rights, and strengthening multilateral approaches to security, all within
a framework of sound public health principles. Also included here is a new study by members of Physicians for Social Responsibility (IPPNW-US) detailing how the proposed US National Missile Defense, even if it were to work up to the proponents' expectations, could fail to prevent catastrophic medical consequences of a nuclear attack against US cities. Alan Parkinson, an Australian nuclear engineer, exposes serious shortcomings during the cleanup of a nuclear testing site on aboriginal lands and suggests that the government is downplaying the health threats of contamination that remains onsite. Sidel et al revisit the question of bioterrorism preparedness, challenging the need for and effectiveness of the programs described by O'Toole and Lillibridge in Volume 6, Number 2. Jesse Selber and Kebba Jobarteh examine the ways in which private military companies have exacerbated armed conflicts in Africa. Finally, Joachim Gross reviews the most recent work of the Intergovernmental Panel on Climate Change and other recent literature on the health effects of global warming.

In our next issue we will present the views of two prominent IPPNW physicians who disagree on whether the US-led military response to September 11 was justified and appropriate. We extend an open invitation to M&GS readers to join this discussion, if they wish, by sending comments to be posted on the journal's website.

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