Medical Peace Work
Online Course 3

War, weapons and conflict strategies
Course 3: War, weapons and conflict strategies

Objectives

• Describes the health effects of war, weapons and strategies of violent conflict.
• Give an historical and practical analysis of the response of health professional groups to war and militarisation.
War, weapons and conflict strategies

Chapter 1: Weapons of mass destruction

Chapter 2: Health effects of other weapons and conflict strategies

Chapter 3: Health professions’ responses to war and weapons
Characteristics of nuclear weapons

- Purpose: to threaten to kill massive numbers of people in order to prevent attack (deterrence)

- Much greater destructive power than conventional weapons

- Explosion created by splitting atoms and chain reaction, releasing massive amounts of radiation
Nuclear weapons –
effects on health and environment

**Flash** → retinal injury, blindness

**Fireball** → Heat wave → vaporizes everything within certain distance → third-degree burns

**Blast** → destroys buildings → mechanical injuries, lacerations, ruptures organs, eardrums

**Firestorms** → hurrican-like winds, infernos → people are incinerated → climate change

**Fallout** → acute radiation sickness → cancer, genetic damage, weakening
Nuclear weapons - use scenarios and effects

1. Accidental nuclear war
2. Large-scale nuclear attack
3. ‘Limited’ nuclear exchange
4. Attack on hardened, underground target
5. ‘Unauthorised’ use
Nuclear weapons - other medical, environmental and social effects

- Climate change
- Nuclear tests
- Production of nuclear weapons
- Nuclear fuel cycle
- Costs of maintaining arsenals
Biological weapons

Characteristics

• Uses living (micro) organisms to cause disease or death in large numbers of people, plants or animals
• Organisms should multiply in target
• Infection should take hold and infect others
• Also toxins made by organisms or plants
• Can be lethal or 'non-lethal'
• Best known examples: anthrax bacteria and small-pox virus
Biological weapons - health effects

- **Anthrax**: bacterial agent, not contagious, lethal if inhaled
- **Smallpox**: highly contagious viral agent, very high death rate, travels easily through air
- **Plague**: highly contagious bacterial agent, incubation period of 1-5 days, causes potentially lethal pneumonia
- **Ebola**: fever caused by viral agent, no cure or treatment, extremely lethal, leads to bleeding from all orifices
- **Botulinum**: toxin, causes lethal muscular paralysis
Biological weapons - legal status

• Outlawed by treaty: Biological and Toxins Weapons Convention (BTWC)
• all development or production of biological weapons outlawed
• Problems: advances in bioscience, and lack of a verification system
Chemical weapons

- **Nerve agent**: highly lethal, kills in very small dosages (e.g. sarin, soman, VX)
- **Blistering agent**: causes burns and blisters on the body, damages eyes; If inhaled severely damages lungs, often leading to death (e.g. mustard sulphurous gas, lewisite)
- **Asphyxiating agent**: causes damage to lungs (e.g. phosgene, mustard gas)
- **Psychotomimetic agent**: causes a hallucinatory effect similar to LSD (e.g. BZ)
- **Incapacitating agent**: relies on irritants and toxic effects to incapacitate a person temporarily (e.g. tear gas, CS gas)
Chemical weapons - control regime

- Chemical Weapons Convention (CWC) came into effect in 1997
- 188 parties to treaty, but Egypt, Israel, North Korea and Syria not yet signed
- Problems:
  - pace of destruction of stockpiles
  - verification not taken seriously
  - no challenge inspections
- Definitions of banned weapons problematic, many not prohibited
Radiological weapons

- **Radiological dispersal weapons:** „Dirty Bombs“ disperse radioactivity by detonating explosives surrounded by nuclear material.

- **Nuclear facilities:** Nuclear reactors, nuclear transports and waste storage can be turned into weapons through deliberate attack.

- **Uranium weapons:** containing depleted uranium for use against tanks
Radiological weapons
- measures to deal with threat

• Best measure is prevention, i.e. guard against theft
• Transfer and export control regime: multilateral Convention on the Physical Protection of Nuclear Material (1980)
• IAEA Code of Conduct on the Safety and Security of Radioactive Sources
• Protect nuclear reactors against sabotage including attack with planes
• Ban uranium weapons
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Landmines and cluster munitions

- 90% of landmine victims are civilians
- destroy infrastructure, make fields useless, and prevent refugee return
- cause disability, demoralization, unemployment, social stigmatization and economic hardship for families and communities
- women victims suffer more, higher death rate
- disproportionate number of victims are children
‘Non-lethal’ weapons (NLWs)

- designed to incapacitate people or disable equipment, minimal collateral damage
- intended to be discriminate and not cause unnecessary suffering
- effect on people should be temporary and reversible
- should provide alternatives to/ raise the threshold for use of lethal force
- actual use of NLWs shows that none of the above are guaranteed, having exactly the opposite effect to that intended
Rape as a military strategy

Sexualized violence: „a sexual expression of aggression“
- includes rape, sexual degradation, humiliation and violence to breasts and genitals, forced prostitution and trafficking
- abuses used in war to attack the body in order to break the spirit, gender-specific
- Trauma: attack on victim’s innermost self and personality, often lead to PTBS, psychosomatic disorders, phobias, suicide
- Physical consequences: injury, pregnancy, infection, HIV, hormonal dysfunction
Public health effects of war

Public Health: concerned with the health of the community as a whole

• immediate effects of violent conflict are increase in death and injury
• fires in refugee or displaced persons camps
• epidemics and communicable diseases
• displacement, disruption and debilitation
• lack of food security and malnutrition
• mental health problems
• lack of drugs for treatment of disease
Small arms and light weapons (SALW)

- SALW include handguns, assault rifles, machine guns, grenades and landmines
- cause the majority of deaths in violent conflict globally
- 639 million small arms globally, or approximately one for every ten people on earth
- direct death toll due to SALW range from 80,000 to 500,000 per year, most in developing world
- 3-4 times this number of people are injured
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Educating the public

• Know your target audience
• Know yourself
• What is the message?
• Who is delivering the message?
• What methods can be used?
History of health professional activism for peace

- First tried to „humanize“ war
- 1905: International Medical Association Against War
- 1918: Jeanne van Lanschot-Hubrecht questioned giving medical aid in WW1
- 1930: Committee for War Prevention in Holland
- 1936: Medical Peace Campaign in UK
- 1961: Physicians for Social Responsibility (PSR) in USA
- 1980: International Physicians for the Prevention of Nuclear War (IPPNW)
Data-to-policy work

• Evidence for advocacy need credibility (actual and perceived)
• Reliable data has to be collected using recognised methods
• Less influence on policy if disputable
• Less credibility if party has strong interest in a certain result
• Lack of transparency damages findings
• Predicting future using past data for advocacy
Examples:

- International Campaign to Ban Landmines (ICBL)
- International Action Network on Small Arms (IANSA)
- The Red Cross
- International Campaign to Abolish Nuclear weapons (ICAN)
References

- International Physicians for the Prevention of Nuclear War (2010). Zero is the only option.

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