

## **PACS 301-Peace through Health Course**

Lectures: Thursday evenings September 14- November 30 2006  
19:00-22:00  
CG 1302

Instructor: Neil Arya MD ([narya@uwaterloo.ca](mailto:narya@uwaterloo.ca))  
<http://www.fes.uwaterloo.ca/ers/faculty/narya.htm>

Office Hours: Neil Arya: Thursday 1800-1900 Additional time may be available  
by appointment only.  
Location: Conrad Grebel 2107

Required Text: Courseware (available from Kinko's)

### **Introduction**

The connections between health-disease and peace-war are multiple. War and militarized violence affect human health directly, through casualties and injuries, as well as indirectly, disrupting economic and social systems that address health needs and instilling fear and distrust. Other forms of social or structural violence also affect health.

A critical examination of the interrelationships includes the strategic use of health and other humanitarian initiatives to encourage peace (or discourages war) in zones of potential or existing armed conflict. The health sector offers an especially interesting form of peace-building, known as “Peace through Health” or (“Health as a Bridge to Peace” by the World Health Organization).

This Introduction to Peace through Health employs a model of Peace through Health developed by the author and McMaster colleagues.

Viewing war and violence in the framework of a public health problem enables a re-thinking of its determinants within a health perspective along lines of prevention, treatment and rehabilitation/palliation, through the lens of a disease prevention model applied in medicine as primordial, primary, secondary and tertiary prevention. . This view allows for critical analysis of health-related interventions and the role of health care and humanitarian work as a means of discouraging violence and addressing root causes. It leads to re-thinking the process by which health interventions are conducted in zones of armed conflict and in areas closer to home to deal with structural violence, so as to maximize their peace building potential. It also examines strengths (Knowledge, Skills Values) and limitations of health professionals to act for peace. Such a model may also be employed by other sectors of society in multi-track peace building- the use of numerous informal tracks to peace drawing from various sectors of society. A case study approach will be employed using Canadian and international examples, the lecturer's own experience and guest lecturers.

In the course, we will review basic concepts of health such as (public health, global health, ecosystem health, health and human rights, medical anthropology, mental health, medical ethics and basic concepts of peace and conflict transformation covered in other Peace Study courses and derived from such fields as anthropology, sociology, political science and psychology.

The course will be of interest to those concerned about the growing problems of war and militarized violence in the world and who wish to gain a better appreciation of what measures individuals and societies may take to counter these trends. This course is recommended for those considering careers in medicine and other health and humanitarian disciplines, particularly where practiced in social contexts impacted by militarized violence, or the threat of such. As a third year course in Peace Studies, prior background in peace and/or health disciplines would be an asset.

While the study of war is invariably troubling and depressing, the course endeavours to counterbalance this, with engaging discussion and examples of positive initiatives and interventions of individuals, organizations, communities and nations that inspire hope.

Format will be primarily seminar and Power Point based. Students will be expected to have done background readings. There will be opportunity for small group work and discussion of real and fictional cases.

## **Learning Objectives**

### Knowledge

The student can demonstrate an understanding of

- general concepts of violence, peace, conflict analysis and conflict management/transformation, reconciliation
- general concepts of health: determinants of health, public health, ecosystem health, health and human rights, mental health in war-zones, applied medical ethics
- integrated peace and health paradigms
- psychosocial healing
- multi-track peace building
- field realities, pitfalls and challenges of health work in promoting peace
- risk of exacerbating conflict
- some controversies in Peace through Health
- attempts at evaluation of Peace through health ventures

### Skills

The student can show evidence of having acquired the following skills:

- applying theoretical peace and health principles to specific settings for conflict management by identifying potential 'peace through health' mechanisms
- applying principles of multi-track peace building to sectors of society other than health
- violence analysis. conflict analysis,
- general evaluation of peace through health initiatives

developing a major paper from idea putting forth ideas in a clear way both verbally and written  
recognizing the contribution students as individuals can make towards a peaceful society

### Values

The student will develop and demonstrate clarity of his/her values on:  
conflict: creative and destructive aspects  
violence and nonviolence  
interdependence and the global village  
concepts of justice and right action  
social responsibility and humanitarian action

### Evaluation

10 % proposal  
10 % presentation of class material/ management of discussion group  
15% term test  
35% essay  
30% final exam  
(5% bonus-class webboard)

### Project essay/project:

Much of the formal appraisal of your work is based on your written work. Every university course shares responsibility to develop your capacity to express yourself clearly and effectively in writing. Ideally, your work, even if very technical, should be a pleasure to read.

This means:

It must be typed, double-spaced.

The spelling must be correct. It is preferable to use Canadian, not U.S. spelling.

The grammar and punctuation must be correct.

Strive for a pleasing style.

If English is not your first language, you may need to make use of a computer spelling-check, and of help from others in editing your work. Whether or not English is your first language, proofread your work.

The major essay will be on a topic from a selected list related to the course content. eg, Apply the principles and theory of Peace through Health initiatives to a specific setting or context (e.g. country, theme or mechanism of 'health to peace').

Submit essay **proposal** no later than **October 5th**. To be reviewed and approved by instructor. The **essay** itself is **due** on the **30<sup>th</sup> of November** (last class) at 7 pm. Essay length to be 3000-4000 words (typed, double spaced). Submission of late essays will be

acceptable only when prior arrangements have been made with your instructor(s). All papers handed in late will be penalized by 5% per day.

The essay must be your own work. Paper is due **November 30**. Submit hard copy to (instructors' office CG 2107 or in class) and text file (to ANGEL webpage). Retain a copy for your files, along with notes and early drafts.

**Measures of good quality**

Original content and thought

Use of course concepts references

Evaluation

Organized Pleasing style

One which situates the topic in a larger context and explains its relevance

**Essays not acceptable**

Ones which regurgitate ideas

Ones which merely recount experience

Grammatically poor

One which does not relate to concepts discussed in class

Poorly referenced, opinion only

**Examples of Essay Topics from McMaster Course and Waterloo (do as web page link)**

MultiTrack Diplomacy

Peace through Health Projects-Regions

Peace through Health Model critique

Model design for other sectors work

Peace through Health Evaluation

Humanitarian Ceasefires

Organizations - IPPNW MSF WarChild

Right to Play - SportWorks (S. Africa)

Peace Through Agriculture -focus on the role of farmers, meaning of food

Sexual Violence Against Women in the Democratic Republic of the Congo

Developing a Curriculum for a Medical Student Exchange between Canada and Zambia

Talking to Children About War

Maternal Health in Afghanistan -Targeting Structural Violence Against Women

Teaching Children about War Medical Personnel and Peace Education

Conflict and Children

How Health Workers can prevent Children from being used as Soldiers

Missions and Peace through Health deficits

Community Development International Service Learning

Community Based Rehab Butterfly Garden

Peace through Health in Kamenge women's war trauma center-  
 HIV AIDS violence against women  
 Violence against Women HIV AIDS  
 Rehab of Angola's IDPs  
 Angola and the Lusaka Peace Protocol-  
 Gusco Save the Children in Uganda/Angola-  
 Malawi HIV AIDS  
 AIDS in Botswana Direct and Structural Violence  
 The Development of Peace through Health and Community Theatre-  
 Health and Peace in Sudan  
 Child Labour in Egypt  
 Violence against Women  
 Female Genital Mutilation and Human Rights  
 Female Literacy in Afghanistan Structural and Cultural Violence  
 Sports and Celebrities  
 Post War sense of Peace via Health and Sport Measures  
 Culture Violence and Music and Peace  
 Gandhi and John Paul II for Peace  
 Structural and Cultural Violence of Poverty-in Canada East Hastings, MCC and Praxis  
 project  
 Landmines +/- Small Arms  
 Evaluation of International Organizations  
 ICRC  
 The Role of NGOs War Child and Free the Children-  
 Physicians Promotion of Human Rights in POW camps  
 IPPNW Nuclear Weapons  
 UNICEF as a Peace through Health Organization  
 Health Worker Role in Reducing Military Spending  
 Evaluation of Peace through Health  
 Food and Water  
 Malnutrition in War  
 Sanctions and Humanitarian Concerns-  
 Water access as a Peace through Health Initiative-  
 PTSD Health Deficits of War  
 Big Sugar-Diet health and Peace  
 Environmental Restoration in Yugoslavia  
 Peace through Health and Natural Disaster-  
 Community Peacebuilding in North Etobicoke  
 Evaluation of NNADAP Programme Aboriginals

### **Presentation of Class Material**

By the second week of class you will be expected to sign up as pairs to summarize class material to your classmates. This may involve written text, summary notes, Power Point slides and links put on Angel and a four to five minute in class summary. You will be evaluated on your understanding of course material, use of additional resources, ability to

project ideas in written and verbal form in an interesting and innovative way. In addition you may earn up to a 5% bonus related to your ability to respond to questions on the webboard and posing important questions for discussion in written and verbal form. It is assumed that most students will be able to earn 2-3% bonus with only exceptional students getting 4-5%

### **Term test (15%)**

This will be an hour in duration. There will be a choice of one of four essays on various topics presented in class. There will also be three short answer questions.

### **Final Exam (30%)**

There will be a choice of two of four essays and three short answers questions.

**Both the term test and final will be open book.**

### **Avoidance of Academic Offenses.**

Students are expected to know what constitutes academic integrity, to avoid committing academic offenses, and to take responsibility for their actions. Students who are unsure whether an action constitutes an offense, or who need help in learning how to avoid offenses (e.g., plagiarism, cheating) or about "rules" for group work/collaboration should seek guidance from the course professor, TA, academic advisor, or the Associate Dean. For information on categories of offenses and types of penalties, students should refer to Policy #71, Student Academic Discipline (<http://www.adm.uwaterloo.ca/infosec/Policies/policy71.htm>). Students who believe that they have been wrongfully or unjustly penalized have the right to grieve; refer to Policy #70, Student Grievances (<http://www.adm.uwaterloo.ca/infosec/Policies/policy70.htm>).

### **Evaluation of course**

The instructor values your critical, constructive comments on the content and organization of the course throughout the course in written and verbal form.

**NOTE: You will be expected to read about 50-75 pages per week.**

**In addition you may wish to consult such sources as**

CIA factbook <http://www.cia.gov/cia/publications/factbook/> for unbiased facts?!

BBC <http://www.bbc.co.uk/> <http://www.countryreports.org/index.aspx> and wikipedia for information on particular situations or conflict zones

### **Outline of Course**

1. Course Overview War and Ill Health
2. PtH model assets Deficits primary secondary tertiary multisector

3. Peace Studies Medical Ethics
4. Determinants of Health, Ecosystem Health, Health and Human Rights
5. PtH Test Evaluation of PtH
6. MSF Humanitarian Assistance Tertiary WHO HBP
7. Tertiary McMaster Psychosocial
8. Iraq Sanctions War
- 9 IPPNW Weapons systems small arms ICBL
10. El Salvador Palestine Dilemma in PtH
11. Root Causes Working on Primordial Prevention Locally
12. Arguing War Peace A Medical view of Security World future

## **Final Exam**

### **Week 1 September 14 Peace through Health: An Introduction Course Overview War and Ill Health**

Introduction  
 Course Outline  
 General Objectives  
 Evaluation Marking Scheme  
 Relationship between War and Violence with Health  
 Need for Peace through Health

#### ***Objectives***

Understanding the link of war and violence to Disease and Ill-health  
 Impact of war, preparation for war, the arms trade and violence on health care, public health infrastructure, environmental degradation, and economic well being

Begin thinking about major essay

Krug EG, Dahlberg LL, Mercy JA, Zwi AB, Lozano R. World report on violence and health (Abstract). Geneva: WHO; 2002.

Murray CJ, King G, Lopez AD, Tomijima N, Krug EG. Armed conflict as a public health problem. *BMJ* 2002;324:346-349.

in War and Public Health

Garfield Richard M and Neugut Alfred I The Human Consequences of War Chapter 3 pp 27-38

Holdstock Douglas. Morbidity and Mortality and Soldiers and Civilians Chapter 16 *War or Health* pp183-197

Sidel Victor W. and Levy Barry S. The Impact of Military Activities on Civilian Populations Chapter 11 149-167

Leaning J. Environment and health: 5. Impact of war. *CMAJ Canadian Medical Association Journal* 2000,163:1157-1161.

Connolly MA, Heymann D. Deadly comrades: war and infectious diseases. *The Lancet* 2002,360:s23-24. The Lancet Dec 02 Vol 360

Guha-Sapir D, van Panhuis WG. Armed Conflict and Public Health: A report on knowledge and knowledge gaps. In. Brussels: CRED; 2002. L'Universite Catholique de Louvain in Brussels Centre for Research on the Epidemiology of Disasters Pages 13-22, 25-26 36- 47

Yusuf S, Anand S, MacQueen G. "Can medicine prevent war?" Editorial: *British Medical Journal*, vol. 317: December 1998, pp. 1669-1670.

MacQueen Graeme, Santa Barbara J, Neufeld V, Yusuf S, Horton R, Health and Peace: Time for a New Discipline *Lancet* 357 9267 1460-61 12 May, 2001.

Vass, Alex J. Nov. 3, 2001. Peace through health: This new movement needs evidence, not just Ideology

Peters MA. Part B Why Health to Peace? in *A Health-to-Peace Handbook*. Hamilton; 1996.

## **Week 2 September 21 Health as a track of Multi-Track Peacebuilding Peace Health**

Health Professionals and Peace  
Development of a Model of Peace through Health Work  
War as a Disease; Prevention Model; Mechanisms

### ***Objectives***

Understanding the McMaster framework:  
Understanding Critiques  
Understanding Multi-track Peacebuilding  
Understanding Link of Peace through Health Theory to Project Field Work  
Peace through Health Education

Begin with Webel and Galtung Chapter  
Peace Education for Croatian Medical Journal War and Public Health



Arya, N Peace through Health I: Development and Use of a Working Model *Medicine Conflict and Survival* Volume 20 (3) 242-257 July-September 2004

Arya N Peace through Health II: A Framework for Medical Student Education *Medicine Conflict and Survival* Volume 20 (3) 258-262 July-September 2004

in *War or Health? A Reader*. Edited by Taipale I, Mäkelä PH, Juva K, *et al.* London & New York: Zed Books; 2002

Jenssen C. Medicine against War: An Historical Review of the Anti-War Activities of Physicians. Chapter 1 7-29

### **Week 3 September 28 Principles of Peace Work: Lessons from Peace Studies, Sociology, Anthropology Medical Ethics**

#### **Guests Joanna Santa Barbara**

Review key concepts of peace violence Galtung  
Conflict Analysis  
Cycles of violence structural, direct, prevention  
Role Play Case Study Yalini Klipo Birth Attendant  
Puppet Show  
Afghanistan  
Medical Ethics

#### ***Objectives***

Understanding Definitions  
Conflict theory: roots of conflict, analysis, conflict management/transformation  
Diagnosis, prognosis & therapy

Doing a Needs Analysis Prevention, Peacemaking, Peacebuilding  
Dialogue, empathy and communication

Intercultural communication  
Understanding basic frameworks of medical ethics, physician responsibility

Santa Barbara, Joanna. Conflict Analysis Chapter, Dealing with Conflict, Reconciliation  
*Afghan Peace Manual*

Holliday A, Hyde M, Kullman J. *Inter-cultural Communication: an Advanced Resource Book*. London & New York: Routledge; 2004. pages 48 and 49 Disciplines for intercultural communication Table 4

Lange M, Quinn M. Conflict, Humanitarian Assistance and Peacebuilding: Meeting the Challenges. In. Edited by Alert I. London; 2003. p 17-25

McMaster Afghan Peace Stories  
Story 4 (Mirza's Heart) pages 31-35  
Reconciliation

Hippocratic Oath

ABIM Foundation Medical Professionalism Charter-The Lancet Medical Professionalism in the New Millennium: A Physician Charter Annals of Internal Medicine 5 February 2002 Volume 136 Number 3 pages 243-246

Santa Barbara, Joanna Working for Peace through Health: Ethical Values and Principles  
<http://www.cmj.hr/2005/46/6/16342362.pdf>

Nuremberg Code

Seideman WE. Whither Nuremberg? Medicine's Continuing Nazi Heritage. *Medicine and Global Survival*,2.

Miles SH. Abu Gharib: its legacy for military medicine. *The Lancet* 2004,364:725-729.  
Lifton R. Doctors and Torture, *New England Journal of Medicine*  
<http://content.nejm.org/cgi/content/full/351/5/415>

## **Week 4 October 5 Determinants of Health, Health Rights and Security?**

### **Essay Proposal Due 10%**

Public health paradigms-Basic Health  
Alma Ata Declaration  
Ottawa Charter  
People's Health Charter  
Population Health/ Broad Determinants of Health  
Models of Prevention  
Economic Causal links to health  
Poverty and deprivation  
Inequity and injustice  
Health as a stake in conflict  
Millennium Development Goals  
Ecosystem Health  
Health and Human Rights

### ***Objectives***

Understanding basic concepts of health and its determinants

Understanding the concepts/frameworks of Ecosystem Health, Health and Human Rights

How can we think about these concretely, globally and locally?

### Determinants of Health

Alma Ata Declaration (1978)

Ottawa Charter For Health Promotion (1986)

People's Health Charter

Millennium Goals <http://www.un.org/millenniumgoals/> <http://www.undp.org/mdg/>

Arya N. Globalization: The Path to Neo-Liberal Nirvana or Health and Environmental Hell *Medicine, Conflict and Survival* June 2003 19 (2) 107-120

Arya et al. Ecosystem Approaches to Health

Santa Barbara Joanna Living on the Backs of Our Grandchildren

<http://www.cmj.hr/2005/46/4/16100777.pdf>

Stewart F, Holdstock D, Jarquin A. Root causes of violent conflict in developing countries Commentary: Conflict---from causes to prevention? *BMJ* 2002,324:342-345.

UNDP report Human Development Index

[http://hdr.undp.org/statistics/data/indic/indic\\_12\\_1\\_1.html](http://hdr.undp.org/statistics/data/indic/indic_12_1_1.html)

[http://hdr.undp.org/statistics/data/pdf/hdr04\\_table\\_1.pdf](http://hdr.undp.org/statistics/data/pdf/hdr04_table_1.pdf)

Sivard Ruth Leger. "World Military and Social Expenditures" World Priorities Washington 1996 44-51

Universal Declaration of Human Rights

UNDP 2000 p. 27-28

## **Week 5 October 12 Evaluation of Peace through Health**

### **Test 1**

Furthering the discipline Education, field projects, filters Work of Anderson, Bush, Zwi and others

### ***Objectives***

Know basic tools to help how to evaluate our effectiveness

### Evaluation

Anderson MB. *Do no harm: How aid can support peace - or war*. Boulder and London: Lynne Rienner Publishers; 1999: 1-66 (Chapter 1-5)

Anderson MB, Olson L. Confronting War: Critical Lessons for Peace Practitioners. In. Cambridge, MA: The Collaborative for Development Action, Inc.; 2003. p 8-26, 45-59

Bush K. Hands-On Peace and Conflict Impact Assessment (PCIA). In: *Walking the Path of Peace: Practicing the Culture of Peace & Peace and Conflict Impact Assessment*. Edited by Program P-CLGS. Manila, Philippines: Philippines-Canada Local Government Support Program; 2003:71-109. Hands on PCIA Sections II-1 – II-33 will shorten

The University of New South Wales Health and Conflict Project Issues Paper 1 Health and Peace-Building Securing the Future Dec. 2004 to use new document

## **Week 6 October 19 Health Work in WarZones through A Peace through Health Lens MSF Humanitarian Assistance WHO HBP**

### **Case Study Tsunami Resource James Orbinski or Lynda Redwood-Campbell**

Overview; conventional practice by humanitarian relief organizations versus community based models -Issues, controversies, cultural values, sustainability

MSF/ War Child

Humanitarian Ceasefires

Humanitarianism (types, controversies, challenges)

Medact Global Health Cases

### ***Objectives***

Understanding Mechanisms for action in War Zones Communication of Knowledge and Advocacy

Understanding dilemma in humanitarian work in war zones, situational conflict

Understanding WHO HBP framework and examples of action

### **Humanitarian Assistance**

Fox Renee. Medical Humanitarianism and Human Rights: reflections on Doctors without Borders and Doctors of the World Chapter 28 pp 417-435 in *Health and Human Rights*

Orbinski James. Acceptance speech on behalf of MSF for the 1999 Nobel Peace Prize

Dachy E. Medecins sans Frontieres and Military Humanitarianism *Contact Internal Newsletter* Nov/Dec 2001

Pirjola Jari and Stenbaeck Paer . International Red Cross Chapter 52 pp541-546

Vuori Hannu. Humanitarian Assistance to Countries at War: An exercise in futility? Chapter 54 pp555-566 in *War or Health?*

Lange M, Quinn M. Conflict, Humanitarian Assistance and Peacebuilding: Meeting the Challenges. In. Edited by Alert I. London; 2003. p 17-25  
WHO HBP

Manenti A. Health as a potential contribution to peace: Realities from the field: what has WHO learned in the 1990s. World Health Organization, Health and Conflict, Department of Emergency and Humanitarian Action

Rodriguez-Garcia R, Macinko J, Solórzano FX, Schlessner M. CERTI Crisis and Transition Tool Kit: How Can Health Serve as a Bridge for Peace? In; 2001. p 22, 42-61

## **Week 7 October 26 Tertiary Prevention November McMaster's Health Reach: the Health of Children in War Zones**

**Guest Rob Chase or Seddiq Weera**

**Case Study Multi-track Diplomacy**

*McMaster Work*  
*Croatia Sri Lanka Afghanistan*

### ***Objectives***

Knowledge of McMaster Projects  
Understanding Mental Health in the context of War and Violence  
Understanding role of non-health professionals in promoting health in post war settings  
Development of the ability to apply model to other sectors  
Mental Health and Peace and War-Pre-Conflict, During Conflict and Post-Conflict  
Trauma healing and reconciliation

### **Physical, mental and social rehabilitation**

Boyden J. Children, Youth and Environments Vol 13, No.1 (Spring 2003) ISSN 1546-2250 Children under Fire: Challenging Assumptions about Children's Resilience<sup>1</sup>

Summerfield Derek. "The Social Experience of War and Some Issues for the Humanitarian Field," pp. 9-37 in *Rethinking the Trauma of War* (London and New York: Free Association Press 1998.), Patrick J. Bracken and Celia Petty,

Santa Barbara Joanna. The Psychological Effects of War on Children, Chapter 12 168-185

**McMaster Projects Croatia, Sri Lanka, Palestine**

Article Series on McMaster University's Health of Children in War Zones Project 1994-1996 in *Medicine Conflict and Survival* Vol. 15, No. 4 Oct-Dec 1999  
Helping Children Affected by War: Introduction p352-354  
I. Psychological Trauma and Social Healing in Croatia p355-367  
III. Mental Health Initiatives as Peace Initiatives in Sri Lankan Schoolchildren Affected by Armed Conflict 379-390  
Commentary 391-393

Santa Barbara J. The Butterfly Peace Garden. *Croatian Medical Journal* 2004,45:232-233.

## **Week 8 November 2 Afghanistan Iraq and Health Activism and the Use of Public Health Research to Influence Policy**

Iraq Study Team, Medact Report, Iraq Body Count, Johns Hopkins Study

epidemiology – use of quantitative measurement  
Redefining war as a medical issue

### ***Objectives***

Understanding use of epidemiology and public health for Research Education Advocacy

### Iraq, Afghanistan

Arya N. Feb. 2002- Properly Diagnose Terrorism and Work for a Just Response Medicine and Global Survival MGS

Ascherio et al. Effect of the Gulf War on Infant and Child Mortality in Iraq. *New England Journal of Medicine* 1992; 327(13):931-6

G.MacQueen, T.Nagy, J.Santa Barbara, C.Raichle - 'Iraq Water Treatment Vulnerabilities': A Challenge to Public Health Ethics. *Medicine, Conflict And Survival*, VOL. 20, NO. 2, 109-119 (2004)

PGS Iraq Eyewitness

Salvage J. Collateral damage: the health and environmental costs of war on Iraq. In. Edited by Medact; 2002.

Arya N Zurbrigg S. Operation Infinite Injustice: The Effect of Sanctions and Prospective War on the People of Iraq *Can J Pub Health* 94 (1) p 9-12 Jan/Feb 2003  
<http://www.pgs.ca/pgs.php/Iraq/113/>

War will provoke terrorism: Canada must support peaceful means to restrain Iraq and not take part in a military attack that could have dangerous consequences for the West, say Physicians for Global Survival *Ottawa Citizen*

Arya N. *Ottawa Citizen* Mar. 7, 2003 Editorial Ask the Right Questions!

Arya N *Ottawa Citizen* May 4, 2003 Winning the Peace (letter) US offers little hope for winning Iraq peace

CMAJ Editorial The opportunity costs of war in Iraq CMAJ • April 29, 2003; 168 (9) 1011

## **Week 9 November 9 Primary Prevention: Opposing Weapons systems because of Health Effects IPPNW Nuclear War, Small Arms, Landmines**

Guest Video Setsuko Thurlow survivor of Hiroshima, social worker, activist

Focus on Primary Prevention Focus on Weapons Systems

See work of IPPNW ICBL and Small Arms activists

### ***Objectives***

Have a Basic Understanding of the Medical Consequences of Weapons Systems and the Arms Trade on Health-Physical, Psychological, Social, Economic, Environmental Application of the Model to One Organization (IPPNW) –How can medical organizations work against war

### **Weapons Systems**

Christ Michael. A brief history of the International Physicians for the Prevention of Nuclear War, Chapter 60. in *War or Health?*

Arya N. Confronting the small arms pandemic: Unrestricted access should be viewed as a public health disaster *BMJ* 2002; 324: 990-991: (27 April) April 27, 2002

Arya N UN Speech

Arya N Small Arms and Public Health

Maddocks Ian. Anti-personnel Landmines Chapter 9 104-118 in *War or Health?*

## **Week 10 November 16 El Salvador Palestine Dilemma in PtH**

**Guest Rita Giacaman by Video**

Project Work in El Salvador and Palestine  
Problem solving for better health introduction

**Objectives**

Looking at Case Studies

Research to healing

Can we look at Post Trauma or Healing in a War Zone?

Non-medical promotion of Health

Paniagua I, Crespín E, Guardado A, Mauricio A. 'Wounds Caused by Firearms in El Salvador, 2003–2004: Epidemiological Issues' *Medicine Conflict and Survival* Volume 21, Number 3 / July-September 2005 pp 191-198

**Palestine**

Miller Thomas, El Masri Mustafa Allodi Federico Qouta Samir (1999) 'II. Emotional and Behavioural Problems and Trauma Exposure of School-Age Palestinian Children in Gaza: Some Preliminary Findings' *Medicine Conflict and Survival* Vol. 15, No. 4 368-378 Oct-Dec

Giacaman Rita, Arya Neil and Summerfield Derek. Establishing a mental health system: the Occupied Palestinian Territories *International Psychiatry* July 2005 16-18

Skinner H, Abdeen Z, Abdeen H, Aber P, Al-Masri M, Attias J, Avraham KB, Carmi R, Chalin C, El Nasser Z, Hijazi M, Jebara RO, Kanaan M, Pratt H, Raad F, Roth Y, Williams AP, Noyek A, (2005), 'Promoting Arab and Israeli cooperation: Peace-building through health initiatives' *The Lancet*, 365: 1274 – 1277.

Jabbour S, (2005) 'Healing and peace making in the Middle East: Challenges for doctors' *The Lancet* 365: 1211

**WEEK 11 November 23 Working on Peace through Health Locally**

**Guests from St. John's Kitchen, KW Sanctuary Movement  
Environmental Activists, Ecofriendly Office**

**Case Study Che Melf: Acting Locally**

**Objectives**

*Seeing PtH in Action Locally*

**Week 12 November 30 Towards a new Health-Based Model of Security:  
Can war be justified Medically?**



Security and Power: Definitions from Peace and Medical Viewpoints  
A Medical Model of Security  
Just War  
ICISS-Responsibility to Protect

***Objectives***

Understanding Security from a Medical Point of View  
Opposing War and its Conduct from a Medical Ethical Point of View  
Just War-  
- ethical complexities of sanctions, just war

Ethics, Rights and Health in Peace and War

Peace Pledge Union Project: Just War Can Any War be Just  
Carter New York Times Just War Theory

The Responsibility to Protect: ICISS International Commission on Intervention and State Sovereignty

Mann JM. The Future of the Global Physicians Movement. *Medicine and Global Survival* 1997.

Arya N. "Human Rights trumps Security" *The Record*. May 16, 2003

The End of Biomilitary Realism? Time for Rethinking Biomedicine and International Security', in *Medicine, Conflict and Survival*, expected to be published 2006.

'Do No Harm: Towards a Hippocratic Standard for International Civilization', in *Re-Envisioning Sovereignty: The End of Westphalia*, United Nations University and Brooking Institute (ed.), 2006 (expected) at Australian National University Canberra: workshop Apr 2005 organized by Key School of Governance and Griffiths University & United Nations University, Tokyo

**NOTE ESSAY DUE (35%)**