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)
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 30th 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

2006 4
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.**


**Outline of Course**

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

2006 6
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


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


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


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

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


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

Hippocratic Oath


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

Nuremberg Code


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

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

UNDP report Human Development Index
http://hdr.undp.org/statistics/data/indic/indic_12_1_1.html


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)


**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?

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


**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


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

*McMaster Projects Croatia, Sri Lanka, Palestine*
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


PGS Iraq Eyewitness


Arya N Zurbriggen 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


**Palestine**


**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


NOTE ESSAY DUE (35%)