New Nuclear Weapons and Pre-emptive War OR SMART Alternatives For Global Security?

It's been about six months since President Bush's declaration of military success in Iraq. Yet the "victory" looks increasingly hollow. Following on the deaths of an estimated 6,000 Iraqi civilians in the brief conflict, the present widespread and predictable breakdown of Iraqi society underscores the arrogance of a U.S. administration now scrambling to avoid responsibility for its bluntly dishonest explanations for going to war. A protracted war of attrition is developing in the context of an increasingly anti-American population deprived of basic essentials such as clean water and electricity. It has already resulted in more deaths to U.S. soldiers than the first Gulf War. The U.S. now anticipates a multi-year military occupation.

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The Epidemiology of War

The World Health Organization estimates that about 588,000 people died in wars in 1998. That makes war the fourth most common type of injury death in that year, after unintended injuries, suicides, and homicides. Deaths from war varied from less than 1 per 100,000 population in high-income countries, to 12 per 100,000 in low/middle income countries. The rate varied by region from near zero in China, India, and the Americas to 33/100,000 in the eastern Mediterranean and 51/100,000 in Africa. War ranked as the 13th most common cause of death for 0-1 year olds, 5th for 5-14 year olds, and 5th for 15-44 year olds in 1998.

An estimated 5 percent of all deaths during the 20th century were due to the immediate or secondary impact of collective violence. This was higher than in the 17th - 19th centuries, in which 2 percent of deaths are estimated to have resulted from collective violence. The 40-fold rise in the number of deaths among soldiers in the 20th century greatly exceeded a doubling of the globe's mid-century population. Military deaths per million population rose 18-fold from the 19th to the 20th century.

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President Bush asked for and Congress has approved $87 billion for expenditures related to the military occupation and reconstruction of Iraq, including billions in taxpayer subsidies to administration-connected firms like Bechtel and Halliburton charged with "reconstruction" of what U.S. bombs have destroyed. (See related article page 3).

Has this war improved U.S. security as advertised? The claimed pre-war "imminent Iraqi nuclear threat" has been exposed as a concoction derived from obviously forged documents. During the war, known Iraqi nuclear installations were left unsecured. With UN involvement, these installations could have been closely monitored by international agencies such as the International Atomic Energy Agency. Instead, the unsecured installations were looted by Iraqis, potentially exposing many civilians to radioactive materials and providing an opportunity for terrorists to obtain dangerous weapons.

Having done its utmost to scuttle the already inadequate international network of treaties and safeguards against the use of nuclear and other weapons of mass destruction, the Bush Administration has redoubled its efforts to usher in a new era of nuclear weapons proliferation. It has laid the groundwork for the production of new weapons and is developing doctrines for their use, as incorporated in the Nuclear Posture Review. "Bunker-busters" are planned to execute U.S. "counter proliferation" strategies, despite the fact that many experts have testified that the use of such weapons, intended to destroy hardened subterranean targets, would likely stir up enough radioactive debris to contaminate large numbers of those fortunate enough to have survived a U.S. "surgical" nuclear attack.

Unfortunately, the current Administration has demonstrated a keen ability to manipulate an American populace still reeling from the devastating attacks of September 11, 2001. The coupling of a deteriorating economy with the blank-check military budget and massive tax givebacks to the rich, promoted by Bush, represents a major assault on the quality of our life. We are in the midst of cutbacks in basic education, environmental oversight, and public and environmental health - all key ingredients of what constitutes real security. As such, many peace, justice, and environmental organizations including Physicians for Social Responsibility (PSR) believe that the time is ripe for aggressively reaching our colleagues in the health community and the rest of the American people with alternative visions for global security. At PSR we are calling for **SMART Security: A Sensible, Multi-lateral American Response to Terrorism**.

**SMART**, while addressing the legitimate security concerns of Americans, is rooted in an approach that incorporates a globally based, primary public health preventive focus. It recognizes the interdependence of all those who share our planet and care about its future. As such, **SMART** stresses the necessity of multilateral mechanisms to address the root causes of global violence. It emphasizes the need to control the explosive and increasingly world-threatening expressions of violence that have accelerated in a world whose technology has generalized the capacity for "mass destruction." As opposed to the current U.S. ideologically driven strategies of military/nuclear superiority, **SMART** addresses the terrorist threat through creative, "upstream" solutions that offer a different path than those leading to a planetary dead-end. Accordingly, the **SMART** program calls for increasing support for the United Nations and other arenas for international cooperation. It rejects unilateral preemptive war as a means for resolving international conflict and supports increased funding for humanitarian and sustainable development programs to address world hunger, illiteracy, and unemployment.

The **SMART** platform emphasizes PSR's traditional understanding that global disarmament based on strong, verifiable treaties and other multilateral mechanisms provides a more comprehensive, primary-prevention approach toward the terrorist threat than very expensive and potentially destabilizing efforts that provide an illusion of security.

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Other Things You Might Do With $87 Billion

By Russell Mokhiber and Robert Weissman

You can actually get a few things done with $87 billion, the amount that President Bush has asked Congress to appropriate for expenditures related to the military occupation and reconstruction of Iraq.

For example:

The World Health Organization (WHO) and other UN bodies estimate the cost of providing treatment and prevention services in developing countries for tuberculosis, HIV/AIDS and malaria at $12 billion a year.

The WHO Commission on Macroeconomics and Health estimated that donor investment of $27 billion a year, including expenditures on TB, AIDS and malaria, as well as to eliminate death and suffering from other infectious diseases and nutritional deficiencies, could save 8 million lives a year. That’s eight million lives. A year.

The UN Development Program estimated in 1998 that the annual additional cost of achieving basic education for all was $6 billion.

Prefer to spend some or all of the money at home? Even in the United States, where the dollar doesn’t go as far, $87 billion can perform some pretty impressive feats. For example, according to Business Leaders for Sensible Priorities, it would only cost $6 billion a year to provide health insurance to all uninsured children in the United States. You can provide Head Start and Early Head Start to all eligible children for $8 billion annually. You can reduce class size to 15 students per teacher in all first-, second- and third-grade classrooms for $11 billion a year.

For $87 billion, you could eliminate the backlog of maintenance needs at national parks nearly 15 times over. You could cover more than half the Environmental Protection Agency (EPA)-estimated 20-year investment needs to ensure safe drinking water throughout the United States. You could more than double the annual capital expenditures needed to improve public transportation in the United States, according to estimates of the American Association of State Highway and Transportation Officials. You could provide almost half of the overall funding EPA says is needed to provide clean watersheds in the

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Epidemiology of War

(Continued from page 1)

Genocide and democide-related deaths also rose in the 20th century as the centralization of large political and economic systems and the emergence of new technologies made mass killings possible.

The end of the Cold War unleashed the use of increasingly available small arms in local conflicts. Trends in the nature of recent wars have hardly been examined to date. Though large-scale conflicts are rare, they still account for the majority of all deaths in conflicts. The Iraq-Iran war of 1980-1988 is estimated to have left 450,000 soldiers and 50,000 civilians dead. The Eritrea-Ethiopian conflict in 1999 - 2000 claimed tens of thousands of lives. Multinational forces have also used massive air attacks in the Gulf against Iraq in 1991 and in the NATO-led campaign against Yugoslavia in 1999.

Under the Geneva conventions, the rules of war require the application of principles of proportionality and distinction in the choice of targets. Proportionality involves an assessment of ways to minimize likely civilian casualties when a military objective involves targeting something which is

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APHA PEACE CAUCUS PROGRAM
SAN FRANCISCO, CA  NOVEMBER 17-19, 2003

Patrice Sutton, M.P.H., Program Planner

MONDAY  12:30 PM-2:00 PM       MCC 303

3225.0  War and Public Health
        V. W. Sidel, MD and B. S. Levy, MD, MPH, Presider

12:30 PM  War and Public Health. V. W. Sidel, MD; B. S. Levy, MD, MPH
12:35 PM  Middle Eastern wars and humanitarian disasters. M. Provence, PhD
12:55 PM  Community protective factors and psychosocial resiliency: Community organizing in a
        Colombian war zone. J. E. Skinner, MPH
1:15 PM   Casualties of the war in Iraq. M. McCally, MD, PhD
1:35 PM   Nuclear weapons: The impact of US policy on global public health. R. Gould, MD

Co-Sponsors: PHEHP, SPT1848, ICEHS, IH, CRIH, APIC, SC, MC       CE credits: MD, CH, RN, PH

MONDAY  4:30 PM-6:00 PM       MCC 305

3369.0  Terrorism and Public Health
        B. S. Levy, MD, MPH and V. W. Sidel, MD, Presider

4:30 PM  Terrorism and Public Health. B. S. Levy, MD, MPH; V. W. Sidel, MD
4:35 PM  Assault on civil liberties. H. J. Geiger, MD
4:50 PM  Weapons and terrorism. W. Cukier, MA, MBA, PhD
5:05 PM  Challenges of bioterrorism preparedness for comprehensive public health practice:
        Fissures and faults in local health departments. A. Plough, PhD, MPH
5:20 PM  Adverse impacts of the "war on terrorism" on priority health needs.
        S. M. Shortell, PhD, MPH

Co-Sponsors: PHEHP, CRIH, APIC, SC, MC                     CE credits: MD, CH, RN, PH

TUESDAY  8:30 AM-10:00 AM    MCC 309

4070.0  Violence and Its Impact on Health: An International Public
        Health Problem
        J. Marshall, MD, Presider

8:30 AM  Violence: A global epidemic requiring public health solutions. E. Krug, MD, MPH
8:50 AM  Developing a global framework for violence prevention: Collaboration between the World
        Health Organization, health care providers, and national governments. J. Gilligan, MD
9:10 AM   Violence and Its Impact on Health: An International Public Health Problem. A. Butchart,
        Director; B. Lee, MD
9:30 AM   Discussion.

Co-Sponsors: ACHP, PHEHP, MCH, WC, ICEHS, IH, CRIH, APIC, SC                      CE credits: MD, CH, RN, PH
APHA PEACE CAUCUS PROGRAM
SAN FRANCISCO, CA   NOVEMBER 17-19, 2003

Visit the Peace Caucus Expo Booth 1905

TUESDAY  10:30 AM-12:00 PM   APHA Special Session

4090.0   Public Health and the Pursuit of Peace
B. S. Levy, MD, MPH and V. W. Sidel, MD

In 2002, the Governing Council declared its opposition to military actions in Afghanistan and in other nations as an undertaking that runs counter to the health and well-being of people. The Governing Council called on U.S. authorities to end military actions in Central Asia. The session will begin with a discussion of the public health perspective on the human consequences of war. Observers will give updates on the health consequences of military actions in Afghanistan and Iraq. It will end with a presentation on peace building and prevention. The last part of the session will be an "open mike" to give the audience an opportunity to share their impressions of how APHA can respond to the aftermath of war in Iraq and can advocate for peace.

TUESDAY  12:30 PM-2:00 PM   MCC 303

4161.0   Structural Violence and The Culture of Fear
J. Marshall, MD, Presider

12:30 PM   Culture of Fear. B. Glassner, PhD
12:50 PM   Soft Time in a Hard Place. D. Wood, PhD
1:10 PM    Fear and Loathing In the U. S. Prison System: A Stunning Example of Structural Violence. Sandra (Sunny) Schwartz, Esq
1:30 PM    Imprisonment: Deterrent or Stimulus for Violent Crime? J. Gilligan, MD
1:50 PM    Discussion.

Co-Sponsors: PHEHP, MCH, WC, ICEHS, APIC, SC   CE credits: MD, CH, RN, PH

WEDNESDAY  12:30 PM-2:00 PM   MCC 303

5125.0   Epidemiology of War
R. Garfield, DrPH, RN, Presider

12:30 PM   Epidemiology of war in Iraq. R. Garfield, DrPH, RN
12:45 PM   Epidemiology of War in Palestine. L. S. Jamjoum, PhD, MPH
1:00 PM    TBA.
1:15 PM    TBA.
1:30 PM    Discussion.

Co-Sponsors: PHN, SPT1848, ICEHS, IH, APIC, SC, MC      CE credits: MD, CH, RN, PH

442.0    PEACE CAUCUS BUSINESS MEETING

TUESDAY  6:30 PM-8:00 PM   Marriott, Sierra B
Other Things You Might Do With $87 Billion

(Continued from page 3)

United States, including thorough wastewater treatment, sewer upgrades and non-point source pollution control.

It just so happens, as the Center for Budget and Policy Priorities points out, that $87 billion is almost exactly what all departments in the federal government combined spend annually on education, training, employment and social services. So you could fund that for a year. If you looked at the $87 billion as found money, and wanted to do something unorthodox, you could eliminate California's state budget deficit two times over.

And, you would still have enough left over to enable the Detroit Tigers (baseball's worst team) next year to field a team full of Alex Rodriguez's. (Rodriguez, at $25 million a year, is baseball's highest-paid player. A full roster -- 25 players -- of Rodriguez's would cost $625 million.) We accept that having imposed devastating economic sanctions on Iraq for a decade and twice waged war on the country, the United States has a major obligation to support reconstruction in Iraq. But three-quarters of the president's request is for military expenses, not reconstruction, the request follows a previous $79 billion appropriation, additional requests are certain to follow, and much of the money being spent on reconstruction is being funneled as poorly scrutinized corporate welfare to Bush and Vice President Cheney's buddies at companies like Halliburton and Bechtel.

If one steps back for a moment, it is evident that there is a long list of expenditures that would do more to improve the world, and more to improve U.S. security if reasonably defined, than what the president proposes to do in Iraq.

A strange circumstance has evolved in the United States. Military expenditures can be justified at almost any level. ("Whatever it takes to defend freedom.") Politicians don't say, "Whatever it takes to make sure every child in this country has a decent education."

Or, "Whatever it takes to deal with the worst health pandemic in the history of the world (HIV/AIDS)." When it comes to the military, there is neither a sense of proportion, nor of trade-offs.

This state of affairs is a tribute to the military contractors and political leaders who have ridden to power by instilling fear in the populace. It can be traced in no small part to campaign contributions and lobbyist influence, but the problem runs much deeper than that. Fear has penetrated deep into the culture.

But the administration's overreach in Iraq now offers an opportunity to create a new sense of priorities. It is now even more apparent than it was before the war that Iraq posed no security threat to the United States. And the sums of money requested by the administration -- and more will be coming -- are so extraordinary that they practically demand consideration of alternative expenditures.

After all, you really can do quite a bit with $87 billion.

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SMART Alternatives For Global Security

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While calling for strengthened and adequately-funded inspection and verification regimes for the Biological and Chemical Weapons Conventions, PSR believes that a key component for halting the proliferation of "poor man's nuclear weapons" is a renewed commitment by the U.S. and other nuclear powers to the Nuclear Non-Proliferation Treaty's explicit goal for the complete elimination of nuclear weapons. While pursuing diplomatic approaches to solving current proliferation threats in places like North Korea and Iran, the U.S. needs to set an example for the rest of the world by renouncing the first-use of nuclear weapons and abandoning plans for developing and testing new nuclear weapons.

By taking a firm stand against an endless arms race that devastates the world while squandering precious resources, we can turn our attention to providing the substance of real global security-food, health care, education, jobs. We can promote needed investments in renewable and health-protective energy alternatives that will reduce the growing threat of global climate change. We need to recapture the momentum, energy, and commitment of the millions of us who knew how wrong our government was in its manipulative march towards war. We must try to connect with the rest of Americans who need an alternative vision that transcends mass media-processed fear and loathing of the rest of our common humanity.

Robert Gould, M.D.
Chair, APHA Peace Caucus
President, Physicians for Social Responsibility

SMART security promotes needed investments in renewable and health-protective energy alternatives that will reduce the growing threat of global climate change.

Epidemiology of War

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not exclusively military. Distinction focuses on avoiding civilian targets wherever possible. Attempts to regulate the brutality of conflicts have not kept pace with evolving forms of conflict. Most importantly, international humanitarian law and the Geneva Conventions are focused on states waging war and thus fail to deal adequately with conflicts within states or among multinational coalitions against a single state.

To date, information and analyses of the impact of wars on resident populations has taken place predominantly in the fields of sociology and political science. The experience of collective violence across the globe since the end of the Cold War has been subject only to cursory examination using the methods of epidemiology. These global burden of disease data are subject to numerous assumptions and projections so need to be read with caution.

Please join us on Wednesday November 19th at 12:30 PM for the APHA session, The Epidemiology of War. The session will examine conflicts in Iraq, Palestinian Territories, Kosovo, and Afghanistan. We intend to devote particular attention to innovative methodologies that have been used to document and analyze the impact of these conflicts on population health and the roles of international organizations in providing protection during the conflict and assisting in recovery post-conflict. The session will characterize and contrast each conflict to gain a better understanding of major issues facing us in pursuit of peace and well-being. Please bring your interests and experiences in these and other conflicts to contribute to the session discussion.

Richard Garfield, RN, DrPH, MS, MPH
Bendixen Professor of Clinical International Nursing, Columbia University
Every gun that is made, every rocket fired, signifies in the final sense a theft from those who hunger and are not fed, those who are cold and not clothed.

President Dwight D. Eisenhower 1953