



# Turning Point

Physicians for Global Survival • Médecins pour la Survie Mondiale

## INSIDE

Volume IX, N° 2, Autumn 2003

PGS Chapters from coast to coast	4
US National Missile Defence: A grave public health threat	6
NORTH KOREA: Time for More Talks and Fewer Threats	10
President's Tour, Phase 1	11
PREVENTING NUCLEAR WAR: NO Launch on Warning	12
IPPNW 16 <sup>th</sup> World Congress, Beijing China	15

*"Because of our concern for global health, we are committed to the abolition of nuclear weapons, the prevention of war, and the promotion of non-violent means of conflict resolution and social justice in a sustainable world."*

1985 NOBEL PEACE PRIZE



*« En raison de nos préoccupations pour la santé mondiale, nous sommes déterminés à faire interdire les armes nucléaires, à prévenir la guerre, à promouvoir des moyens pacifiques de résolution de conflit et à instaurer la justice sociale dans un monde viable. »*

PRIX NOBEL DE LA PAIX 1985

Affiliate of / Filiale de :  
International Physicians for  
the Prevention of Nuclear War

## A MESSAGE FROM THE PRESIDENT

Over my term as President this year, I hope the operative phrase will be "personal contact" with PGS supporters, medical colleagues and others who want to learn about our issues and concerns. I have begun my travels across Canada to discuss how we can create a climate of understanding in which the health of individuals can flourish. This is supported by the credible information that PGS provides and the sense of personal power and health achieved through participation in building peace.

There are many important issues facing us today and I would like to address a few that are of particular significance to me.

I want to acknowledge how the **medical student movement** has grown over the last few years. This year we have four medical student representatives to the Board of PGS. Strong student groups have developed at McMaster University, the University of British Columbia and Dalhousie University. There are also nascent groups or interest being expressed at many of the other universities. The students have a terrific new website [www.student.pgs.ca](http://www.student.pgs.ca). The IPPNW student movement has also become highly sophisticated with the current co-Presidents of the "International Medical Students for the Prevention of Nuclear War" from Egypt and the United States.

PGS is an active member of our international federation **International Physicians for the Prevention of Nuclear War (IPPNW)** which gives us a global voice about the continuing threat of nuclear war, our most important issue. The current U.S. Administration's policies are reversing twenty years of concern and activism in this regard. This is clear from the 2002 US Nuclear Posture Review. Internationally we are seeing no movement towards fulfilling the obligations set out in the nuclear Non-Proliferation Treaty (NPT). We are seeing the proliferation of nuclear weapons in the international

community and the clear indication that other countries that want power and authority on the international scene see nuclear weapons as the currency. Billions are spent annually on nuclear weapons, new systems are under development, and legislation being considered in the USA will allow for the expansion of the threat.

In 1983, when I began my involvement with the then 'Physicians for Social Responsibility', the major issue was the nuclear threat. After twenty years in the peace movement, the nuclear message is as urgent as ever. In 1947, the Bulletin of Atomic Scientists set the doomsday clock at seven minutes to midnight - Nuclear Armageddon. After having been re-set at 17 minutes to midnight in 1991, the clock was moved forward to seven minutes to midnight in 2002. ([www.thebulletin.org](http://www.thebulletin.org))

There is growing concern about the **weaponization of space**. In the longer term, if credible international rules are not in place to counter particularly the US efforts to weaponize space, the consequences will be "total dominance on land and sea; in air and space, to protect their vital interests" as outlined in the US Space Command's document *Vision for 2020*.

Discussions about **medical examination teams** have begun within IPPNW, a concept of particular interest to me. It involves teams of physicians travelling to places where there is violent conflict in order to bear witness. There is enormous value in bearing medical witness in critical international situations. It affords a credibility that can help raise public awareness that can alter the focus of international attention. In the case of Iraq, it helped bring the issues of sanctions and the inappropriateness of war against Iraq out of the darkness and into the public dialogue. I and three other physician members of PGS visited that country over the past decade to

*continued on pg.2*

## Message from the President

continued from pg.1

give eyewitness accounts of the terrible impact of economic sanctions.

After several years of the examination of the **root causes of war** by our international colleagues in IPPNW, the flawed economic system has surfaced as the primary agent causing war. A small percentage of people continue to exploit the world's resources and inequities. This leads to the daily death worldwide of 35,000 children because of diseases that could be prevented by the appropriate redirection of the abundance of the earth resources. Increasingly the invisible hand of the marketplace is becoming apparent and the impact of globalization is under scrutiny.

I am concerned too about the increasing **militarization of our society** with its connection to militaristic violence in the world. The media fosters a high level of misinformation that contributes to a climate in which "ruling by fear" can develop. As people become fearful and feel powerless about these

international concerns, they internalize a sense of "learned helplessness". In this environment, they learn too quickly to give up their autonomy to external authority and may also become ill. PGS sees the importance of providing information that encourages positive public action.

PGS is involved in more related initiatives than I can describe here, but you can read about some of them in this issue of *Turning Point*.

The climate is ripe; there are many concerns that need informed citizens to assist in getting the message out to the larger community. PGS contributes to the development and dissemination of reliable information that can give citizens the power to guide their governments, rather than be guided by them. It is this work that I hope to give prominence to during the year of my Presidency.

**Allan Connolly M.D.**

*Dr Connolly is a Vancouver-based community mental health physician.*

## Letters

Dear Dr Santa Barbara,

I want you to know how very much your letter in the spring issue of *Turning Point* (Vol.IX, N° 1) meant to me. I have been having a difficult time for some months now, struggling with what seems to be the gradual dissipation of political will for peace and social justice. Often it seems not just lack of will, but a creeping ideology that is actually gaining ground against tolerance, equality, peaceful negotiation and human rights.

I am a retired professional social worker, aged 87, still actively involved as much as possible, and have been a democratic socialist all my adult life. I have seen so many victories over the years, and have believed that genuine progress was being made on many fronts toward a safe and equitable society - labour safety, social justice and international law. I remember the joy many of us - then young - people felt with the first baby steps of the League of Nations, for example. But now it just seems that so many of these achievements are being chipped away - many simply reversed outright - and the majority view seems to be more and more ultra-conservative, committed to financial gain for the powerful few, by whatever means work most effectively, even including violence.

I have been a subscribing supporter of PGS for some years now and the *Turning Point* has always been interesting. The hope you have expressed in the recent issue, and the examples you gave that have given you reason to keep hoping have made a real difference to my thinking and I wanted you to know.

Yours sincerely,  
Mary (Molly) R. Hancock  
Sudbury ON

### Turning Point

Physicians for Global Survival (Canada)  
Médecins pour la Survie Mondiale (Canada)

#### PGS NATIONAL OFFICE

208-145 Spruce St.,  
Ottawa, ON., K1R 6P1,  
Tel. (613) 233-1982, Fax (613) 233-9028  
E. mail: <pgs@web.ca>  
Website: <www.pgs.ca>

Executive Director ..... Debbie Grisdale  
Donor Relations and  
Outreach Coordinator ..... Kim Boucher  
Office Manager ..... Andrea Levy  
Accountant ..... Roger Coady

#### EXECUTIVE COMMITTEE

President..... Dr. Allan Connolly  
President-Elect..... Dr. Shayna Watson  
Past President.. Dr. Joanna Santa Barbara  
Secretary/Treasurer .... Dr. Katrina Hurley  
International Councillor. ....  
..... Dr. Juan Carlos Chirgwin  
Deputy International Councillor. ....  
..... Dr. Doug Alton  
Student Representatives.....  
Liam Brunham, Patty Belda, Fiona  
Kouyoumdjian, Praseedha Janakiram

#### BOARD OF DIRECTORS

Dr. Neil Arya, Dr. Mary-Wynne Ashford,  
Dr. Barbara Birkett, Dr. Dale Dewar,  
Dr. Michael Dworkind, Dr. Charles King,  
Dr. Eric Notebaert, Dr. Mark Leith,  
Dr. Eric Notebaert, Dr. Jeannie Rosenberg,  
Dr. Sonia Singh, Dr. David Swann,  
Dr. Sheila Zurbrigg

*Turning Point* is the newsletter of Physicians for Global Survival(Canada), a non-profit organization. To receive *Turning Point* and support our work we invite you to join PGS.

All contributions are tax-creditable. Any items for publication such as articles, cartoons, photos or advertisements, should be submitted to the National Office for consideration (in English or French). Manuscripts should be relevant to the above Mission Statement, but do not strictly have to conform to present PGS policy. They must be typed and double spaced or transmitted via e-mail to pgs@web.ca. Gov't Registration No. BN10784-2684-RR0001



# Message du Président

Au cours de mon mandat de Président, cette année, j'espère que le *modus operandi* sera axé sur « le contact personnel » avec les partisans de MSM, nos collègues du monde médical et les autres personnes qui veulent se renseigner sur nos enjeux et nos préoccupations. J'ai entamé une tournée à travers le Canada pour discuter de la façon dont nous pouvons créer un climat propice à la compréhension au sein duquel les gens peuvent s'épanouir en santé. Tout cela est rendu possible notamment grâce à la qualité des renseignements fournis par MSM et grâce aux sentiments de santé et de pouvoir personnels que confère la participation au processus d'édification et de consolidation de la paix.

Il existe un grand nombre de questions importantes auxquelles il nous faut répondre aujourd'hui et j'aimerais en citer quelques-unes qui me semblent tout particulièrement significatives.

J'aimerais souligner combien le **mouvement des étudiants en médecine** s'est développé au cours des dernières années. Cette année, quatre représentants des étudiants en médecine siègent au conseil d'administration de MSM. Les universités McMaster, de Colombie-Britannique et Dalhousie disposent désormais de groupes d'étudiants forts. Il existe également de nouveaux groupes ou de nouveaux intérêts qui s'expriment dans bon nombre d'autres universités. Les étudiants ont mis sur pied un excellent nouveau site Web, à l'adresse suivante : [www.student.pgs.ca](http://www.student.pgs.ca). Le mouvement des étudiants de l'Association internationale des médecins pour la prévention de la guerre nucléaire (IPPNW) a beaucoup évolué et les actuels co-présidents de l'« Association internationale des étudiants en médecine pour la prévention de la guerre nucléaire » viennent d'Égypte et des États-Unis.

MSM est membre actif de notre fédération internationale, l'**Association internationale des médecins pour la prévention de la guerre nucléaire** (IPPNW), laquelle nous permet de disposer d'une voix internationale pour dénoncer la menace constante d'une guerre nucléaire,

à savoir notre thème le plus important. Les politiques de l'administration américaine, aujourd'hui, vont à l'encontre de vingt années de préoccupations et de militantisme à ce chapitre. Cela apparaît clairement dans l'Examen du dispositif nucléaire de 2002. Sur la scène internationale, nous n'assistons à aucune initiative de la part des pays pour s'acquitter des obligations stipulées dans le Traité sur la non-prolifération des armes nucléaires (TNP). Au contraire, nous assistons à la prolifération des armes nucléaires dans la communauté internationale et tout indique que d'autres pays avides de pouvoir et d'autorité sur la scène internationale considèrent les armes nucléaires comme monnaie courante. On dépense des milliards chaque année pour les armes nucléaires, on met au point de nouveaux systèmes et on envisage d'adopter de nouvelles lois aux États-Unis qui permettront la prolifération de la menace.

En 1983, lorsque j'ai commencé à participer à ce qui s'appelait alors Physicians for Social Responsibility Inc., le principal enjeu portait sur la menace nucléaire. Après vingt ans de participation au mouvement pour la paix, le message antinucléaire est plus pressant que jamais. En 1947, le *Bulletin of the Atomic Scientists* annonçait le jugement dernier pour minuit moins sept – c'était l'armagedon nucléaire. La pendule a été ensuite remise à l'heure et devait sonner à minuit moins 17 minutes, en 1991, puis elle a été avancée pour sonner à minuit moins sept, en 2002. ([www.thebulletin.org](http://www.thebulletin.org))

On se soucie de plus en plus de la **militarisation de l'espace**. À long terme, si l'on ne met pas en place des règles internationales crédibles pour contrer précisément les efforts américains de militarisation de l'espace, cela entraînera une « dominance totale sur terre et sur mer, dans les airs et dans l'espace pour protéger leurs intérêts vitaux », comme le soulignait le document du commandement spatial américain intitulé *Vision for 2020*.

Des discussions sur **des équipes d'examen médical** ont débuté au sein de

l'IPPNW et c'est un concept qui m'intéresse tout particulièrement. Il s'agit d'équipes de médecins qui se rendent dans des endroits aux prises avec des conflits violents afin de porter témoignage. Ces témoignages médicaux sont extrêmement précieux dans le cadre de situations internationales graves. Ils confèrent une crédibilité qui permet de sensibiliser le public et, ainsi, de réorienter l'attention de la communauté internationale. Dans le cas de l'Iraq, cela a permis de lever le voile sur la question des sanctions et sur l'incongruité de la guerre contre l'Iraq et d'en faire des sujets de dialogue public. Avec trois autres médecins membres de MSM, je me suis rendu dans ce pays au cours des dix dernières années pour servir de témoin oculaire des répercussions terribles qu'ont eu les sanctions économiques.

Après plusieurs années d'examen des **causes profondes de la guerre** par nos collègues internationaux de l'IPPNW, on s'est rendu compte que ce sont les lacunes du système économique qui sont les premiers éléments déclencheurs de la guerre. Un petit pourcentage de personnes continue d'exploiter les ressources et les inégalités du monde. Chaque jour, cela entraîne le décès de 35 000 enfants de par le monde, en raison de maladies que l'on pourrait prévenir en réorientant, de manière appropriée, les richesses abondantes de la planète. De plus en plus la main invisible des marchés devient visible et l'incidence de la mondialisation fait l'objet d'études minutieuses.

Je m'inquiète de la **militarisation grandissante de notre société** et de la violence militaire qui l'accompagne, dans le monde. Les médias nourrissent un degré élevé de mésinformation qui contribue à un climat au sein duquel on peut « régner par la peur ». Les gens prennent peur, se sentent impuissants face à ces préoccupations internationales et finissent par intérioriser un sentiment de « détresse acquise ». Dans cet environnement, les gens apprennent trop rapidement à renoncer à leur autonomie pour la céder à

*suite à la page 9*

# PGS Chapters from coast to coast

By Kim Boucher

From coast to coast, this is shaping up to be a year of action.

PGS has always had a number of 'chapters' for the purpose of bringing together like-minded individuals to talk about the issues and accomplish activities ranging from letter-writing campaigns to public events. In the past year, though, chapter activities have flourished and new chapters have been born and revived. Here is a brief summary of highlights:

## Hamilton

**Contact: Khursh Ahmed**  
<ahmed@mcmaster.ca>

- In February students associated with the chapter held a **"Musical Night for Peace"** at a local cafe. Wonderfully talented PGS students shared their musical gifts, and April Kam represented the serious side of the endeavour with a slideshow on issues of war and peace. The students contributed the proceeds to the chapter to fund student activities.

- With the support of the Hamilton chapter, **two hikes in honour of Ken Ingham** were held on August 24 in Dundas and Warton.



**Dr. George Kenneth Ingham**  
(1918 - 2003)

## Nova Scotia

**Contact: Anna Stratis**  
<astratis@dal.ca>

- On January 23, PGS-NS held an **"Evening of Discussion with Iraqi Canadians."** The audience was entrusted with personal accounts of the horrific effects of the Gulf War, sanctions, and the prospect of another war on Iraq. The

pleas made that night by 10 Iraqi and Arab people were deeply moving and showed the urgency of the need to resist war and remove sanctions. The feedback from the night was positive, and we hope this will be an important step in the process of raising awareness on the effects of human rights violations caused by sanctions and wars.

- A week-long series of **presentations and a photo exhibition highlighting the consequences of nuclear war** was held in Halifax in March. Entitled 'Connecting the Dots: Surviving Nuclear War in 2003,' the event had a dramatic effect on those who saw it. We're happy to report that the photo exhibition is traveling across the country between now and August 2004: Halifax, St. John's, Ottawa, Toronto, Calgary, Montreal, Saskatchewan, and possibly London and Hamilton. If you'd like more information about this, please email Katrina Hurley at [kfhurley@dal.ca](mailto:kfhurley@dal.ca) or contact the national office.

- To **commemorate the August 6<sup>th</sup> and 9<sup>th</sup> atomic bombings of Hiroshima and Nagasaki**, the chapter organized the "Shadow Project." Shadows were painted on the sidewalks in downtown Halifax (using non-toxic, water soluble paint). The shadows were a memorial to the victims — the intense flash of light and heat from the explosions caused by the atomic bombs vaporized people and left only their pale shadows on the scorched sidewalks and blackened walls of stone. PGS-NS volunteers spent the day handing out literature and talking with people about the need to abolish all nuclear weapons.



**Halifax Shadow Project-4:** PGS-Nova Scotia's 'Shadow Project' in commemoration of the atomic bombings of Hiroshima and Nagasaki.

Ken Ingham (1918 - 2003) was a medical doctor, humanitarian, ecologist and conservationist. He was also a valued PGS supporter over many years. The proceeds from the walk were donated to PGS.

- Chapter students have **given presentations** about nuclear weapons, war, landmines, depleted uranium (the list goes on), and the work of PGS to first-year university students and in area high schools. This project has taken a great deal of work and commitment.

## Toronto

**Contact: Steve Coupland**  
<rr2lions@yahoo.ca>

- The new invigorated Toronto chapter **meets regularly** to discuss PGS-related issues and plan activities.

- The chapter **organized the PGS national meeting** held in October.

- A special **public lecture** entitled *Terrorism, War and Public Health* by Dr. Victor Sidel, co-founder of the US Physicians for Social Responsibility and IPPNW, was organized by the chapter and was well attended.

## Vancouver

**Contact:**

**Charles King** <kingwulff@shaw.ca> or  
**Allan Connolly** <conwind@telus.net>

- The Vancouver chapter is particularly active in engaging **student participation**.
- On August 9<sup>th</sup>, the anniversary of the atomic bombing of Nagasaki in 1945, the chapter participated in a **'funeral march' to remember the victims in Nagasaki** and the devastation to the city.
- Vancouver-based **PGS President Dr. Allan Connolly** has been speaking locally and across Canada on PGS related issues. See the article on his tour on page 11 of this issue.

## Victoria

**Contact: Mary-Wynne Ashford**  
<mashford@uvic.ca>

- A **Lantern Ceremony** was held on August 6. Dr. Mary-Wynne Ashford spoke and a large number of students from the Pearson College Leadership Seminar participated in the event, which was a collaborative effort with other peace groups.
- The chapter has been reaching out to the community by giving a number of **presentations: Caecilie Buhman**, a senior medical student from Denmark, visited in August. She gave a presentation to medical residents about the work of IPPNW students. In October, **Drs. Mary-Wynne Ashford and Elinor Powell** made guest presentations at a Royal Roads University Peace and Conflicts Studies course. **Dr. Neil Arya**, of Waterloo, ON, visited and spoke on Peace through Health at a November 1<sup>st</sup> public meeting; the chapter hosted a potluck dinner the next day.
- On November 11<sup>th</sup> Dr. Mary-Wynne Ashford gave a presentation on "Alternatives to War: Historical Success Stories" at Pearson International College.

## Quebec

**Contact: Eric Notebaert**  
<notebaert.thibault@sympatico.ca>

- The Quebec chapter (Professionels de la santé pour la survie mondiale or PSSM) was revived in July 2003. Wonderful enthusiasm is coming from students of Université de Montréal and McGill. On **August 6** – the day of the atomic bombing of Hiroshima in 1945 - PSSM members went to downtown Montreal and, with the help of other peace groups and friends, handed out 21,000 flyers. People young and old showed interest in our call for peace and disarmament.
- A key activity of the Quebec chapter is to develop more **French-language PGS materials**. So far, we're working on expanding the French section of the PGS website ([www.pgs.ca](http://www.pgs.ca)) and created a brochure. These materials, and more to be developed, will be used at events and conferences including some lined up for this fall.
- The **'Cambodia Project'** is a chapter commitment to help the victims of landmines in



*The Raging Grannies participating in the Quebec Chapter's August 6th Hiroshima Day event.*

rehabilitation centres, with monetary assistance to purchase warm clothing and repellent-treated mosquito nets for the wet season. Fundraising efforts will take place early in 2004.

## Introducing ... Emily Norgang A valued PGS volunteer



*Emily Norgang, a valued PGS volunteer.*

Over the past year, Emily has become part of the PGS team. This 17-year old grade 12 student has been coming into the PGS office on a weekly basis to help with various tasks: organizing our new 'Alan and Joy Phillips Library', assembling our new 'Peaceful Childhoods' kits, contributing her creativity to develop display boards for PGS events, and many other tasks.

Emily isn't volunteering to fulfill a school requirement, or out any other obligation. She's doing it because she wants to help and she's interested in our vision for a peaceful world.

PGS wants to give a special 'thank you' to Emily, and let her know that her help is appreciated.



**There are a number of other active PGS groups that has resulted in activities in Kingston, Powell River (BC), and elsewhere. If your chapter has information to share, please send it to the national PGS office.**

**We encourage all PGS supporters to get involved. Contact us to find out about the chapter nearest to you or how to establish a chapter.**

# US National Missile Defence: A grave public health threat

*Andrew D. Pinto*

*(Year II Medical Student, University of Toronto)*

On May 29, 2003 Canada's Minister of Defence, John McCallum, announced the government's decision to enter into discussions with the United States on possible Canadian participation in plans for ballistic missile defence (BMD). This was a significant change in attitude towards US National Missile Defence (BMD), and many have speculated that it was intended to placate our southern neighbour, after refusing to support the invasion of Iraq. This issue, unlike the war in Iraq, has had little public interest or opposition. It is quite abstract and slower moving, with a timeline of many years. Also, inherently, "defence" sounds like a positive thing, and something Canadians should support. However, BMD is one of the most dangerous ideas the US military has conceived, and has the potential to cause a great deal of suffering and harm.

To increase awareness of BMD, a working group of students has come together to research the issue under the following topics: technical aspects, political implications, economic implications, public health implications and addressing counter-arguments. Below is a brief summary of some of the findings. The group also has worked extensively with a national coalition, No Weapons In Space (NOWIS) [www.nowis.org](http://www.nowis.org), on an ongoing advocacy campaign.

Missile defence has a long history, stretching back to the 1967 Lyndon Johnson "Sentinel" project, followed by Nixon's "Safeguard", Reagan's "Star Wars" and Clinton's "Ballistic Missile Defense Organization". The common idea is to create a system to track and destroy incoming intercontinental ballistic missiles (ICBMs), which might possibly be carrying nuclear warheads. The system would be directed by US Space Command, and be made up of interceptor mis-

siles which would attack the incoming missile in its boost phase or in mid-course, air-borne lasers and an enormous network of satellites and radar stations. While seemingly good in theory, such a system is all but impossible to create. The analogy of requiring "a bullet to hit a bullet" hints at the level of precision needed. The system would also be required to distinguish the real warhead from multiple decoys. A great number of scientific and military experts have indicated how extremely problematic such a system is, including the Union of Concerned Scientists and the American Physical Society. However, the US military has pushed ahead time and again, despite failed tests and lack of evidence, and has envisioned a "multi-tiered system" which would "evolve over time". This conveniently side-steps any need to prove that BMD works, and permits the program to continue, even towards the weaponization of space.

This latter issue is indeed a plausible outcome, as many aspects of BMD could be used as weapons against ground-based targets, rather than merely for "defence". Space would then become the next theatre of war, and the ultimate "high-ground" in military situations. Depending on the missiles location in space the Outer Space Treaty and the Moon Treaty could be violated. While the current US administration has shown little regard for such international agreements, Canada should be concerned, as a member of the Missile Technology Control Regime (1987), and an advocate of the Hague Code of Conduct against Ballistic Missile Proliferation (2002) and the Geneva Conference on Disarmament. In addition, BMD countries like Russia and China to build up their weapons arsenals and research new missile technology so as to be able to

overwhelm any system the US creates. This could put further strain on the already severely weakened nuclear Non-Proliferation Treaty (NPT).

As with other cases of weapons proliferation, BMD poses an enormous public health threat. It encourages further militarization of our planet and drains off funds that could be better spent on health, environmental and social needs. Several sources suggest that the final price will be between \$200 billion and \$1 trillion, but it is impossible to know for certain. Not only is this an enormous waste, but it fuels the military industrial sector.

Canada will likely not be asked for financial assistance; instead the US administration seeks something else: a Canadian stamp of legitimacy. Ultimately, in the name of global security, non-proliferation and public health, Canada should be a good neighbour and refuse to take part in BMD. In addition, Canada should work with other nations within the UN Conference on Disarmament to achieve a treaty banning the weaponization of space.

In conclusion, BMD will cost the USA, Canada and the world, financially and in terms of global security; will likely not work to defend against incoming ICBMs but could easily be used to weaponize space and; may lead to an accelerated arms race. For all these reasons and more, Canadians should say NO to BMD!

Visit [www.nowis.org](http://www.nowis.org) or [www.ceasefire.ca](http://www.ceasefire.ca).

# Child Soldiers in Northern Uganda

*Julia Raudzus M.D.*

Funding from PGS's Tom Perry Educational Fund helped pay my way to work in northern Uganda this past spring. I was to do some evaluation of a peacebuilding project of CPAR (Canadian Physicians for Aid and Relief), a Canadian based non-governmental organization. The project attempts to facilitate community reintegration for child soldiers. However the security situation was quite unstable so it was not safe for me to travel in Gulu District.

Instead I conducted interviews at a reintegration centre run by international non-governmental organizations (NGO) in Gulu Town, and met with returnees who had been through CPAR's vocational training program. I gathered data, although not enough to draw any real conclusions. I also advised on a newly-funded project for which I had written the proposal 4 years ago. This program looks at disseminating information in rural areas from a learning centre with internet, radio, phone access. I also helped write new project proposals around youth and HIV prevention and just heard that one was recently funded.

Since 1986, extensive areas of Northern Uganda have been severely affected by the on-going conflict between government security forces and various rebel movements, the most significant at this time being the Lord's Resistance Army (LRA). The root causes of the conflict are complex and multidimensional in nature and the fighting has had many negative consequences for local populations.

Massive population dislocations have occurred as people flee the fighting. In Gulu District, more than 300,000 internally displaced persons are residing in government camps, local trading centres and Gulu Town. Estimates from various sources indicate that between 8,000 to 10,000 children have been abducted and forced to join the LRA rebels. While in LRA captivity, the abductees are

physically and mentally abused, and are commonly forced to commit numerous atrocities, including returning to their home villages to kill relatives and friends.

These children, having been released by or having escaped from the rebels, face significant difficulties. Most returnees suffer wounds, STDs, malnutrition and other illnesses. Often, their families have been displaced or have died. Or if the family is located, often it is suspicious that the child had been a willing collaborator with the rebels. The anger, frustration and search for vengeance by families who have had relatives killed by rebels forces, including child soldiers, is great and makes it difficult to break the cycle of violence.

There are few services available to address the mental and physical needs of returnees and to facilitate their full reintegration into their communities. If the existing reintegration centres could operate at full capacity they would be a haven for returning child soldiers. The centres offer what they can, but the on-going instability in Northern

Uganda limits their work. Children are only able to stay 6 weeks and from there they must make their way home to a community that may or may not accept them.

The ongoing conflict limits the work of the NGOs there and makes it extremely difficult to create a sustainable peace. Northern Uganda has had 18 years of rebel warfare and much of its infrastructure has been destroyed. Peace efforts have been thwarted and the situation largely ignored by the international community.

It is amazing to me that the plight of innocent children does not draw greater public appeal. The Tom Perry Education Fund, provided essential financial support to facilitate my research project in Northern Uganda. I am continuing with advocacy work here in Canada surrounding the issue of child soldiers by attending conferences and organizing a speaking event featuring Lloyd Axworthy as a keynote speaker in March 2004.

*Julia Raudzus was a fourth year UBC medical student at the time of this experience in Uganda.*

---

## Peaceful Childhoods Kits Well Received

This fall PGS distributed a kit of materials entitled *Peaceful Childhoods*, developed for the use of parents, health practitioners, child care workers, teachers and anyone else who cares about children and the future. The response to the kit has been very positive. The kit was inspired by our hope that children reared nonviolently will grow into caring and non-violent adults who are able to help achieve a more peaceful world.



The kit contains 4 brochures

- *Children and the Media: Choosing Peaceful Story Telling\**
- *Guns and Children: What Parents Need to Know \**
- *Children and War Toys: Encouraging Peaceful Play*
- *Peaceful Childrearing: Fostering Peace in Our Homes*

The kit also contains a *Violence-free Zone* poster, *Family Covenant of Non-Violence\**, and a sheet listing additional resources. The *Violence-free Zone* poster can be displayed in waiting rooms, classrooms or playrooms to encourage peaceful play and to indicate an area where violent toys, games or video games are not permitted.

Physicians, church groups, child care and family resource organizations and community groups have shown strong interest in the kit and its contents and ordered additional copies. Copies of the entire kit are available in limited supply; but the brochures are available in quantity. Please contact the office [pgsadmin@web.ca](mailto:pgsadmin@web.ca). Several of the items are also available in French and we will be translating the other brochures into French in the near future.

*\* Aussi disponible en français.*

# Violence, *THE* Public Health Threat of the Millennium – An Ounce of Prevention

*By David Swann M.D.*

These are terrifying times- in the past decade of wars: 40 million deaths (now approaching 75% civilians) according to the 2003 *State of the Future* publication by the United Nations University ([www.acunu.org](http://www.acunu.org)); 45 million refugees - countless injured and disabled. Where are the resources to deal with this profound public health catastrophe? Where is the acknowledgement of this as a preventable international catastrophe beyond any other public health losses such as SARS and West Nile virus. It's right up there with AIDS and climate change in its implications for people and the planet.

We are a culture of violence and it is time we acknowledged the truth about ourselves, smug as we may be as Canadians in our "middle power" status. The *State of the Future* documents a 400% increase in media violence in the past decade as well. We continue to shrug our shoulders about the lack of peace in our own country. We continue to sit on the fence internationally. Investing in military solutions continues to displace the primary objective of creating security for all people on the planet.

Military investments on the planet continue because they feed fear and they employ people. The explicit cost is \$2 billion/day US that is accounted for. But this is a fraction of the real cost. How, you say?

1. salaries, research, production, testing, training, deployment, and use of weapons and defence against them – this is what we measure – our GNP; this is **what counts! But here are the other real costs**
2. destruction of people, property and environment
3. cost of rebuilding – **all adds to our measure of GDP – proving that war is good for the economy!**
4. opportunity lost for developing people, constructive relations, food production and human services

## Bad News

Our challenge is to bring the bad news in a way that people can hear it, feel the anxiety this must generate, yet feel supported by others who see the possibility of action to change. We need to convey a sense of hopeful urgency. Yes, the diagnosis is troubling and it takes courage to face the truth, but we will stay with each other as we deal with the stages of grief and fear in knowing the truth – shock-denial-anger-depression-acceptance.

"We have seen the enemy and it is us" said Pogo. We are the greatest public health threat on the planet. We are also the second "super-power" as demonstrated in the streets of most major cities in the world against the war in Iraq. Our actions and inaction make a difference in relation to creating the conditions that contribute to basic needs, to health and to peace- the conditions that would prevent war and lead to real human security.

## Symptoms and Cause – The Chronic Headache

As physicians, we should not be satisfied removing the symptoms of headache without knowing the cause. Many headaches have no pathological basis but this does not mean the cause is trivial, or the consequences of ignoring them irrelevant. Violence is a symptom at both individual and the collective levels. Underlying cause lies in unmet basic needs, lack of freedom or fair treatment in family, school, workplace, violent environments, and lack of vision for what is possible in our lives.

At the systemic level underlying cause would mean addressing the growing chasm between rich and poor, north and south, and widespread poverty related to systemic violence of economic globalization, decline in environment, resource depletion and climate change.

Each one of us contributes to social en-

vironments that either confront injustice and disease, or ignores them; treats symptoms alone or explores underlying cause; envisions a world where everyone is equally valued or one in which there are the privileged who accept the status quo.

## Good News

The good news is that, as part of the problem we are also part of the solution. We may not know completely what needs to be done, but we know some basic truths which we can build on:

- Peace is more than the absence of conflict – just as health is more than the absence of disease.
- The conditions for health are the same as for peace- basic needs, justice, freedom, income, human services, etc.
- The health of the planet is too important to leave to politicians. (just as our personal health is too important to leave to our practitioner.)
- Politics determines living conditions – life is political
- We must shift from symptoms to cause: poverty, unfair trade, militarization for profit. This is true at home, work and in the community.
- We must recover a vision of peace and justice for all beginning with our own health "fully human, fully alive".
- We must get involved to contribute to a living democracy

Many people in our world have lost hope and do not realize it. It is evident in their priorities however, where they spend their time and money and where they point the finger of blame for the conditions we have all created. Cynicism is pervasive and is as damaging as overt violence in its effect on others. If peace is a priority and if we still hope, then politics must become a regular part of our discourse and our way of life. Peace education or, rather, lived peace must also

# PEACE MEDICINE ABOVE THE ARCTIC CIRCLE

by Joanna Santa Barbara M.D.

become part of our daily experience at home, school and in the workplace. It's not enough to talk about conflict resolution skills. Real change comes when individuals confront unhealthy issues in their daily relationships, communities and national political scene and decide to share responsibility for correcting it. "Be the change." Gandhi

## One Prescription for TLC

Change begins at the individual level and extends to the home, work, community and planet. What is needed simply and fundamentally (assuming that hope still exists):

**Truth** – being honest with ourselves and our world about what we see, what we know and what we want for ourselves and the planet.

**Love** – learn to love ourselves in all our failings and brokenness; to love others and to allow them to extend their love to heal us.

**Courage** – to think our thoughts, speak our truth and take actions needed to address the important values of our lives – especially peace, justice and human rights for all.

These are terrifying times in our Brave New World and we need people of faith and courage, willing to look the "beast" in the face - see ourselves as neither angels nor demons but persons with capacity, caring and courage, especially when we act with others.

We are given a sacred trust to future generations and we will not squander life and we will not give up hope on the journey to becoming fully human. We choose to take responsibility for our lives, our thoughts, our words and our actions and recognize the trivial- to advance genuine peace starting with myself.

*Presented by David Swann, a public health physician, at the first Peace Educator's Conference in Calgary in October 2003.*

Klaus Melf has a dream - that all Norwegian medical students will learn something of "peace medicine", the better to work for peace through the health sector. Klaus is a very tall young physician who worked closely with IPPNW during his student days in Germany. He later worked in Norway, and for the last two years in Tromsø, a beautiful town on an island in a fjord above the Arctic Circle. When Tromsø University, the most northerly in the world, began a Master's programme in Peace Studies the year before last, Klaus enrolled. He judged that, continuing his highly conserving and partly self-sufficient lifestyle, he could work three months a year and be a full-time student the rest of the time.

Klaus's thesis topic is on the realization of his dream. I have the pleasure of being his external supervisor, and as such, was invited to teach for a week at Tromsø's Centre for Peace Studies. During a very busy teaching week, we held several meetings to forward this plan in Tromsø. At the first, attended by the Rector of the university ( a physician and IPPNW member), the Vice-Rector, the Director of the Centre for Peace

Studies and the Director of the new Centre for International Health, among others, it was decided to begin with an elective on Peace Medicine. A tentative curriculum would include the impact of war on human health. The student would learn something of the fundamentals of Peace Studies such as understanding violence, power, conflict and peace, conflict analysis and ways of dealing with conflict. The student would learn the many possible ways of working for peace through health, as well as how to avoid inadvertently making things worse. There would be time spent on values and ethics in relation to such work, cultural differences and ways of evaluating its efficacy.

The following day, Klaus and I met with Prof. Ole Mjos, an influential member of the faculty, and the internal thesis supervisor. He had become familiar with McMaster University's Peace through Health ideas. He was pleased with the decision to shape an elective in Peace Medicine, but convinced that all medical students should be exposed to these ideas. He proposed to have some lectures on these topics introduced into early stages of medical training, and he believes he can champion this idea. There was considerable eagerness to continue a relationship with the McMaster Peace through Health group.

The week ended with Klaus's dream moving steadily towards realization in Tromsø.

## *Message du Président* de la page 1

une autorité externe et peuvent aussi tomber malades. MSM considère qu'il est important de fournir des renseignements qui motivent les interventions publiques positives.

MSM participe à d'autres initiatives connexes que je ne peux pas décrire ici, mais vous pouvez vous renseigner sur certaines d'entre elles dans ce numéro de *Turning Point*.

Le climat est propice. Il existe de nombreux enjeux pour lesquels nous avons besoin de citoyens informés pour nous aider à diffuser le message auprès de la collectivité

au sens large. MSM contribue à l'élaboration et à la diffusion de renseignements fiables qui peuvent donner aux citoyens la possibilité de guider leurs gouvernements plutôt que de se laisser guider par eux. C'est ce genre de travail que j'espère mettre en lumière pendant mon année à la présidence.

**Allan Connolly M.D.**

*Le Dr Connolly est docteur en santé mentale en milieu communautaire à Vancouver.*

# Time for More Talks and Fewer Threats

by Mary-Wynne Ashford, M.D. and John Price

North Korea is back in the news after talks with the US, Russia, China, Japan and South Korea ended in a stalemate. Are the North Koreans irrational and capricious, or are they playing the only card they have to try to end fifty years of US hostility?

At a recent workshop on the nuclear crisis, Nohyun Kwak, a professor of Korea National Open University and former commissioner on the National Human Rights Commission of Korea suggested a surprising scenario: "My dream these days is that if Bush really threatens to bombard North Korea, then perhaps a million South Koreans will just walk across the 38th parallel and become human shields in Pyongyang. Maybe that is how Korea will become reunited."

Such a startling statement reflects not only a yearning for Korean reunification but also the increasingly critical view of the United States found among many Koreans in the south. Freed from the authoritarian regime that ruled south Korea until 1988, many are re-examining a history in which imperial powers, including Japan and the United States, trampled on Korean sovereignty for nearly a century.

This yearning is not only voiced by the South Koreans. Peaceful re-unification of the two Koreas is the constant theme of speakers from North Korea at international meetings of nongovernmental organisations. Korea has a long history of occupation and interference that bears on the present conflict.

The Japanese occupied Korea from 1905 until their defeat in the Pacific War. Their treatment of the Koreans has left a legacy of enduring anger. The Japanese forced an estimated 200,000 "comfort women" to become sexual slaves to the Japanese army;

hundreds of thousands were conscripted as forced labourers; and approximately 10,000 of these were killed in the atomic bombing of Hiroshima.

After the war, the United States and the Soviet Union divided Korea along the 38th parallel. The North became Communist and in 1950 Kim Il Sung, the rebel leader who had fought the Japanese for decades, tried to forcibly reunite the peninsula. In the Korean War that ensued, US bombers flattened every village and town in the North. Three million Koreans died, 70 percent of whom were civilians. The war ended in an armistice; there is still no peace treaty. For decades, the United States stationed nuclear missiles in the south, aimed at Pyongyang, and still maintains a force of some 37,000 troops there.

North Korea, which has few sources of energy, lost its oil supply when the Soviet Union fell in 1991 and Russia demanded hard currency North Korea could not provide. Desperate for fuel, North Korea negotiated the 1994 Framework Agreement with the United States. Under the terms of that agreement, North Korea would forego its nuclear option in return for U.S., Japanese and South Korean assistance in the construction of light-water nuclear reactors. Oil was to be provided as an interim measure until the new plants came on line. In return North Korea mothballed its Yongbyon nuclear facility.

Unfortunately, neither side fulfilled the terms of the agreement. Republicans in the United States began to undermine it within ten days of signing. They delayed oil deliveries and the construction of the nuclear reactors. The US also refused to provide formal assurances to the DPRK, against the threat or use of nuclear weapons by the U.S. The North Koreans, for their part, began a nuclear program that may now include nuclear weapons as well as nuclear power. On January 29, 2002, Bush denounced North Korea as part of an "Axis of Evil", and subsequently put a formal stop to oil shipments and aid to the north.

The impact on a modern northern population of the sudden withdrawal of oil is dramatic. Electricity generation is severely curtailed and cars too costly to run. Pyongyang is a city of some 2.3 million people. A six

lane divided highway leads out of the city. Today, a handful of cars, mostly vehicles of aid agencies or VIP's, pass by thousands of people forced to walk or wait for scarce public transport. At night, the roads are dark, most buildings are unlit, and the view down from a hotel window reveals occasional car lights like ships floating on a sea of black. Famine and floods have decimated the population in the last decade making it dependent on foreign aid for survival.

Health care in North Korea has been devastated by the energy shortage. The consequence of the lack of electricity and hard currency is that doctors have been forced to resort to traditional Korean Medicine, with herbal remedies and acupuncture as their main treatments. They can no longer practise Western Medicine because diagnostic equipment, laboratory systems and modern treatments all require electricity and chemical reagents or medicines that are no longer available.

Now, after 9 years of energy deprivation, the North Korean Government presumably sees nuclear energy as the only viable option, and nuclear weapons the only possible deterrent to the US. Both countries have boxed themselves into bad choices. There are many non-military solutions that could be considered, particularly because both North and South Korea want reunification. Both Koreas need support for developing their peace process in a way that does not result in the deaths of more civilians.

The game of nuclear brinkmanship is stupid and dangerous. The US and North Korea must sign a mutual, verifiable non-aggression pact with the support of the other regional powers. While plans develop for a staged reunification of the peninsula, the North Korean people must not start another winter without food, heat and medical care. Surely a century of imperial domination is enough for any nation.

*John Price is associate professor of history at the University of Victoria and a frequent visitor to Japan and South Korea. Mary-Wynne Ashford is Past Co-President of International Physicians for the Prevention of Nuclear War, and has led three delegations of doctors to North Korea. This article was originally published in the Victoria Times Colonist.*

# 'TOWARDS A NUCLEAR WEAPON-FREE WORLD'

by Debbie Grisdale

Canada voted 'yes' at the United Nations First Committee on an important resolution for a nuclear-weapon-free world and was the only NATO member country to do so.

In October, the New Agenda Coalition (Brazil, Egypt, Ireland, Mexico, New Zealand, South Africa and Sweden) out of continuing concern for the abolition of nuclear weapons tabled a resolution entitled *Towards a nuclear weapon free world: a new agenda*. The voting results were: yes-121, abstain-6, no-38. The final vote on the resolution will take place later in November at the UN General Assembly – but the First Committee vote is a good indication of the final outcome.

This resolution is important because it is based on and seeks to preserve the nuclear Non-proliferation Treaty (NPT) which is in an extremely shaky state. We are witnessing the spread (proliferation) of nuclear technology among countries that want nuclear weapons and the development of new weapons by countries that already have them. The resolution emphasizes the undeniable link between non-proliferation and nuclear disarmament.

PGS and other non-government organizations watched this vote carefully because of the potential significance within NATO, which is committed to nuclear weapons for the 'foreseeable future'. Canada was the only NATO state to vote 'yes' on a very similar resolution in 2002, and this year several other non-nuclear NATO states (Germany, Norway, Belgium) were considering moving to a 'yes' vote in 2003. To have a greater number of NATO states supporting this resolution on nuclear disarmament would be important for efforts to challenge NATO's policy on nuclear weapons. Unfortunately, while Canada stayed the course, all the other non-nuclear NATO countries abstained again this year. But, as you will read below, on closer examination Canada's voting pattern gives a 'mixed message'.

## Canada votes for a new agenda but discounts negative impact of BMD

Just What Was Said .....

When a resolution goes to vote in the UN, a country can request that a part of the resolution that is of concern to it be voted on separately. Canada did that with this resolution and requested a separate vote on preambular paragraph (PP) #20 which addresses the impact of missile defence on nuclear non-proliferation and disarmament and weapons on space. This action and the explanation below suggest that Canada sees no negative impact from BMD on these issues. PP#20 reads as follows:

"Expressing concern that the development of missile defenses could impact negatively on nuclear disarmament and non-proliferation and lead to a new arms race on earth and in outer space and stressing that no steps should be taken which would lead to the weaponization of outer space,"

**This is the explanation of the vote** provided by Canadian Ambassador for Disarmament Paul Meyer after the vote on the whole resolution L. 40/Rev.1\* *"Towards a nuclear-weapon-free world: a new agenda"*:

*"I have asked for the floor to explain the Government of Canada's position on resolution L. 40/Rev.1\* "Towards a nuclear-weapon-free world: a new agenda". Canada is again pleased to support this resolution and shares strongly the attachment of the New Agenda Coalition to the 13 Practical Steps towards nuclear disarmament agreed by all NPT States parties at the 2000 NPT Review Conference. In Canada's view, undertaking these thirteen practical steps remains an urgent matter for the international community in order to implement Article VI of the NPT. Canada did however call a vote and abstain on PP20 due to the fact that my Government is of the view that current developments in missile defences do not presume a negative impact on nuclear disarmament and non-proliferation. Given the new threats of the proliferation of missiles and WMD that the international community faces, we believe that cooperation in this area could complement non-proliferation efforts. As was the case last year, Mr. Chairman, our vote of support for this resolution reflects Canada's longstanding nuclear disarmament and non-proliferation policies and practices and is consistent with our commitment to the nuclear disarmament and non-proliferation regime whose cornerstone is the near universal norm established under the NPT."*

---

## President's Tour, Phase 1

By Allan Connolly M.D.

In October, I completed a three week odyssey from Coast to Coast, speaking to a variety of medical students, physicians and public audiences about PGS issues.

There were several goals of this tour:

- To expand the membership of both the physicians, medical students and others involved with the Physicians for Global Survival.
- To meet with student health professionals and other medical students working in groups other than PGS who have simi-

lar and overlapping concerns, and to encourage their participation and make them aware of how PGS's concerns and their concerns complement each other.

- To bring the importance of the nuclear threat as a public health issue to the forefront of our organization. PGS must continue to expand its membership so the collective voice of physicians can once again highlight the serious nuclear threat that has developed internationally, with all of its serious ramifications.

*continued on pg. 14*

# NO Launch on Warning

By Alan F. Phillips, M.D.

I want to explain an idea which I have worked on. You may find it awkward or unpleasant thinking with me, because I try to see things the way our opponents see them, the hawks and the military.

“Launch on Warning” means launching rockets to retaliate for a rocket attack before the attack has arrived, while the incoming rockets are still on their way. The biggest risk of nuclear war between USA and Russia is a radar warning of enemy rockets on the way, the launch of retaliation before the incoming rockets arrive ... and THEN finding out it was a false warning after all. I am asking for a change of policy to “NO Launch on Warning”, for both sides.

Everyone in the business knows about the risk, and that is a principle reason people like The Canberra Commission, The Brookings Institute, Center for Defense Information, ... recommend “de-alerting”. De-alerting has been called for by many people, but in general they seem to have missed certain points.

Three points that are not being made, except by me, are these:

1. “NO L-o-W” is not de-alerting, nor anything like it, but either one would prevent accidental war.
2. “NO L-o-W” does not need a treaty, or verification. This is a big difference, de-alerting would take years to put into effect.
3. “NO L-o-W” does not impair deterrence.

We shall come back to those points.

Now please keep these rather obvious facts in mind:

- A big nuclear war would destroy civilization. The only man-made event that is known to be able to destroy civilization in one afternoon is a nuclear war between USA and Russia.
- Nuclear War could start by accident.
- Several times it has nearly happened by accident. We are not sufficiently protected from accidental nuclear war: several

times in the last 50 years, and at least once in the last 10, it has nearly happened.

- NOBODY wants the end of civilization to happen by accident. Certainly not the military, nor governments. Both sides have taken a lot of care to prevent that, but they have not tackled what is now the biggest source of risk. The military are obsessed with the belief that nuclear deterrence has to be perfect, and that it is essential to launch retaliation before the incoming first salvo arrives (i.e. L-o-W). This belief is untrue.
- A launch of “retaliation” to a false warning would start the war. In the present international situation, that is the likeliest reason for the final disaster to happen.
- L-o-W is the ONLY way that could happen. If you wait to retaliate until a warhead arrives and explodes, then it cannot possibly have been a false warning. The chance of accidental war happening (from that cause) can therefore be made zero by both sides abandoning the policy of L-o-W. The risk is halved by just one side abandoning L-o-W.

So we agree the policy of L-o-W is too dangerous. That is why important committees like the Canberra Commission and Brookings Institute recommend “de-alerting”. De-alerting means introducing a forced delay between a decision to launch, and the actual launch being carried out. A radical method of doing it is to take the warheads off the rockets and store them at a distance. There are other schemes for introducing a shorter delay, like piling rocks on the lids of the silos. Any such scheme absolutely prevents L-o-W if it is honestly carried out.

The problem is that the two governments and the two militaries are completely fixed on the idea of deterrence. They won't give up deterrence, and you cannot have reliable deterrence if the retaliation has to be delayed.

The important point that I make, the key to the whole idea, is that: **NO L-o-W does not abandon deterrence.** L-o-W is not necessary to maintain deterrence. It isn't that I like nuclear deterrence, but I want to propose just one change, to get rid of the ridiculous risk of ending civilization by accident. The change only alters one item of policy. There should be no logical objection to it, even from the hawks.

The influential committees that I referred to have not clearly distinguished between NO L-o-W and de-alerting. NO L-o-W does not de-alert the rockets. They can be fully prepared for launch during the flight of the incoming missiles, just as they would be with L-o-W. The only difference is that the final turn of the key is delayed until the first nuclear explosion is detected, and that is instantaneous.

(To keep this easy to think about, I have to speak in terms of ‘us’ and ‘them’, ‘we’ and ‘the enemy’.) As long as the enemy believes retaliation will come, it makes no difference if it starts on its 40-minute journey a couple of minutes before the attack arrives, or a few seconds after it arrives. The whole point of deterrence is that the enemy will not launch an attack if he knows deterrence will come.

*Why then did both sides ever adopt the dangerous policy of L-o-W?*

They did not do it lightly. On the US side at least, there was much argument about it, and some senior politicians and advisors, including Robert McNamara, Kennedy's Secretary for Defense, said it was altogether too dangerous, it was immoral, and USA would never adopt such a policy.

There were in fact two quite good reasons to adopt L-o-W, but not good enough to justify risking the end of the world. They went ahead and did it, some time in the 60's.

One reason was electro-magnetic pulse (EMP). As a reason, it has a fallacy which is a bit technical. I will come back to it if I have time.

The big reason was that nuclear weapons are so destructive that the military were afraid they might not be able to retaliate after the initial salvo had done its damage. So, to be safe, and to convince the enemy that retaliation is certain, they planned, and let it be known, that they would launch re-

tialiation before any attack even arrived.

I am not going to argue whether L-o-W was sound policy in the 60's; I am arguing that it is quite wrong from any reasonable point of view now - and that is why I think the two governments and militaries might be persuaded to change it.

Their fallacy is this: the military plan and act as if the fate of their country hangs on the certainty of retaliation **being achieved** whatever the attack. That is not the case. Once a nuclear attack has been launched, their country is going to be destroyed anyway. The retaliation makes no difference to the complete disaster their country is going to suffer in the next half-hour: the rockets are already on their way. The only thing that readiness to retaliate achieves is **deterrence**. If any real attack comes, deterrence has already failed.

Deterrence only fails (against a rational enemy) if the enemy has reason to believe he can almost certainly prevent retaliation, i.e. **not** that retaliation **may fail**, but that it **almost certainly will fail**.

*Why can the enemy not be certain that their first salvo will prevent retaliation?*

At present both sides have more than 2,000 warheads at full alert, ready for L-o-W. Five percent of those hitting their targets is enough to completely destroy either country. Neither side can be really confident that its first salvo is going to disable more than 95% of the retaliatory force within a few seconds of the arrival of the first warhead.

I have explained items "1" and "3". The reasons that NO L-o-W does not need verification or a treaty are quite simple.

2. "NO L-o-W" does not need a treaty, or verification.

What we have to persuade them, the military of our side, is that NO L-o-W does not impair deterrence. As long as it would not impair deterrence nor give strategic advantage to the enemy they should have no objection — and remember, NO L-o-W is removing at a stroke the risk they have worried about for 40 years, an accidental nuclear war that destroys everything they value (as well as their old enemy). So it is the kind of thing they want.

*Why does NO L-o-W not spoil deterrence?*

For deterrence to fail, the enemy needs to be sure that he can do a disabling first strike without his country being destroyed by retaliation. It makes no difference to our side if we fail to achieve retaliation. If the warning is a true one, our country is going to be devastated anyway within half an hour; and if it is a false warning then we certainly do not want to fire off "retaliation" and get destroyed in turn an hour later.

Now, the enemy's problem about doing a first strike is that he has to be reasonably sure of disabling more than 95% of our warheads before we can launch them. If we are de-alerted, and he has an hour or two, or a day or two, to disable us, he may think he can do it. So it is vital for **de-alerting** to be equal and verified on the two sides. But if we are **not de-alerted, but simply at NO L-o-W**, we shall launch a devastating strike within seconds of the first explosion. The enemy trying to disable our retaliation would be faced with the impossible task of disabling almost all our capacity simultaneously. So he is still deterred.

There is another problem for him. Even if he thought that he could achieve that al-

most impossible task, how would he know we have not cheated, and gone back to L-o-W?

He could only feel sure about that if there was an agreement and reliable verification. So you see, a formal agreement with effective verification might impair deterrence; but not just an unverified change of policy.

Assuming the risk of false warning is about the same for both sides, then if our side adopts NO L-o-W without telling anybody, that halves the risk of accidental war, and gives us no strategic disadvantage at all.

Suppose our side does change to NO L-o-W, how do we persuade the Russians to do the same? Well perhaps our arguments and example may be enough, when they realize they still are not tempted to try a First Strike. Or perhaps it is a job for the Russian people.

Meantime, it is a job for the people of our side to persuade the military of our side to halve the risk right away. It is a matter of concern for all the people of the world.

*A presentation given by Dr Phillips to PGS National Meeting, October 2003*

## PGS AND IPPNW COLLABORATE ...

# International Health Campaign on Small Arms and War Prevention

PGS and IPPNW recently received funding from the Department of Foreign Affairs (DFAIT) for an 18 month international health campaign on small arms and war prevention entitled *Aiming for Prevention*. The project, to be managed out of the IPPNW office, seeks to mobilize physicians and public health professionals in Africa, Latin America, Asia, and Eastern Europe (including the Former Soviet Union) in a coordinated effort to document the public health impact of small arms/light weapons. The goal is also to contribute a much needed health perspective to policy debate on the small arms issue. The project is a human-centered approach to the small arms problem, and will promote health, human secu-

urity, and a strengthened role of civil society in communities vulnerable to armed conflict. The long term goal is to substantially reduce deaths and injuries from small arms on a global scale.

The Campaign will help organize and provide useful tools to health professionals concerned with the prevention of death and injuries from small arms. Some of the activities associated with the project include the development of education materials such as a 'prevention primer' on small arms and health for use by physicians and other health professionals and an 'outreach kit' with fact sheets and action alerts. The IPPNW small arms webpage will also be revamped.

## U.N. RESOLUTION 1325 ON WOMEN, PEACE AND SECURITY - 3<sup>rd</sup> Anniversary

October 31 marked the third anniversary of Resolution 1325 on Women, Peace and Security adopted unanimously by the UN Security Council in 2000. This important resolution calls for participation of women in peace processes; gender training in peacekeeping operations; protection of women and girls and respect for their rights; gender mainstreaming in the reporting and implementation systems of the UN relating to conflict, peace and security. To address these 4 areas, the resolution identifies 18 steps to be taken by the UN Secretary General, the Security Council, Member States and all parties to armed conflict.

At a UN meeting on this year's anniversary, Ruth Sando Perry, former Interim President of Liberia, described the significant role of women in the Accra peace process, but bemoaned the fact that only one woman is in the transitional government. Mrs. Perry pointed out that conflicts are never caused by women nor started by

women, but women are abused, widowed and die prematurely as a result of violent conflict. "We can not stand by silently while others tamper with our lives," she said.

A Security Council resolution is a commitment made by the UN and its Member states to take action on specific issues. The implementation of Resolution 1325 is now essential or it becomes another piece of paper and women will continue to suffer from exclusion. For more information visit [www.peacewomen.org](http://www.peacewomen.org).

To commemorate the 3rd anniversary of UN Security Council Resolution 1325, UNIFEM launched a new Web portal that aims to be a centralized repository of information on the impact of armed conflict on women, and women's role in peace-building. <http://www.womenwarpeace.org/> from Hague Appeal for Peace files

---

## President's Tour, Phase 1 continued from pg.11

### The Experience So Far

In my experience, having traveled coast-to-coast, there is public concern, a thirst for information, a willingness to face the harsh issues, to hear the painful and deeper analysis. We, as physicians, acting locally and thinking globally, have the responsibility to deepen our analysis, strengthen our commitment, and once again engage our medical colleagues so that they can, either by working, or by their membership, further substantiate our organization and its activities.

The level of knowledge about global issues, and the desire by medical students to learn more is palpable. Physicians located in cities where there is a medical school and perhaps not a PGS group, should contact members of the medical society if they are interested in entering such a group. The caliber and quality of students can only thrive in the mutuality of their concern for the health of our planet.

The longer and more detailed description of my cross-Canada travels can be found on our website at [www.pgs.ca](http://www.pgs.ca). If you would like to read it and do not have access to the internet please contact the office.

### The Next Phase

I look forward to further contacts with the medical schools in Central Ontario when I go on Phase II of the Presidential Tour later this fall. I encourage physicians to contact me either through the PGS office or directly at [<conwind@telus.net>](mailto:conwind@telus.net) if they have any symposiums or conferences where they might want a presentation. I would be delighted to make myself available, if possible, wherever they are across this rich country.

*Editor's Note: Dr Connolly gives generously of his personal time and financial resources to make this and subsequent tours possible.*

## Landmine Monitor Report 2003 Released

*By Andrée Germain,  
Mines Action Canada*

It is abundantly clear from the wealth of information in *Landmine Monitor Report 2003* (<http://www.icbl.org/lm/>) that the Ottawa Treaty banning landmines and the mine ban movement more generally, are making tremendous strides in eradicating antipersonnel landmines and in saving lives and limbs in every region of the world. It also remains clear however, that significant challenges remain.

There are an estimated 15,000 to 20,000 mine victims every year. This number is unacceptable. In this reporting period, *Landmine Monitor* has identified at least 48 mine-affected countries where assistance is inadequate to address the needs of landmine survivors and it would appear that additional outside assistance is needed in providing for their care and rehabilitation.

After stagnating in 2001, international funding for mine action (mine clearance, mine risk education, mine survivor assistance) in 2002 totaled some US\$309 million, a 30 percent increase from the previous year. However, according to Sara Sekkenes of Norwegian People's Aid, Co-Chair of the ICBL Mine Action Working Group, "Over two-thirds of the mine action funding increase went to a single country, Afghanistan." she also explained that, "Current progress reports clearly show that even greater increases in mine action funding, as well as higher cost-efficiency, will be needed to enable States Parties to meet their mine clearance deadlines and cope fully with the global landmine problem."

Canada and Canadians play a lead role in the international fight to eliminate the threat of landmines, and this struggle must continue if we are to realise this goal. Mines Action Canada (MAC) is a coalition of over 40 Canadian non-governmental organizations. As an affiliate of the Nobel Peace Prize winning, International Campaign to Ban Landmines, MAC has worked since 1994 to achieve the Ottawa Treaty banning landmines and then since 1997 to promote its full universalization and implementation.

Having helped to found MAC in 1994, PGS remains an active member of the coalition.

# Peace Through Health

## IPPNW 16<sup>th</sup> World Congress, Beijing China, September 16-19 2004

IPPNW's 16<sup>th</sup> World Congress will take place in Beijing from September 16-19, 2004. It is being organized in cooperation with the Chinese Medical Association and the Chinese People's Association for Peace and Disarmament.

The theme of the Congress **Peace Through Health**, seeks to explore the consequences to human health of military conflict and terrorism (especially the threat posed by weapons of mass destruction), and also to examine the contribution which health workers can make to peace in their work of prevention. IPPNW believes medical professionals have a special responsibility to work for the prevention of war, since war brings some of the greatest serious consequences to human well-being and health.

The Congress will be held on the campus of one of China's most prestigious universities close to the centre of Beijing, now a busy modern international city of 13 million people. The choice of this campus as

the site for the Congress offers participants the opportunity to visit some of China's leading teaching hospitals. There are a number of hotels of international standards nearby. The campus can also provide excellent in-expensive accommodations for students.

Key Speakers who have agreed to lead plenary discussion at the Congress include the founding Co-Presidents of IPPNW, Dr. Bernard Lown and Dr. Evgeni Chazov, Major-General Vinod Saighal (India), Ambassador Jayantha Dhanapala, and Dr. Ramesh Thakur. Invited speakers include the Mayors of Hiroshima and Nagasaki, Arundhati Roy, and representatives of other non-government organizations sharing IPPNW's mission are also expected to participate in the Congress.

Many leaders of IPPNW's 58 affiliates around the world will participate in symposia and workshops that will explore a wide range of topics relevant to the promotion of peace through health. Particular attention

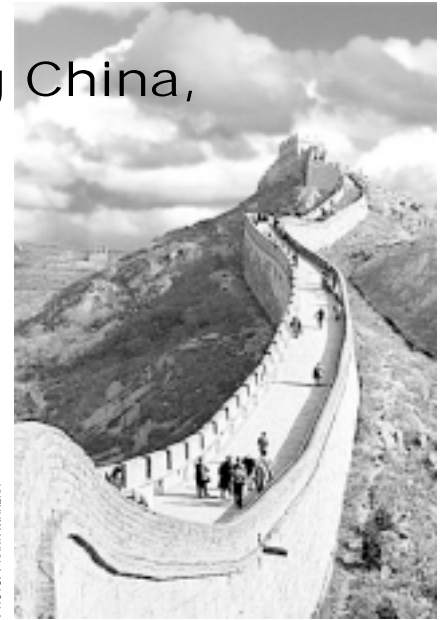


PHOTO: FRANK MARENA

will focus on ways to clear the thorny path to the elimination of weapons of mass destruction and removing the ever-present threat of terrorism. A Medical Student Congress will precede the main Congress on September 15-16.

For more information on the draft agenda and registration the Congress visit the PGS website [www.pgs.ca](http://www.pgs.ca) or contact the PGS office.



### ✓ YES, I support PGS's work for peace and disarmament.

I enclose my cheque for \$ \_\_\_\_\_ payable to *Physicians for Global Survival (Canada)* OR

Please charge my gift to my  VISA  MasterCard

Account # \_\_\_\_\_ Expiry Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone #: Home \_\_\_\_\_ Work: \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send me information about:

Monthly giving  Membership  Remembering PGS in my estate planning

All donations to PGS are tax creditable. Charitable registration # 10784-2684-RR0001

Mailing address: Physicians for Global Survival, 145 Spruce St., # 208, Ottawa, ON, K1R 6P1





## Book Reviews

*"THE HEART OF CONFLICT",  
A Spirituality of Transformation"*  
by Dr Elinor D. U. Powell M.D.

In "The Heart of Conflict", Dr Powell goes beyond the accustomed definition of conflict as tension between individuals or groups and explores ways to understand the spiritual nature of conflict. "Conflict is a signal of problems afoot and an indicator that change is necessary. If conflict is effectively addressed, it can become a turning point to meet human needs and provide opportunities to bring the possibility of healing, justice and truth to a world sorely in need of these qualities". This book allows one to understand conflict from a sacred and spiritual perspective. Published by Northstone Publishing. ISBN 1-896836-57-7.

Since her retirement from medicine, Dr Powell has practiced mediation and conflict management at the Institute of Conflict Analysis and Management in Victoria, B.C. She was President of PGS from 1993 to 1995.

*"TOWARD NUCLEAR ABOLITION"  
A History of the World Nuclear  
Disarmament Movement, 1971-  
Present,*  
by Lawrence S Wittner

"Toward Nuclear Abolition" is the final volume in the trilogy, "The Struggle Against the Bomb". This book focuses on how citizen activists helped curb the arms race and prevent nuclear war. Events from 1971 to the present day are examined, continuing accounts he began in two earlier volumes, "One World or None" and "Resisting the Bomb". Professor Wittner, a leading historian and peace researcher, exhibits how pressure from the US Nuclear Freeze Campaign, the European Nuclear Disarmament campaign and IPPNW among other comparable movements around the world saved the world from nuclear annihilation. Published by Stanford University Press. ISBN 0-8047-4862-4

Lawrence S. Wittner is a professor of History at the State University of New York, Albany.

*"THE HUMAN RIGHT TO PEACE",*  
by Douglas Roche

*The Human Right to Peace* takes readers through a discussion of the culture of war, what it is, its effects, and its real and potential consequences. Senator Roche then moves on to discuss the culture of peace and the possible results that could come from instituting peace as a fundamental human right. He brings to light the hard work that has already gone into this initiative, shows readers what else needs to be done, and points out simple ways in which each person can contribute to make peace a reality.

*The Human Right to Peace* is about the fundamental shift that is occurring in not only the way we see the world and our interactions with other individuals and nations, but in how we think about and relate to the world around us. War is no longer considered a natural response to threats to security. Published by Novalis. ISBN 2-89507-409-7

Senator Roche, former Canadian Ambassador for Disarmament (1984-89), was appointed to the Senate of Canada in 1998.

### Announcement of 2004 Annual General Meeting

At the Annual  
General Meeting to  
be held on  
May 14th 2004  
in Toronto,  
there will be vote  
on an amendment  
to the bylaw of  
the organization.

—  
Details of time and  
place will follow.