Health and peace are closely related. One cannot have one without the other. Although health and peace are desirable conditions, we human beings often thwart our best intentions to achieve and maintain them. War has profound impacts on human health. In addition to direct consequences, including the fact that 90% of all deaths related to recent wars were among civilians, war has several indirect consequences, including long-term physical and psychological adverse health effects, damage to the social fabric and infrastructure of society, displacement of people, damage to the environment, drainage of human, financial, and other resources away from public health and other socially productive activities, and fostering of a culture of violence. Many public health issues can be both a consequence and a cause of war, including infectious diseases, mental health disorders, vulnerability of population groups, disparities in health status within and among countries, and weakening of human rights. We, health professionals, can promote peace in many ways and facilitate this work by demonstrating our values, vision, and leadership.

**Key words:** health; public health; physicians; war

Health and peace are closely related and both are basic human rights. One cannot have peace without health, or health without peace. People want both health and peace. As leaders in public health, we also want both. In fact, peace is a part of public health – for public health can be defined as "what we, as a society, do collectively to assure the conditions in which people can be healthy" (1). These conditions include, but are not limited to the following: meeting basic human needs, availability of health care and public health services, healthy and safe physical environments, and healthy socio-cultural environments. None of these conditions can be assured unless there is peace. Without peace, there can be no health, basic human needs cannot be fully met, health care and public health services cannot be optimally provided, and healthy and safe physical and socio-cultural environments cannot exist. Therefore, peace, by definition, is part of public health.

Likewise, public health is part of peace. Peace can be defined as freedom from civil disturbance, a state of security, or order within a community provided by law or custom, harmony in personal relations, a state or period of mutual concord between governments. Without physical, mental, social, and spiritual health, there can be no peace. Without health, there can be no peace within an individual, within families, within communities or among nations.

Although health and peace are highly desirable conditions, we human beings often thwart our best intentions to achieve and maintain them. We engage in risky behaviors that lead to disease or in hateful conversations that lead to war. We tolerate too much government spending on the preparation for war and not enough on the planning for health. We tolerate toxic contamination of the environment in which we live, large disparities in socioeconomic status and other conditions that can lead to war, and armed conflicts that target civilians. We fail to protect human rights and often overlook the relationship between health and peace.

**Consequences of War**

War has profound impacts on human health (2,3). Direct consequences of war include injury, illness, disability, and death, often affecting civilians. During the last decade, 90% of all deaths related to war were among civilians, many of them women and children. The indirect consequences of war can be as serious and widespread as the direct consequences, and all worsen public health. The indirect consequences are the following: a) the individuals physically or psychologically injured during war may have long-term effects, ranging from chronic physical disabilities to long-term psychological trauma; b) war damages the social fabric of society such that work and education, the practice of religion, the programs of government agencies and civil society organizations, and all activities of normal life are disrupted; c) the infrastructure of society – clinics and hospitals, distribution systems for safe food and clean water, electricity networks – are destroyed, and often not
complete restoration until months or years after conflict has ended; d) war displaces people, making them refugees in other countries or internally displaced persons within their own countries; e) war, and the preparation for war, damages the environment by depleting non-renewable natural resources and by contaminating the environment with hazardous materials; f) war, and the preparation for war, drains human, financial, and other resources away from more productive activities, such as public health; and g) war fosters a culture of violence – a society where conflicts are resolved by violent means.

**Links with Public Health Issues**

The consequences of war, and more broadly the subject of health and peace, are closely linked to many public health issues. For example, infectious diseases, ranging from foodborne illnesses to sexually transmitted diseases, and the substandard conditions, socioeconomic instability, and weakened human rights to which they are often related, can be a consequence of war or a contributory cause of war. Furthermore, mental health disorders and related disorders of alcohol and drug abuse, which have usually not received sufficient attention, are often related to war or other forms of violence. One of the consequences of war is the vulnerability of population groups to injury and illness, disability, and death. The moral test of government is how it treats vulnerable people – the young, the elderly, the needy, and the sick or physically or mentally disabled. Disparities that exist within and among countries in health status, in access to health services, in socioeconomic status, and in opportunities for education and employment, are also the concern of public health. The gaps between the rich and the poor, between men and women, and among ethnic groups may be very great. Political and economic instability can increase the vulnerability of high-risk groups and increase disparities. Ethnic tensions that exist after war can lead not only to another war and other forms of violence, but also to discrimination that reduces health status and access to health services. Situations in which people do not participate in the decisions that affect their lives also fall within the scope of public health. Participatory government is an essential ingredient for a healthy society, and so is participation in civil society, or nongovernmental organizations. We must put the public in public health. Another area where public health plays a major role is maintenance of healthy socio-cultural environments, which decay during and after war. Without strong socio-cultural environments, we cannot achieve or maintain health or peace, nor can we ensure health without social cohesion and respect for human rights, which also fall victims to war.

Addressing each of these issues effectively will need to involve and engage all sectors of our communities and our nations to bring about public health. It will assure the conditions in which people can be healthy, and enable us to achieve and maintain both health and peace.

**What We Can Do**

As health professionals responsible for the public health of our communities and our nations, we can do some things to achieve and maintain health and peace. We must continue to develop and implement programs and projects to assure conditions in which people can be healthy, to assure that human needs are met, that health care and public health services are available, and that healthy and safe physical environments exist. In addition, we must effectively advocate for these programs and projects and the human, financial, and other resources to implement them. If we do not advocate for them, who will? Furthermore, we must work to promote the health of the societies in which we live by helping to improve our socio-cultural environments, by promoting communities participation in the decisions that affect their lives, by promoting the health and vitality of community-based groups and civil society, or non-governmental, organizations. This work will involve building partnerships with people in other sectors of society, for public health is what we, as a society, collectively do to assure the conditions in which people can be healthy. Likewise, we must work to promote peace by addressing the underlying conditions that lead to armed conflict and other forms of violence, by promoting non-violent means of resolving conflicts, by promoting and protecting human rights, by building a capacity for peace, and by teaching the future public health workers what they can do to promote peace. In addition to being health professionals, we must be peace professionals.

**Who We Can Be**

As important as our addressing the question “What must we do?” is our addressing the question “What kind of people must we be?” I believe that, as professionals who are committed to health and to peace, we must be people of values, vision, and leadership (4).

We need to be people of values. Values provide the bases for health and for peace, and define who we are. Values include respect for human dignity, social justice, community responsibility, and the resolution of conflicts by non-violent means. We must promote and speak these values and, indeed, live our lives by these values – with passion, courage, and persistence.

We also need to be people of vision. Our visions provide goals for the future and guidance on how to reach them. We need to promote visions of healthy and peaceful nations and a healthy and peaceful world, even if these visions may seem impossible to achieve. The late United States Senator Robert Kennedy used to say, “Some people see things as they are and ask, ‘Why?’ I dream things that never were and ask, ‘Why not?’” We need to dream things that never were and ask, “Why not?” Why not a Dubrovnik Pledge for Peace?

We need to be leaders who translate these values and visions into health and peace, who call forth leadership in others, who not only do things right but who choose to do the right things. As leaders, we need to
exhibit health and peace in our own lives. As Mahatma Gandhi said, “Be the change you want to see in the world.” In addition, we need to be leaders who do not seek personal credit for what we accomplish, but who know that true acknowledgement is in the realization of our values, vision, and leadership.

The Chinese poet Lao Tse addressed this quality of leadership more than 2500 years ago, when he wrote:

*Go to the people,*
*Learn from them,*
*Love them,*
*Start with what they know,*
*Build on what they have;*
*But of the best leaders,*
*When their task is accomplished,*
*Their work is done,*
*The people will remark,*
*“We have done it ourselves.”*

So let us go forward with values, vision, and leadership, as leaders committed to both health and peace, ready to address the challenges of the 21st century, knowing in our hearts and souls that we cannot have health without peace or peace without health.

**Acknowledgment**

This paper is adapted from an address presented at the Health Ministers’ Forum: Health Development Action for South East Europe, 2001 Sep 2, Dubrovnik, Croatia. Dr. Levy is an Adjunct Professor of Community Health at Tufts University School of Medicine and a Visiting Lecturer at the Harvard School of Public Health, both in Boston, Massachusetts, USA. He is a former executive director of the International Physicians for the Prevention of Nuclear War and a past president of the American Public Health Association. He is a co-editor of two editions of the book *War and Public Health* and the book *Terrorism and Public Health,* now in development.

**References**


Received: January 14, 2002
Accepted: February 7, 2002

**Correspondence to:**
Barry S. Levy
P. O. Box 1230
Sherborn, MA 01770, USA
blevy@igc.org