



International Journal of Advanced Community Medicine

E-ISSN: 2616-3594
P-ISSN: 2616-3586
www.comedjournal.com
IJACM 2022; 5(3): 05-07
Received: 05-05-2022
Accepted: 11-06-2022

Abhinav V Pathare
Chief Scientific Advisor,
Organization: Public Health
India (PHI), Mumbai,
Maharashtra, India

Anup B Chaudhary
Director & Chief Nutrition
Advisor, Organization: Public
Health India (PHI), Mumbai,
Maharashtra, India

Corresponding Author:
Abhinav V Pathare
Chief Scientific Advisor,
Organization: Public Health
India (PHI), Mumbai,
Maharashtra, India

War and public health: Relevancies and competencies explained by 'Public Health India'

Abhinav V Pathare and Anup B Chaudhary

DOI: <https://doi.org/10.33545/comed.2022.v5.i3a.240>

Abstract

Figure 1 represents the graphical abstract of this article.

Keywords: war, public health, relevancies and competencies, prevention and management.

Introduction

Relevancy between public health and prevention of war

Wars and armed conflicts vastly affect numerous public health elements, and the contemporary Russia-Ukraine crisis may be a fitting example of this. Wars have disastrous consequences on the physical and mental well-being of the population. The consequences of war are not just confined to its participants. War also affects the uninvolved people, countries, and governments. Warfares impact the social life *within and surrounding* the war-affected regions (Hjertman, Nauman, Vretemark, Williams, and Kjellin, 2018) [10]. Additionally, war circumstances significantly affect environmental health (Leaning, 2000) [12].

Wars damage health infrastructure, obliterating the nation's decades of healthcare growth, which impairs the healthcare system's ability to respond to the war's direct and indirect health repercussions (Debarre, 2018) [8]. Due to armed conflict, millions of people have been internally displaced, relocated, or compelled to escape their nations (United Nations High Commissioner for Refugees [UNHCR], 2018) [21]. This has a broader public health impact, as these circumstances drive several physical and mental health-related consequences in the case of inconvenient transportation, forced encampments, and refugees' limited access to healthcare in the host nations (Daynes, 2016) [7].

Additionally, the link between forced migration and socioeconomic stress is well-accepted (Siriwardhana & Stewart, 2013) [19]. These unfavourable consequences may continue for decades, which undoubtedly implies that war can keep the public health of involved—and to a certain degree uninvolved—countries affected for several generations. In summary, war is a public health crisis and requires the public health departments' extraordinary attention to prevention.

War: A man-made public health problem?

Following the declaration by the Turkish government of a military operation in Afrin, Syria, in January 2018, the Turkish Medical Association (TMA, 2018) [20] released a public statement proclaiming that "*war is a man-made public health problem*" (Legge *et al.*, 2018) [14]. Additionally, as Sharmila Devi reports, 11 TMA members—five of whom were members of the TMA's central council—were later charged with inciting hatred and hostility and sentenced to 20 months in jail (Razum *et al.*, 2019) [16].

The Association of Schools of Public Health in the European Region (ASPHER) represents 119 public health schools in 43 countries (Razum *et al.*, 2019) [16]. With unequivocal evidence, ASPHER (n.d.) [2] recognizes war as a man-made public health problem, and ASPHER is committed to drawing the public's and policymakers' attention to the irreversible harm that armed conflicts wreak on population health. As a result, ASPHER (n.d.) [2] expressed sympathy for the convicted TMA members.

Importantly, whether war is man-made or not is likely out of the scope of this editorial. However, this editorial (so far) almost certainly suggests that the public health departments could help prevent and manage war.

Most importantly, it is essential to acknowledge that addressing war is significantly complex. Therefore, solely public health departments may not help prevent or manage war; thus, a "whole system approach" is required. The whole system approach helps establish various interlinkages (synergies) within diverse disciplines, sectors, institutions,

international organizations, and private and governmental departments (Pathare, 2021) [15]. Therefore, these interlinkages and synergies could effectively help prevent and manage the war. This editorial will now spotlight the competencies in public health departments suitable for preventing and managing the war.

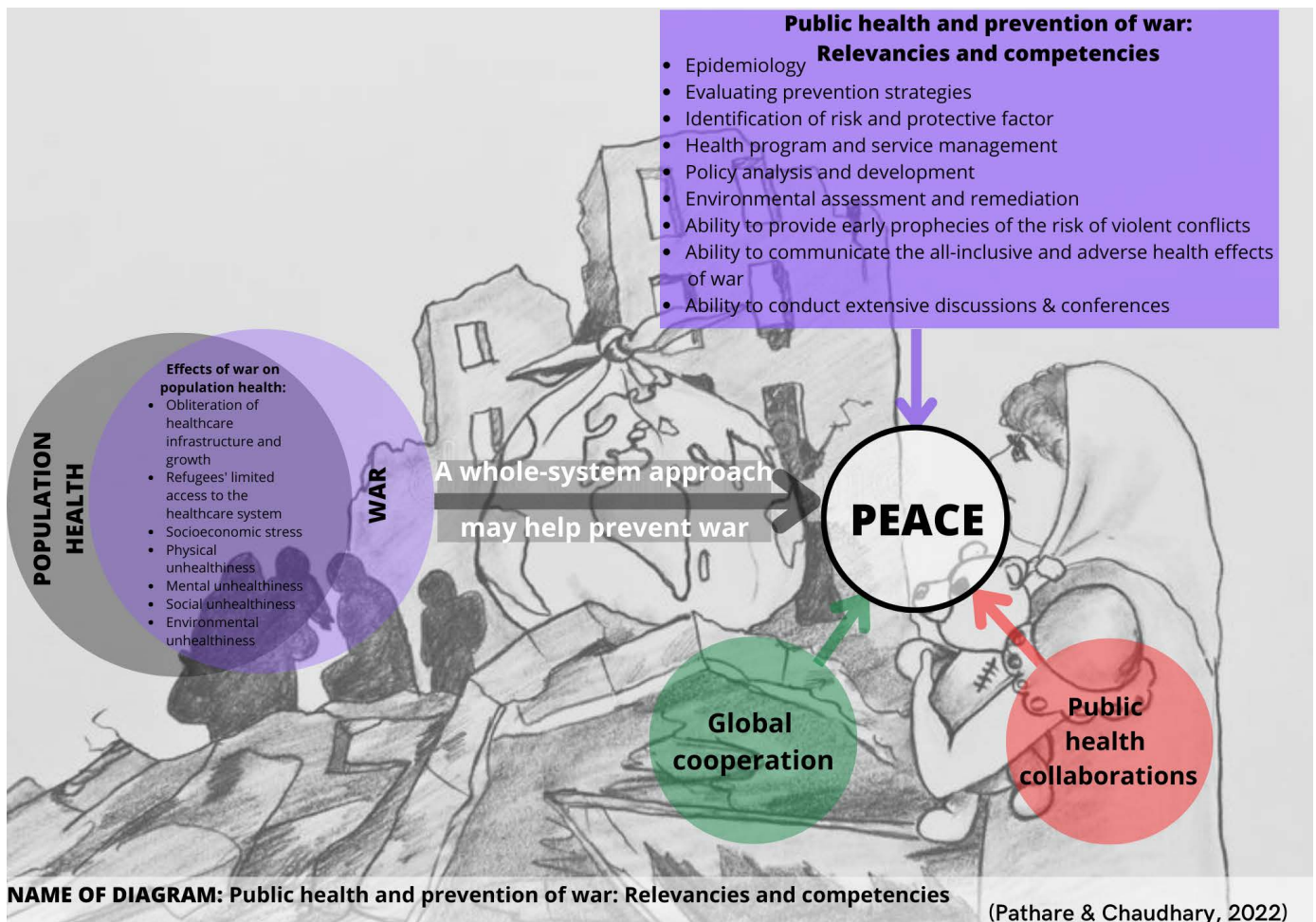


Fig 1: Public health and prevention of war: Relevancies and competencies (graphical abstract).

Competencies in public health that are relevant to preventing war

Public health professionals are uniquely qualified to participate in war prevention due to their expertise in multiple admirably relevant areas such as: epidemiology (Bartlett & Judge, 1997) [3]; planning, developing, monitoring, and evaluating prevention strategies (Reynolds & Sutherland, 2013) [18]; risk and protective factor identification (Elbogen *et al.*, 2012) [9]; health programme and service management (Hunter & Berman, 1997) [11]; policy analysis and development (Walt *et al.*, 2008) [22]; environmental assessment and remediation (Reis *et al.*, 2015) [17]; and health advocacy (Chapman, 2001) [6].

Some public health workers have an extensive understanding of the consequences of war, either from personal exposure to the violent conflict or from working with patients and communities/societies in armed conflict circumstances (Bou-Karroum *et al.*, 2020) [4]. Notably, the field of public health serves as a unifying ground around which—to form war prevention alliances—many disciplines are willing to work in synergy (Leather *et al.*, 2006) [13]. This offers a robust opportunity to implement a whole system approach to prevent war because the public health voice is considered chiefly as a prudent force for better population health.

Public health networks can give early prophecies of the risk of violent conflict by collecting and reviewing health indicators regularly (Bunde-Birouste *et al.*, 2004) [5]. Besides, Public Health experts, as performed by American Public Health Association (2009) [1], can convey the all-inclusive health effects of war to the relevant authorities, decision-makers, policymakers, and the wider population. Moreover, the different public health branches could formulate extensive discussions & conferences about war's extensive damage to the nation's economy and social life.

Concluding words

Public health has the potential to make a unique contribution to the prevention of war by comprehensively designing prevention-focused programs, services, training, policies, and advocacy campaigns. This article has pointed out the relevance of public health in preventing and managing the war. This article, additionally, has also discussed the competencies in public health regarding war prevention and management. Therefore, although war undoubtedly is a multi-faceted and complex issue, the role of public health—practitioners, academics, policymakers, experts, and researchers—is indisputable. In order to maintain peace and harmony, it is time to participate together to downsize the public health consequences of war.

Authors' contributions

Abhinav V Pathare contributed to the conception, design, literature search, interpretation, and manuscript writing, and Anup B Chaudhary revised the article and made an intellectual contribution. Both authors were involved in carefully proofreading the content and approved the manuscript for publication.

Funding details

Public Health India (PHI) supported this work in light of the ongoing Russia-Ukraine crisis. PHI is an Indian health-advocacy organisation committed to improving public health through interdisciplinary research.

ORCID iDs

Abhinav V Pathare: <https://orcid.org/0000-0003-4811-0121>

Anup B Chaudhary: <https://orcid.org/0000-0003-0035-1436>

References

- American Public Health Association. The role of public health practitioners, academics, and advocates in relation to armed conflict and war. *Policy*, 2009.
- Association of Schools of Public Health in the European Region. (n.d.). ASPHER considers war as a man-made public health problem. Retrieved from https://www.aspher.org/download/247/aspher-statement_tma_final.pdf
- Bartlett PC, Judge LJ. The role of epidemiology in public health. *Revue scientifique et technique-Office international des epizooties*. 1997;16:331-336. <https://doi.org/10.20506/rst.16.2.1020>
- Bou-Karroum L, El-Harakeh A, Kassamany I, Ismail H, El Arnaout N, Charide R, *et al*. Health care workers in conflict and post-conflict settings: systematic mapping of the evidence. *PloS one*. 2020;15(5):e0233757. <https://doi.org/10.1371/journal.pone.0233757>
- Bunde-Birouste A, Eisenbruch M, Grove N, Humphrey M, Silove D, Waller E, *et al*. Health and peace-building: securing the future. The University of New South Wales Health and Conflict Project and the School of Public Health and Community Medicine, Sydney, Australia, 2004.
- Chapman S. Advocacy in public health: roles and challenges. *International journal of epidemiology*. 2001;30(6):1226-1232. <https://doi.org/10.1093/ije/30.6.1226>
- Daynes L. The health impacts of the refugee crisis: a medical charity perspective. *Clinical medicine*. 2016;16(5):437. <https://doi.org/10.7861/2Fclinmedicine.16-5-437>
- Debarre A. Hard to reach: providing healthcare in armed conflict. *International Peace Institute* 2018. Retrieved from https://www.ipinst.org/wp-content/uploads/2018/12/1812_Hard-to-Reach.pdf
- Elbogen EB, Johnson SC, Wagner HR, Newton VM, Timko C, Vasterling JJ, *et al*. Protective factors and risk modification of violence in Iraq and Afghanistan war veterans. *The Journal of Clinical Psychiatry*. 2012;73(6):15838. <https://doi.org/10.4088/2FJCP.11m07593>
- Hjertman M, Nauman S, Vretemark M, Williams G, Kjellin A. The Social Impacts of War: Agency and Everyday Life in the Borderlands during the Early Seventeenth Century. *International Journal of Historical Archaeology*. 2018;22(2):226-244. <https://doi.org/10.1007/s10761-017-0408-3>
- Hunter DJ, Berman PC. Public health management: Time for a new start?. *The European Journal of Public Health*. 1997;7(3):345-349.
- Leaning J. Environment and health: 5. Impact of war. *CMAJ*. 2000;163(9):1157-1161. <https://pubmed.ncbi.nlm.nih.gov/11079063>
- Leather A, Ismail EA, Ali R, Abdi YA, Abby MH, Gulaid SA, *et al*. Working together to rebuild health care in post-conflict Somaliland. *The Lancet*. 2006;368(9541):1119-1125. [https://doi.org/10.1016/s0140-6736\(06\)69047-8](https://doi.org/10.1016/s0140-6736(06)69047-8)
- Legge D, Sanders D, Bodini C, Paz E, Serag H, McCoy D, Baum F. The arrest of the central council of the Turkish medical association on 30 January is a threat to the human rights of health professionals everywhere 2018. Retrieved from https://www.researchgate.net/publication/323295423_The_arrest_of_the_Central_Council_of_the_Turkish_Medical_Association_on_30_January_is_a_threat_to_the_human_rights_of_health_professionals_everywhere
- Pathare AV. Healthy Setting Approach: Origin, Evolution, and Development; Challenges and Opportunities in the University Setting. *International Journal of Medical Science and Current Research (IJMSCR)*. 2021;4(5):1069-1080. Retrieved from <http://clok.uclan.ac.uk/39919/1/39919%20HealthySettingAbhinavArticle.pdf>
- Razum O, Barros H, Buckingham R, Codd M, Czabanowska K, Künzli N, Middleton J. Is war a man-made public health problem? *The Lancet*. 2019;394(10209):1613. [https://doi.org/10.1016/s0140-6736\(19\)31900-2](https://doi.org/10.1016/s0140-6736(19)31900-2)
- Reis S, Morris G, Fleming LE, Beck S, Taylor T, White M, Austen M. Integrating health and environmental impact analysis. *public health*. 2015;129(10):1383-1389. <https://doi.org/10.1016/j.puhe.2013.07.006>
- Reynolds HW, Sutherland EG. A systematic approach to the planning, implementation, monitoring, and evaluation of integrated health services. *BMC health services research*. 2013;13(1):1-11. <https://doi.org/10.1186/1472-6963-13-168>
- Siriwardhana C, Stewart R. Forced migration and mental health: prolonged internal displacement, return migration and resilience. *International health*. 2013;5(1):19-23. <https://doi.org/10.1093/inthealth/ihs014>
- Turkish Medical Association. War is a public health problem!, 2018. Retrieved From https://ttb.org.tr/haber_goster.php?Guid=28de85da-00e5-11e8-a05f-429c499923e4
- United Nations High Commissioner for Refugees. Global trends report: Forced displacement in 2018. Retrieved from <https://www.unhcr.org/globaltrends2018/>
- Walt G, Shiffman J, Schneider H, Murray SF, Brugha R, Gilson L. 'Doing' health policy analysis: methodological and conceptual reflections and challenges. *Health policy and planning*. 2008;23(5):308-317. <https://doi.org/10.1093/heapol/czn024>