BOOK REVIEW

Finding Hope in the Work on War and Health

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From Horror to Hope: Recognizing and Preventing the Health Impacts of War by Barry Levy (Oxford University Press, 2022)

Few subjects capture the public imagination like war; it is a popular theme in literature, film, and even art. But war is not a very popular subject in medical and health scholarship and practice, although we have seen increasing interest in the past decade. We don’t take war as seriously as we should in public health research, education, and practice. Only two journals, Medicine, Conflict and Survival, launched in 1985, and Conflict and Health, launched in 2007, are dedicated to war and health. The number of books on this topic would appear relatively small when compared with the number of books published in most medical and public health areas. Barry Levy’s From Horror to Hope: Recognizing and Preventing the Health Impacts of War therefore deserves a warm welcome. This monograph builds on two prior editions of a seminal book, War and Public Health (first edition 1997, second edition 2007, both from Oxford University Press) which Barry Levy co-authored with his long-term collaborator, the late Victor Sidel, another doctor, health activist, and prominent academic, just as Levy is. However, while From Horror to Hope maintains the same public health prism to look at war, there is much fresh thinking and material in this book to be read anew.

The book comes out at a time when there is acute interest in the subject of war and health, because of the atrocious Russian war on Ukraine. But Levy’s interest in this subject goes back decades. Combining scholarship, teaching, and activism, Levy has a track record of drawing attention to this topic and calling on health professionals to mobilize in the fight against war and the predisposing condition of militarism. In 15 chapters spread over five parts, this 284-page book distills his long experience into a text that informs and moves the reader.

The book’s provocative title raises a central question: Can one find hope when looking at the horrors of war and, if yes, what is the source of this hope? Levy unequivocally answers yes, taking us on a journey to explore the basis for such hope through demonstrating the possibilities and merits of public health analysis and action in favor of people and communities affected by war. We see this most vividly in the profiles of 18 colleagues, all of whom have done a great deal of work and made important contributions in this field. Through these profiles, the book demonstrates, to the uninitiated and the skeptic as to the interested professional, the many paths and possibilities for influential work in this area. Brilliantly, the profiles bring humanity to a topic of devastation and suffering. The point of these profiles is not to showcase the heroism and exceptionalism of the few. Rather, Levy is careful to emphasize the critical importance of the unsung frontline health workers, the contribution of researchers, practitioners, and advocates for health in war-affected settings, and the sacrifices and resistance of an untold number of communities facing war and its consequences.

Part I: Introduction, starts with a public health perspective on war in Chapter 1. A diagram here could have helped the reader unfamiliar with this topic to better understand what this perspective is. By the
end of the book, the core components of this perspective have been explained: the study of war itself (its epidemiology, causes, conduct, weapons), the accounting for the diverse and vast impacts of war on people, communities, and environment, and the actions to counter these impacts, the emphasis on prevention, and the centrality of the role of health professionals.

Much of Part I and both chapters in Part II: Types of Weapons are devoted to exploring the nature, strategies, and weapons of war. This is a welcome contribution because, commonly, health scholarship on war pays scant attention to war analysis as opposed to the more ‘familiar’ topic of health impacts of war. This must change if we are to see a more serious public health action on war. We must know the drivers of war if we want to see a health contribution toward preventing them. And we must know how wars are fought, and with which weapons, if we want to prevent the many unspeakable health consequences or deal with them once they occur. An example is explosive weapons, used in urban areas in modern wars, from Syria, through Yemen and Ethiopia, to Ukraine. These weapons do not ‘just’ kill and maim. The blast effects alter human physiology, particularly in children, potentially lasting a lifetime.

At 155 pages combined, Part III and Part IV, comprise the largest section in the book, dedicated to studying and responding to the impacts of wars. Here the book best demonstrates the public health approach to war with Levy applying his erudite epidemiological thinking and analysis to showcase how war is so terrible for people, communities, and the planet, and what can be done in response.

The Health Impacts on Civilians covers traditional topics such as casualties, mental ill health and vulnerable population groups but explores previously under-researched impacts of war, such as non-communicable diseases (NCDs). These have emerged as important health needs for humanitarian action in recent wars in middle income countries, such as Syria and Ukraine, where NCDs dominate the pre-war population health burden. The Other Impacts and Their Documentation explores two subjects that are critical to reaching groups that can be overlooked. Through focusing on war-related issues of military personnel and veterans and their families, Chapter 12 condemns the use of people as ‘fodder’ of war, demonstrates care about such people, and implicitly reaches out to them to ask them to reconsider their role in the war machine. The terrible cost of war on the environment, the focus of Chapter 13, is especially meaningful in this era of great concern about climate change, loss of diversity, pollution, and sustainability. This particular area may draw more global health action on war from the many who are concerned about environmental issues but who find the subject of war and health uncomfortable. We need every possible segue to reach new constituents, so the war-and-health field is not restricted to die-hard activists whose effectiveness will always be too limited considering war’s vast and profound impacts, of which the book speaks.

Key actions of response are included at the end of each chapter in Part III and Part IV. While these may seem simplified and prescriptive considering the myriad complexities of war settings, I suspect they will appeal to students and those without prior knowledge or experience in war-related health considerations, as they document issues to consider and where work can start.

Part V: The Future has just one chapter which emphasises action. Levy’s use of the H.G. Wells quote, If we don’t end war, war will end us, reflects his view on public health work on war. It is not merely about providing care and assistance to affected populations or cleaning up after the ravages of war but rather about a determined approach to war with conflict prevention and peace promotion at the center. As prevention and promotion are core public health actions, the book draws on existing public health conceptual underpinnings and frameworks to develop its own framework to conflict prevention and peace promotion. Through this framework, the chapter outlines an ambitious agenda for action and draws on an informed review of possible roles for entities ranging from the United Nations, through civil society to health professionals. How we, health professionals, will take up Levy’s challenge of working ‘toward a world without war’
is up to us but perhaps we can learn a lesson or two from recent history. One example cited in the book brings alive such history: how dedicated and relentless health work against nuclear weapons managed to galvanize a global health movement against war. The International Physicians for the Prevention of Nuclear Weapons (IPPNW), an organization with which Levy has long been associated, mobilized some 140,000 physicians between its founding in 1980 and its receipt of the Nobel Peace Prize in 1985 around the threat that nuclear weapons pose to human and planetary existence. This is not a rare or isolated example. We should draw inspiration from the work of numerous initiatives that refuse to concede that war is humanity’s destiny, just as Levy does through this book.

References

1. A. Hagopian, “Why isn’t war properly framed and funded as a public health problem?” Medicine, Conflict and Survival, (2017), 33/2, pp. 92-100.