Nuclear weapons ban, the Nobel Prize and the contribution made by doctors

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JOHN GUNNAR MÆLAND
E-mail: john.meland@uib.no
John Gunnar Mæland, MD, PhD and professor emeritus at the Department of Global Public Health and Primary Care, University of Bergen and chair (2009–17) of Norwegian Physicians against Nuclear Weapons.
The author has completed the ICMJE form and declares no conflicts of interest.

SAIMA NAZ AKHTAR
Saima Naz Akhtar, specialty registrar in anaesthesiology at Haukeland University Hospital. She is chair of Norwegian Physicians against Nuclear Weapons.
The author has completed the ICMJE form and declares no conflicts of interest.

BJØRN HILT
Bjørn Hilt, senior consultant at the Department of Occupational Medicine, St. Olavs Hospital, Trondheim University Hospital, and professor II at the Department of Public Health and Nursing, Norwegian University of Science and Technology. He is chair of the board for International Physicians for the Prevention of Nuclear War.
The author has completed the ICMJE form and declares no conflicts of interest.

KIRSTEN KJELSBERG OSEN
Kirsten Kjelsberg Osen, MD, PhD, professor emeritus at the Department of Medical Biology, University of Oslo, and former board member, now council member, of Norwegian Physicians against Nuclear Weapons.
The author has completed the ICMJE form and declares no conflicts of interest.

Doctors made a significant contribution to the United Nations’ decision to ban nuclear weapons in 2017. What can we learn from this history, and how can doctors continue to be involved in the efforts to free the world from nuclear weapons?

Norwegian Physicians against Nuclear Weapons in the torchlight procession for Nobel Peace Prize
To date, 2017 has represented the high point of the so-called humanitarian nuclear disarmament initiative. That year, the UN adopted a treaty to ban nuclear weapons, with a resounding majority (1). The same year, the Nobel Peace Prize was awarded to the International Campaign to Abolish Nuclear Weapons (ICAN), a campaign launched by International Physicians for the Prevention of Nuclear War (IPPNW) ten years previously.

Doctors have been engaged in the fight against nuclear weapons since the 1950s, and these early efforts were described in the Journal of the Norwegian Medical Association in 2007 (2). In this article we will describe the contributions that doctors have made to the humanitarian disarmament initiative over the last decade, and what doctors can do by virtue of their responsibility for life and health to further the struggle for a safer world free from nuclear weapons.

New zeal for disarmament

The International Campaign to Abolish Nuclear Weapons was established by the Australian Medical Association for Prevention of War, based on an idea launched by the former co-president of the IPPNW, Ron McCoy of Malaysia (3). Following the complete failure of the Review Conference of the Parties to the Treaty on the Non-Proliferation of Nuclear Weapons in 2005, McCoy proposed to establish a new global campaign for banning and eliminating nuclear weapons, modelled on the successful international campaign to ban landmines.

At the World Congress in Helsinki in the autumn of 2006, the IPPNW decided to make this campaign its main activity, and in April 2007 the International Campaign to Abolish Nuclear Weapons was launched as a global campaign open to civil society bodies. The idea was to avoid building a new organisation, and instead develop a global network of collaborating civil society organisations.

In Norway, the organisations Norwegian Physicians against Nuclear Weapons, Nei til atomvåpen [No to Nuclear Weapons] and Pugwash Norway had already initiated a Norwegian signature campaign in support of a nuclear weapons convention, and in November 2007, a petition with 20 000 signatures was handed in to Jonas Gahr Store, Minister of Foreign Affairs. With support from the MFA, the three organisations established a Norwegian secretariat employing two campaign workers in 2010. Norwegian Physicians against Nuclear Weapons was made responsible for running the ICAN campaign in Norway, under the auspices of a steering group that also included No to Nuclear Weapons, Pugwash, the Norwegian Peace Council and Norwegian People’s Aid. The first priority was to link Norwegian civil society organisations to the campaign. Today, it has nearly 500 partner
In parallel, the Norwegian partner group helped prepare a separate application to the MFA for support to establishing a secretariat in Geneva to coordinate the campaign in Europe, the Middle East and Africa. This application was also quickly granted. The Geneva office started its work in early 2011 and later developed into the campaign’s main hub. Despite its small staff, ICAN now functioned as an effective international campaign with supporters on all continents (3). The national associations of IPPNW have been some of the most active partner organisations, often assuming a national responsibility for coordination of the campaign. The Australian group, led by Tilman Ruff, co-president of IPPNW, has played a particularly important role in this success. The central office of the international doctors’ movement in Boston, United States, has provided similarly valuable contributions.

Strategy and work

It was recognised early on that a new nuclear disarmament initiative had to be driven forward by the nuclear-free countries and be based on international law and the humanitarian consequences of nuclear weapons in contravention of international law. The strategy was clear: first stigmatise and prohibit nuclear weapons, and then pressure the nuclear powers into multilateral negotiations on total, mutual nuclear disarmament (3).

The ICAN campaign wished to steer the debate on disarmament towards the disastrous humanitarian consequences of nuclear weapons, and drew many of its arguments about the unique destructive capacity and medical effects of nuclear weapons from the IPPNW. Based on new climate models, the doctors could provide scientific arguments stating that even a ‘limited’ nuclear war would result in global climate disruption and affect food production for many decades, placing up to two billion people at risk of starvation (4).

Beatrice Fihn, Executive Director of the International Campaign to Abolish Nuclear Weapons (ICAN), and Tilman Ruff, co-president of International Physicians for the Prevention of Nuclear War, with the Nobel Peace Prize medal and diploma. Photo: Kristian Ruff

The medical and ecological consequences of nuclear weapons were elucidated with particular clarity at three international conferences in 2013 and 2014. The first of these was held in Oslo at the behest of Jonas Gahr Støre, then Minister of Foreign Affairs. The conferences reached the same conclusion as that of the World Health Organization in the 1980s: the health services would be completely helpless in the face of the disastrous consequences resulting from the use of nuclear weapons. The detonation of only a single nuclear warhead over a city would cause damage of a nature and on a scale so overwhelming that any attempt to provide help would be futile (5, 6).

At all three conferences, the ICAN campaign was the main collaboration partner on behalf of civil society, and this provided opportunities for broad contact between diplomats and campaign workers. The IPPNW participated actively in these events, by providing working papers, holding plenary presentations and participating in the dialogue between the
governments and civil society.

In parallel, the humanitarian disarmament message was promoted in other international disarmament forums, where it gathered increasing support. While 16 countries, with Norway among them, backed a consensus statement on the humanitarian consequences of nuclear weapons in 2012, this number had grown to 159 by 2015. The so-called humanitarian pledge, launched by Austria in 2014, gained support from 127 countries. The pledge stated that the countries would commit to ‘fill the legal gap for the prohibition and elimination of nuclear weapons’ (7).

The first Solberg government did not want to sign up to this pledge, however, referring to Norway’s membership of NATO and the rejection of a nuclear weapons ban by the nuclear powers. This decision sparked a heated political debate, because the majority in the Storting was in favour of a more active approach to this issue. The so-called nuclear compromise, adopted by the Storting on 26 April 2016, states that Norway will ‘work actively for a world free of nuclear weapons’ and ‘engage in long-term efforts to establish a legally binding framework that will ensure this goal’ (8). The government interpreted this decision as support for its approach: first disarmament, then a ban, while others claimed that the decision implied that Norway should participate in the efforts to achieve a ban. In the summer of 2016, more than 1000 Norwegian doctors and medical students signed an appeal demanding that a ban on nuclear weapons must serve as the basis for full nuclear disarmament (9).

**The negotiations on a ban**

Although Norway pulled out of the humanitarian disarmament initiative, the idea of a ban on nuclear weapons gathered increasing international support. In December 2016, the UN General Assembly decided to start negotiations over the text of the ban. The negotiations took place in New York in the spring of 2017, with more than 130 nuclear-free countries participating. Norway boycotted the negotiations along with the other NATO countries, with the exception of the Netherlands.

ICAN provided both written and oral input to these negotiations and was present in the UN building with a great number of campaign workers, including numerous doctors, who maintained systematic contact with the delegates, encouraged constructive proposals and mediated between different interest groups (3). On 7 July 2017, the negotiations ended with the adoption of a treaty on the prohibition of nuclear weapons, with 122 votes in favour, one against and one abstaining. As of October 2018, the treaty has been signed by 69 countries and ratified by 19. A total of 50 ratifications are needed for the treaty to enter into force as international law.

On 25 January 2018, Lawrence Krauss (on the left), director of Arizona State University’s Origins Project, and Robert Rosner, professor at the University of Chicago, announced that they had moved the so-called ‘Doomsday Clock’ to two minutes to midnight. Bulletin of the Atomic Scientists had
developed the Doomsday Clock as a symbol of the likelihood of a man-made global disaster. Photo: Jim Lo Scalzo/NTB Scanpix

In the autumn of 2017, the Norwegian Nobel Committee decided to award ICAN the Nobel Peace Prize. Here too, the doctors had a played a role, since the IPPNW, as a previous laureate, and Norwegian Physicians against Nuclear Weapons had made sure since 2015 that the campaign was among the nominees.

The doctors’ role in the further efforts

For doctors and others who have engaged in the fight against nuclear weapons, 2017 was a year to rejoice, with every reason to be proud of what had been achieved. Now, however, it is crucial to look forward and work towards the ultimate goal: a world free from nuclear weapons.

The world is again witnessing a strong modernisation of nuclear capabilities, and the risk of a nuclear war seems greater than ever before. There are still approximately 14,500 nuclear warheads around the world. 1,800 of these are ready to be launched at short notice, with the risk of accidents that this entails (10). All the nuclear powers are investing heavily in their nuclear arsenals and are developing new and more flexible weapons that also lower the threshold to their use. Increasing international tension is an additional factor. A telling sign of this is that the so-called Doomsday Clock on the cover of the *Bulletin of the Atomic Scientists* in 2018 shows two minutes to midnight. The clock has not been this close to midnight since the 1950s (11, 12).

The IPPNW remains a cornerstone of international disarmament efforts. Despite the weakened understanding of and engagement in nuclear disarmament in the population today, when compared to the 1980s, the doctors’ movement has succeeded in launching new initiatives and making a strong contribution to the nuclear weapons ban. This fact-based approach, for which the doctors’ movement was rewarded with the Nobel Peace Prize in 1985, has again become the basis for real disarmament. However, these efforts have been a strain on its reserves. Now, nearly 40 years after its establishment, the IPPNW is in need of a new boost, in terms of both human and financial resources.

Norwegian Physicians against Nuclear Weapons still has approximately 750 doctors and medical students as members, and has remained a driving force for ICAN in Norway. The organisation has assumed responsibility for continuing the campaign, even after the withdrawal of support from the Ministry of Foreign Affairs in 2016. However, Norwegian Physicians against Nuclear Weapons also needs more engagement among colleagues. In the 1980s, nearly one-quarter of all Norwegian doctors were members of the organisation. This indicates that far more doctors and medical students ought to see fit to show their support to the fight against nuclear weapons by joining Norwegian Physicians against Nuclear Weapons and thus helping strengthen the campaign.

Doctors need to stay committed to the message that prevention of nuclear war is the only solution, and that in light of their unacceptable humanitarian consequences, nuclear weapons must be banned (7, 9). In line with this view, the World Medical Association has declared that by virtue of its responsibility for life and health, the medical profession has an obligation to work for the prohibition and elimination of nuclear weapons. Recently, the World Medical Association issued a new statement that urged all governments to sign and ratify the new treaty to ban nuclear weapons (13). Ever since the 1980s, the Norwegian Medical Association has taken a commendably clear view on the issue of nuclear weapons and followed up the recommendations from the World Medical Association. Our goal should be that all Norwegian healthcare professions back these demands and exert pressure to return Norway to its position as a model country for nuclear disarmament. Norwegian Physicians against Nuclear Weapons now also permits non-doctors to enlist as supporting members.
The Storting has requested the government to prepare a report on the consequences for Norway of potentially signing the treaty (14). This means that Norway has not yet closed the door on this. Norwegian doctors need to take an active part in this vital debate.

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