

Health science and peace

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[Theme seminar]

1. Introduction:

World Health Organization has defined health as ‘complete physical, mental, social and spiritual wellbeing and not merely the absence of disease or deformity’ (1).

Health care developed since time immemorial but it was a slow process. Development of health science had to depend on observations and associations as and when illnesses occur. Creating illnesses in human for research purposes is unethical. It has been the ‘Art of Medicine’. But war, unavoidably, created conditions of human suffering. Scientists in the field of health used this opportunity and contributed to advancement of medicine. On one side there were incidental situations of suffering and on the other side prisoners of war have been subjected to all kinds of torture and even used as experimental subjects especially in the concentration camps. The results of these experiments have contributed to better health care systems not only at times of war but also at times of peace.

Here, unfortunately, only a few health personnel remained in the war affected areas and they could hardly find time to provide adequate health care. This has resulted in missing a lot of opportunities for research.

Historians had described the ‘Tamil society’ to be law abiding, hardworking and hospitable (2, 3, and 4). The aim of reconstruction, resettlement and rehabilitation of the health system should be restoration of these qualities completely.

2. Health care and science promoted by War:

The field of medicine saw rapid growth during the twentieth century (5). Two major factors contributed to this advancement: one is the development of technology which permitted advanced research and treatment methods; and the other is the war, two world wars, which provided human subjects for research and created the necessity for better medical care. Some examples are:

2. a. Nutrition:

Famine and various forms of malnutrition seen during the war years permitted scientists to carry out massive studies in this field (5, 6).

2. b. Alimentary physiology:

William Beaumont, an army surgeon, contributed to physiology of stomach because a gun shot injury to the stomach of Alexis St. Martin healed with fistula (5). This provided an opportunity to perform several experiments and study the response of stomach directly.

2. c Nursing:

Suffering of the wounded soldiers in France made Florence Nightingale become the first female nurse and pioneer of organised training for nurses (5). Introduction of trained nurses and other paramedical staff has revolutionized the health care system.

2. d. Organizations for health care:

War and the sufferings has provoked service minded people to get together and create institutions to care for the suffering people, originally the war affected, and later the vulnerable people. ICRC, OXFAM, MSF are some of the international organizations to mention (5). WHO, one sector of the UN, is one important result of the world war and it is a major health care provider in the world. All these organizations contribute to physical, mental and social health within their capacity. TRO is one such organization created by the Tamils during our struggle (7).

2. e. Biological weapons:

A dangerous area of health research has been into biological weapons. There are people who argued that dangerous weapons of this nature keep delaying the third world war because of fear of the consequences. Interestingly enough, we are witnessing a war in Iraq in the name of destroying chemical and biological weapons.

3. Disturbance of peace by ill health:

The world could not have sustained peace even though every body preaches about the virtues of peace. If the leaders happen to be mentally abnormal, war or unrest is inevitable. For example, Psychopaths are simply morally depraved individuals who represent the "monsters" in our society (8). Their characteristics are worth noting:

Superficial charm, grandiose self-worth, need for stimulation or proneness to boredom, pathological lying, conning and manipulative, lack of remorse, parasitic lifestyle, poor behavioural controls, promiscuous sexual behaviour, lack of realistic long-term plan, impulsivity, irresponsibility, failure to accept responsibility for own actions, criminal versatility.

Sadists derive pleasure by cruelty to others. Masochists mutilate dead bodies. Megalomaniac leaders claim to possess magical powers, omnipotence, and connection to God. Megalomania is the belief that one is able or entitled to rule the world. Traditional elements of authoritarian personalities include the following (9):

A sadistic-masochistic tendency, the tendency to hierarchy, the drive for power (and wealth), a one-sided scale of values favouring the one in power, hostility, hatred, prejudice, superficial judgments of people and events, interpreting kindness as weakness, the tendency to use people and see others as inferior, incapability of being ultimately satisfied, paranoia.

Journalists often encourage the audience to experience the same traits of insensitivity, sadism and grandiosity, particularly when the journalist suffers these flaws and builds them into his reports. The audience sees the world through the eyes of journalists. This makes people to mock and take pleasure from, or be insensitive to, the suffering of others.

It is therefore essential to carefully assess the mental state of all persons holding key posts in the government and in journalism if peace is to prevail. The paradox of the war in Sri Lanka is that the leader who is shouldering the struggle of Tamil people is described as megalomaniac (10) but the mental state of the offenders who insisted on refusing the rights of Tamils and carried out armed oppression on the people in this island has never been commented.

4. Challenges to health in peace locally.

Health services in Tamil areas of Sri Lanka have faced the effects of war over the last two decades by way of destruction and embargo on top of less development since independence. Providing adequate health care is essential for the people to make the best of the peace. Further, the gap between the Tamil areas and the rest of the island has to be bridged.

4. a. Staff and structure.

War torn Northeast of Sri Lanka has suffered heavy damages to the buildings. On the other hand, no new structure has been built during the past several years. This requires planning to upgrade existing buildings and new ones in place of damaged buildings to match the current situation which is going to need colossal amounts of money.

With regards to staffing, all categories, consultants, doctors, nurses, midwives, preventive health staff, and paramedical staff need to be appointed (11). It is going to be a very difficult task. While aiming at recruiting new staff and establishing training centres for them, lobbying is needed to mobilise the government machinery to overcome the bureaucracy and to absorb the volunteers who, even though without stipulated qualifications, had supported and maintained satisfactory health service during the worst of times.

4. b. Nutrition.

Prolonged war and displacement has led to chronic malnutrition which could not be detected by weight for height. Several surveys conducted by different organizations have indicated high prevalence of malnutrition among mothers, children and primary school children (12, 13, 14, and 15). This is going to have serious implications for our future generation which will be weak and feeble. Immediate measures have to be taken to correct malnutrition at all levels: mothers, pre-school children and primary school children.

Another serious concern is the total lifting of the embargo. All kinds of sweets, biscuits and ice creams have filled all shops and consuming them in preference to more nutritious green leaves, dhal, meat etc is the fashion. This food habit is known to result in insulin resistance and will lead to increased incidence of diabetes, hypertension and heart diseases and create a sick society (16). Another concern is the increased risk of dental caries due to the sweets, particularly among children.

4. c. Physical trauma:

People with disfigurement due to physical trauma - scars and loss of limbs - should be surgically treated. Already we have had a team of plastic surgeons coming from UK on good will mission and treating patients. Programmes for prosthesis may have to be upgraded to provide satisfactory service.

4. d. Mental trauma:

Prof. D. J. Somasundaram has described in detail about this at the Prof. K. Balasubramaniam Gold Medal Lecture, in 2002 (17). Main points are summarised here.

Civilians are no longer 'incidental casualties'; key element of modern political violence is the creation of terror to penetrate the entire fabric of economic, socio-cultural, and political relations. As a result wide ranging psychological problems are seen in the society.

Psychological problems due to war is widely prevalent in the schools. Malignant Post Traumatic Stress Disorder manifesting with mistrust, smouldering bitterness, resentment, and a thirst for revenge is also seen.

Single parent families experience immense problems resulting from having to earn and look after the family singly. Loss of identity (own village and house and sense of belonging to a community) and lively hood are serious stress factors. Those who have lost family members due to war continue to experience psychological problems.

Faith in social justice is lost. Anti social personality development in children is observed and it is a known long term consequence of war. Work out put and social values have declined considerably due to frustration and excessive stress.

It is going to be a difficult task to build the law abiding and hardworking Tamil Society. In addition to resettlement, rehabilitation, and reconstruction, measures like confidence building and counselling individually and collectively at community level will have to be undertaken to bring normal mental stat.

4. e. Family health:

An important strength of the society had been close family ties. This has experienced severe strain due to death, displacement, and poverty. This has caused deterioration in mutual understanding and caring for each other.

The Family health worker, who is expected to visit all pregnant and lactating mothers and children and thereby be familiar with all families in the area in order to maintain their health and provide health education, is apparently confined to immunization and collecting statistics because of lack of staff and overwork for available staff. Increasing incidence of violence against women and children is a serious concern. A very disturbing report is high maternal mortality rate and lower birth rate in the north-east when compared to national figures (18)

If we fail to ensure proper health for mothers and children and regain the family structure, there is no future for our society.

4. f. Morality and drug abuse:

The psychological trauma, decline in social values, availability of licensed and illegal alcoholic drinks, addictive drugs in plenty and video films provoking sexual perversion and lack of vision for the future have collectively influenced the morality of the society. Isolation or separation from the family makes any individual easily vulnerable to drugs, alcohol and sexual promiscuity. This, in addition to affecting the social health and future of our children, has increased the risk of sexually transmitted diseases, particularly that of AIDS (19). This is a vicious circle which can lead to self destruction of our society

This has to be tackled carefully: on one side, people should be given opportunity to return to 'normal' life with adequate health education and on the other side law and order should be maintained very strictly. Healthy recreational activities such sports, music, drama etc. should be promoted.

The above concerns were not experienced in the LTTE controlled areas where the moral remained high in spite of imminent famine, death and destruction probably because of high expectation among the people and good public relations and policing by the authority. Further, the Tamil Ealam Health Service is carrying out health education programmes with the help of government health services especially observing health week at the time of Thileepan's commemoration.

4. g. Resettlement:

Peace means resettlement. All those who fled their homes due to effects of war will have to come home. This is not without problems. They have gone far and wide and exposed wide variety of cultures, stresses and societies. They and their children are going to come back with acquired culture and diseases. AIDS has been already reported among a few returnees but it did not spread as feared. It will remain a serious risk when large numbers return.

4. h. Quack doctors and malpractices.

In a sick society that is confused, in the absence of adequate proper health care, quack doctors and opportunistic practices proliferate and they worsen the situation. Common man is attracted by them because of easy access and low cost. New religious practices and new health systems can be seen to prosper. People fell for a magical mushroom tablet that claimed to prevent all possible illnesses and created several sick people. There is a "Pulse Specialist" who claims to offer cure for diabetes and hypertension and several other diseases without any drug. He appears to be a part of group of practitioners who thrive by condemning other established systems of medicine because he is distributing articles supposed to have been written by some Indians (personnel encounter). The Sri Lanka Medical Council should evolve adequate measures to deal with such persons. People must be warned about the risk of believing in such practices.

All medical practitioners were monitored for malpractices in LTTE controlled area. Partially qualified practitioners were permitted with specific instructions about their limitations. A criminal abortionist was arrested in Mullaitivu district and was sentenced with death penalty about 3 years ago (personal knowledge).

A dangerous practice that has evolved is to discuss among friends and relatives and use drugs on their advice with no knowledge of dose, antibiotic sensitivity or even the need for antibiotic. This has contributed to high level of antibiotic resistance especially to dangerous diseases like Typhoid fever (20).

4. i. Environmental health.

This appears to be a totally neglected field in Jaffna. Historical and cultural perspective of cleanliness among Tamils is not to be seen or at the most limited to front portions of the households only. The environment plays a major role in infectious diseases specially diarrhoea in children. Also it influences mental development of the children. We have to think seriously of coordinating all authorities concerned with management of environment and develop strategies to create good environment.

Attempts are made in LTTE controlled areas to keep the environment clean (21). At once a year, on the Martyr's Day, every nook and corner of these areas are cleaned up. Deforestation is kept to minimum and reforestation or at least planting trees where jungle is destroyed is being undertaken.

4. j. Economy.

Economy is ruined by the war. It is essential to revive the economy. But, uncontrolled open economy in a debilitated society can only widen the gap between the haves and the have-nots. As long as the poor remains poor, revival of health status is not possible.

In order to revive the economy, agriculturists research and develop cash crops. One such crop is tobacco (22). Research papers and especially popular articles as, "can't we raise the standard of our cigars to international standards (23)" create positive attitudes among public, particularly children, and promote consumption. Further, cultivation, processing, and storage in populated areas force every body to inhale vaporising nicotine. In developed countries, smoking in public places has been made punishing offence because of the risks involved.

Agriculture should provide good nutrition and good health. We have seen people selling their produce like milk only to purchase bread, toddy, or tobacco. We have to choose between quick money with expenditure and consumption of nutritious food leading to good health.

4. k. Health research:

As mentioned above, health personnel in the war affected area have hardly any time to do research. However, some researchers have found time to document their observations. Apparently, there is a risk of political or some other factor influencing research. For example, work on a PhD thesis (24) has recorded reduction in alcoholism in Jaffna after the Jaffna Exodus. It is difficult to believe as there is a concern about proliferating licensed and illicit liquor outlets and steep increase in alcohol consumption after Jaffna came under military control. Another plain fact, to support the doubt, is the action taken by the authorities to meet the demand for alcoholic drinks: the shipment of essential supplies like food substances were withheld and alcoholic drinks were loaded in ships bound to Jaffna. Under these circumstances if a research reports reduction in alcoholism, it is inevitable to suspect manipulation of the results.

All above mentioned and other possible problems have to be studied by academics without bias but with a view to improve the standard of living of our people.

4. Recommendations to restore health of our people:

- Meaningful solution to the struggle
- Normalization of life styles
- Health education
- Confidence and capacity building
- Improve legitimate health care
- Improve maternity and child health care.
- Reduce violence against women and children.
- Coordinated effort for environmental sanitation
- Promote people participation in recreational activities and sports.
- Strict enforcement of law and order
- Educate people about dangers of indiscriminate use of drugs.
- Promote agriculture and fishing for local consumption.
- Meal for school children
- Guarded economical activities
- Honesty among academicians and researchers
- Screening for communicable diseases, especially for AIDS
- Treatment of scars and prosthesis for needy
- Analyse the mental state of the politicians and journalists

5. Conclusion:

When WHO defined health, it also had another ambitious goal: HEALTH FOR ALL BY THE YEAR 2000. We also should aim for same as the saying goes, “Health is Wealth”. If we achieve the state of health, our people will be once again hard working, industrious and hospitable.

Health authorities alone can't achieve this. It has to be a multidisciplinary effort with people's participation. It is time to brake the vicious cycle of low social values, poor health and poor economic activities.

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