

# Defending Health Against Persecution, Violence, And Armed Conflict

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- [Home](#)
- [Archives](#)
- [Topics](#)

## US Diplomacy And Global Health

by [Christopher R. Albon](#) on May 24, 2010[edit]

Just weeks after [publishing a paper](#) in PLoS Medicine, Harley Feldbaum has a [new report at CSIS on US health diplomacy](#). The report is worth checking out, as Feldbaum is, for my money, the leading thinker on the topic. Here is an excerpt from the abstract:

Numerous reports have outlined the goals the Obama administration should pursue in global health. This brief does not seek to add to those or to propose detailed policy solutions to the cases discussed. Instead it seeks to demonstrate that U.S. global health policy has global political ramifications that cannot be ignored and that demand permanent capabilities within the U.S. government. It describes the need for improved U.S. diplomatic capacity on global health, outlines the currently fractured architecture of the U.S. government on this issue, and issues recommendations for building diplomatic capacity for global health.

Certainly food for thought.

{ Comments on this entry are closed }

## Good Reads For May 21 2010

by [Christopher R. Albon](#) on May 21, 2010[edit]

Enjoy the weekend!

## The New Rules: Keeping Disasters in Perspective

Between Iceland's Eyjafjallajokull volcano and the oil slick in the Gulf, everybody seems to have disasters on the brain lately. Some of it stems from the nonstop global media coverage, while a good portion relates to our growing awareness of climate change. But a lot of this heightened anxiety is simply misplaced. We don't live in an increasingly

dangerous world, whether you're talking wars, terrorism, disasters — or just the weather. In fact, we live in the safest times yet known to humanity. We just choose not to see it that way for a variety of reasons.

### **The hospital ship of the future**

Although Navy, Military Sealift Command and civilian officials have raved about the hospital ships Comfort and Mercy, they're 25 years old and can be difficult to manage — their size (70,000 tons) and deep draft (about 30 feet) means they often must anchor in deep water and accept patients by air or boat. So we took the chance Tuesday to ask Navy Surgeon General Vice Adm. Adam Robinson and Rear Adm. Mark "Buz" Buzby, head of Military Sealift Command, what they would incorporate into a new generation of hospital ships, if they could start with a clean sheet of paper.

### **Eight U.S. Troops Will Remain in Haiti, Down From 20,000+**

And it looked like they might be there to stay. "Haiti, for all intents and purposes, became the 51st state at 4:53 p.m. Tuesday in the wake of its deadly earthquake," noted Time magazine. "The U.S. military effort alone will soon have 33,000 troops ashore or in direct support of the relief operations," predicted the Weekly Standard. Gen. David Petraeus, the head of U.S. Central Command, said he was watching to see if there might be an impact on operations in Central Asia and the Middle East.

That didn't happen. In a bloggers roundtable this week, Army Maj. Gen. Simeon Trombitas, the head of Joint Task Force Haiti, said that only 850 servicemembers were left on the ground in Haiti. And the military task force there, he added, will dissolve at the end of this month.

### **Winning Hearts and Minds? Examining the Relationship Between Aid and Security in Kenya**

This case study on Kenya, researched and written by Mark Bradbury and Michael Kleinman, is the first in a series of publications presenting the findings of a two-year FIC comparative study on the relationship between aid and security in northeastern Kenya and in five provinces of Afghanistan. The overall study has focused in particular on trying to determine the effectiveness of aid in promoting stabilization and security objectives, including by helping to "win hearts and minds" of local populations. (For more information and links to publications related to the study see the Aid and Security project page.)

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### **CSIS: DoD Needs To Address Civilian Health Systems**

by Christopher D. Albon on May 20, 2010 [edit]

CSIS Global Health Policy Center has published a [new report on the role of the Department of Defense in three global health areas](#): (1) global pandemic preparedness, (2) military-to-military health cooperation, and (3) protecting and rebuilding civilian health systems in conflict environments. While the report contains solid points throughout, I was most impressed with its argument regarding civilian health systems. In the report, Eugene Bonventure, James B. Peake, and Elizabeth Morehouse argue that the DoD's approach to civilian health systems in conflict has so far been ad hoc, despite the fact that effective health systems are often a core component of legitimacy-building in counterinsurgency operations:

“Preserving civilian health system capacity during conflict is not only an obligation of the military, but it actually helps the military achieve its own strategic objectives. The better the civilian health sector functions during a conflict, the fewer injured and sick civilians will require treatment in military field hospitals that are ill-equipped to address many of the needs of the women, children, and elderly who represent the demographic groups most affected by conflict. During a counterinsurgency, where a host nation’s legitimacy is tied to the population’s perception of its government as a reliable and equitable service provider, preserving civilian health capacity is also strategically important. The more effectively the government provides essential services (including public health services) to its population, the sooner a counterinsurgency can be won.” (Bonventure and Peake 2010, 24)

The authors propose a “A New Paradigm Of Preserving Civilian Health System Capacity” wherein war planners do more than simply not bomb health facilities:

“Current DOD policy mandates that its soldiers and contractors adhere to International Humanitarian Law (IHL) in all conflicts, regardless of the conflict’s context or character. IHL, which includes not only the four Geneva Conventions, but also treaties and customary law, requires that militaries minimize the impact of war on civilian public health and medical care. This responsibility is more complex than merely including hospitals on “do not target” lists. Minimizing the impact of conflict on civilian health requires optimizing efforts to preserve the integrity and capacity of the affected nation’s health system as a whole.” (Bonventure and Peake 2010, 23)

To develop this paradigm, the report offers five suggestions for the DOD regarding civilian health systems in conflict:

“Recommendation 1: The DOD should develop a civilian health theme for conflict and postconflict planning in close consultation with other relevant U.S. government and other agencies.” (Bonventure and Peake 2010, 26)

“Recommendation 2: DOD should support a civilian-led comprehensive strategy for assisting a conflict-affected nation to reconstruct essential health services.

“Recommendation 3: DOD should be prepared to play a major role in support of the reconstruction of the military health services of conflict-affected nations in close coordination with civilian health sector reconstruction.” (Bonventure and Peake 2010. 27)

“Recommendation 4: DOD should support a transition strategy that parallels and facilitates the transition from relief to development.” (Bonventre and Peake 2010, 27)

“Recommendation 5: All agencies including DOD should measure the impacts and outcomes that their conflict-related civilian health assistance programs have on health and on security and stability.” (Bonventre and Peake 2010, 28)

Recommendations 1 and 2 are dead on. For too long DoD war planners have considered civilian health systems the sole responsibility of the humanitarian space. Often, US military’s engagement of these systems is only slightly more than “don’t bomb hospitals”. However, foreign health systems are central to US interests. Health systems are fundamental bureaucracies of the state. They provide the most observable indicator of a government’s priority towards its citizens and its capacity to act on it. In all non-failed states, the political legitimacy of the government is inherently linked with the citizens’ perception of service delivery by the state. Weakened health systems reduce government legitimacy and open the door to illegal political challengers. Quite simply, health systems are central to national stability and security.

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## **Hizbul Islam Attacks Health Clinic Over Debt**

by [Christopher R. Albon](#) on May 16, 2010[edit]

On May 5th, Somali fighters of Hizbul Islam [attacked the Dr. Hawa Abdi camp outside Mogadishu](#). The camp had been a refuge for up to 6,000 Somali families during the country’s long war-torn history. Named after the gynecologist who founded the camp, it offered a variety of services, including a clinic operated by Médecins Sans Frontières.

Reportedly, the gunbattle erupted after a [guard hired by Médecins Sans Frontières owned money to a local resident, who contacted Hizbul Islam](#). The Islamist fighters came to arrest the guard, who refused to pay. Despite the death of the Hizbul Islam commander in the firefight, the Islamists eventually overran the camp’s guards. They then detained 20 local staff members and shut down the health clinic.

On May 9th, the fighters withdrew from the camp but continued to hold the staff members hostage. Furthermore, the clinic was devastated by the fighting:

They left behind ruined infrastructure, barren storerooms and an atmosphere of terror. “The hospital cannot function at the moment due to severe damage from the attack,” Deqo said. “All medical personnel are not working because of the bad condition the hospital is in. Over the last two days, eight children died in the feeding center because the nurses could not work and feed them.”

The point? Attacks against humanitarians are not always strategic. Sometimes the presence of undertrained guards and money is enough.

## UAVs For Humanitarian Operations

by [Christopher R. Albon](#) on May 14, 2010 [[edit](#)]



With US forces in Afghanistan scattered across large and small bases, the military has faced a logistical nightmare. In turn, this has driven the Army and Marines to look for new solutions to the age old problem of military logistics. [Two of the more promising solutions comes from rotary wing UAVs: specifically the A160T Hummingbird and the K-MAX](#). Both pilotless aircraft have carried 1,250lb sling loads over 172.5 miles in test flights and the latter has been flown continuously for 18 hours. The military hopes to use these UAVs to cheaply and safely ferry supplies to US forces during operations. But, do UAVs also have a role to play in humanitarian and disaster relief operations?

Experience in Haiti has shown that logistics is an area of humanitarian-military cooperation with major promise. The power of the US military to transport cargo from A to B is unparalleled. Rotary wing UAVs could improve that capacity through high speed, low cost aerial resupply to humanitarians on the ground. A hospital needs a generator? Organizing a ground convoy could involve 20 to 50 people. One A160T Hummingbird could complete the same mission in less time with only a small crew of remote pilots (who do not even need to be in the disaster zone). Using UAVs for humanitarian purposes is a growing idea, in South Africa UAVs are being tested as [airborne medical couriers in rural regions, carrying specimens to testing facilities](#).

It is something to think about.

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## Why Japan Does Not Have Hospital Ships



Last week, the [US Navy deployed USNS Mercy](#) on a humanitarian deployment in the Pacific. The news prompted [Kyle Mizokami of War Is Boring to rue Japan's lack of soft-power humanitarian cruises of its own](#):

Here's a question: why doesn't Japan have its own version of the Pacific Partnership? Why doesn't Japan have two former supertankers, converted to 1,000 bed hospital ships, and sail them from Africa to the South Pacific, delivering non-emergency humanitarian assistance? With its aversion to hard power and immense reservoirs of talent, technology, and cash, Japan should be the absolute king of soft power. Despite that, it displays an utter lack of imagination and a hesitation to copy even highly effective ideas. Yet again it prefers to just lend a hand to the Americans than do anything on its own.

Japan's lack of hospital ships has nothing to do with a limited imagination or a hesitation to import good ideas from overseas. In fact, many would argue that historically Japan's power came precisely from its willingness to adopt good ideas from other societies. No, the reason for no Japanese hospital ships rests squarely in Article 9 on the Japanese constitution.

Amongst other things, Article 9 requires that "land, sea, and air forces, as well as other war potential, will never be maintained" by the island nation. In other words, it is illegal for Japan to have a military. The nation's Self-Defense Force is a civilian organization, with its members even allowed to quit at any time. Article 9 is a security guarantee to Japan's neighbors. Without a standing military, the thinking goes, Japan can never threaten other countries with war.

What do hospital ships have to do with military aggression? Nearly everything. Hospital ships are an old concept and until a decade ago they had only one purpose: to provide medical supports to military forces on campaign. Floating hospitals are a requirement for amphibious operations. This is precisely the reason USS Kearsarge and USS Boxer, ships built to conduct amphibious landings, are excellent soft power providers: they contain massive medical facilities. These onboard hospitals were not originally designed to provide free surgeries to Nicaraguan children, but to give first rate trauma care to Marines storming the beach.

The building of a Japanese hospital ship could very easily be seen by its neighbors as preparation for a more militarily aggressive foreign policy. Many would argue the same should be said about [China's new hospital ship](#). Yes, it could conduct soft power operations, but it could also provide vital medical services during any amphibious invasion of Taiwan.

## Good Reads For May 10 2010

by [Christopher R. Albon](#) on [May 10, 2010](#)[[edit](#)]

So much good articles, so little time. Enjoy!

### **Pushing the Pentagon to Prevent Genocide**

The insertion of that line into the Quadrennial Defense Review marked a paradigm shift: Previous versions of the strategic plan included no such references to stopping “mass atrocities” as a military imperative. It was a quiet victory for advocates of a new vision of U.S. national power that would make genocide prevention a military priority.

### **NATO and the NGOs: honeymoon over**

The alliance between the international forces, the Afghan government, and the NGOs had its virtues as long as NATO forces still had the military advantage and controlled nearly 90% of Afghan territory. Up until 2005, the NGOs “embedded” in the “reconstruction of Afghanistan” were able to establish themselves in the wake of the international troops and their local allies, without worrying too much about the reaction of the then extremely weakened opposition.

### **The Rebirth of USAID**

The restoration of USAID will take herculean reform and uncommon patience, if it is even possible at all. No doubt leaking the Presidential Study Directive this week, in advance of the National Security Strategy and months before the completion of the Quadrennial Diplomacy and Development Review, was deliberate. The Obama administration (or at least a portion of it) figures it can stake out its agenda (and perhaps claim on resources) before the rest of the interagency consumes all of the policy and budget oxygen inside the Beltway. As with development itself, however, this directive will only be as good or bad as its implementation, and on that score there are many questions that will need to be addressed.

### **Humanitarian Aid: A Warmonger’s Best Friend?**

If Polman’s *Guardian* interview is any indication, her book will be a huge hit for taking extreme positions and providing a wealth of quotable quotes. At one point, she is asked how she would describe the aid agencies that provided relief to Rwandan Hutus, many of them genocidaires but plenty also ordinary civilians, who fled into the now Democratic Republic of Congo in the wake of the Rwandan genocide. Polman’s response? “Perhaps war criminals.”

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## A Medal For Courageous Restraint?

by [Christopher R. Albon](#) on May 5, 2010 [[edit](#)]

NATO has taken flak for the last few years for the numbers of civilian casualties occurring in the Afghanistan campaign. With the war's military leadership, especially General Stanley McChrystal, emphasizing the need to win the support and confidence of the civilian population, there has been serious pressure on commanders to limit civilian deaths whenever possible. Despite this, civilian deaths have risen in the country since last year.

Now, NATO has come up with a new plan to reduce civilian casualties: [The Courageous Restraint Medal](#):

"British Maj. Gen. Nick Carter, the NATO commander of troops in southern Afghanistan, proposed the idea of awarding soldiers for "courageous restraint" during a visit by Hall to Kandahar Airfield in mid April. McChrystal is now reviewing the proposal to determine how it could be implemented, Hall said." ...

"There should be an opportunity to recognize and celebrate the troops who exhibit extraordinary courage and self-control by not using their weapons, but instead taking personal risk to de-escalate tense and potentially disastrous situations," the statement said." ...

"NATO commanders are not planning to create a new medal or military decoration for "courageous restraint," but instead are looking at ways of using existing awards to recognize soldiers who go to great lengths to avoid civilian casualties, Hall said."

Okay, so maybe there is not really going to be a medal, but still, recognizing restraint in combat? That is a world away from traditional medals which highlight martial qualities.

Will it work? Not a chance.

I typically avoid discussing internal Armed Services politics for a simple reason: I am not in the military. However, nothing in my experience with servicemen and women leads me to believe they want to celebrate 'restraint'. There is a poignant Marine Corps saying, attributed to a Korean War veteran: "Never send a Marine where you can send a bullet, and the bigger the bullet the better". Any act of courageous restraint, by definition, sends Soldiers, Sailors, Airmen, Marines, and Coast Guardsmen in first. And there lies the problem. Winning a medal for courageous restraint would be a scarlet letter, warning that the owner put his subordinates or compatriots at risk when he did not need to, when a bullet would do.

There are ways to reduce civilian casualties, but this is not one of them.

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## Good Reads For May 3rd, 2010

by [Christopher R. Albon](#) on May 3, 2010 [[edit](#)]

A heap of interesting news articles and blog posts were published last week. Here is a few to enjoy with your monday morning coffee.

### Rape As A Weapon Of War

Michel Martin of National Public Radio spotlights UN efforts to combat rape as a tactic of warfare. She interviews Margot Wallstrom, the Special Representative for Sexual Violence in Conflict—the first person to hold the position. “If we can ban cluster bombs, we can ban rape as a weapon of conflict.”

### In Praise of Aerial Bombing

Ever since the U.S. Strategic Bombing Survey cast doubt on the efficacy of aerial bombardment in World War II, and particularly after its failure to bring victory in the Vietnam War, air power has acquired a bad reputation. Nowadays, killing enemies from the skies is widely considered useless, while its polar opposite, counterinsurgency by nation-building, is the U.S. government’s official policy. But it’s not yet time to junk our planes. Air power still has a lot to offer, even in a world of scattered insurgencies.

### Pandemic Influenza: Science, Economics, and Foreign Policy: Session Three: Foreign Policy

This session was part of a CFR symposium, Pandemic Influenza: Science, Economics, and Foreign Policy, which was cosponsored with Science Magazine.

### Have Helmand troops been told to lie low during election?

Britain has not lost a soldier in Afghanistan since the day after Gordon Brown called the general election – that’s more than three weeks.

### UN Evacuates Some Staff From Embattled Kandahar: What About Those Left Behind?

The awful reality is, national staff are far more vulnerable than their international colleagues, especially in deteriorating places like Kandahar. They must live amongst their prospective killers, without the physical protections afforded to expatriates. I believe that, if a situation is dangerous enough for internationals to be evacuated, national staff should at least be given the option of leaving as well, even if that could mean them resettling elsewhere permanently. I hope the UN is giving its national staff in Afghanistan this choice. Does anyone know if it is?

## **Mass Sickness of Afghan Schoolgirls Raises Poisoning Fears**

Since April 21, at least eighty Afghan schoolgirls at three schools in the increasingly violent northern city of Kunduz have mysteriously fallen ill after reporting a strange smell in their classrooms. Most of the affected girls have been hospitalized briefly and released, but the sudden, mysterious epidemic of fainting and nausea is raising fears of poisoning by opponents of girls' education.

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## **USNS Mercy Deploys On Pacific Partnership**

by [Christopher R. Albon](#) on April 29, 2010 [[edit](#)]



The venerable US Navy hospital ship, USNS Mercy is [deploying tomorrow on Operation Pacific Partnership 2010](#). Her deployment will last until late September during which riders and crew will conduct health and construction missions in Vietnam, Cambodia, Indonesia, and Timor-Leste. Mercy's 500 riders include both military and NGO volunteers, including health workers from [InterPlast](#), [International Relief Teams](#), International Aid, [Loloma Foundation](#), [Project HOPE](#), [Rotary International](#), [Shriners](#), University of California at San Diego Pre-Dental Society, and [World Vets](#). In addition, Australia, Canada, Chile, France, Japan, South Korea, New Zealand, Singapore, and Tonga are providing personnel to support the hospital ship's mission.

Pacific Partnership was born after the US military's response to the 2004 tsunami. After realizing the capacity of health diplomacy to win friends and allies, US Pacific Fleet decided to follow up Unified Endeavor by sending the Mercy back to the region in 2006. Pacific Partnership 2010 is the fifth time the humanitarian civic assistance operation to be conducted.

You can follow Pacific Partnership [online](#) and on [twitter](#).

## Video: War And Global Health Conference

by [Christopher R. Albon](#) on April 28, 2010 [[edit](#)]

Friend of the blog [Patrick Clarkin](#) has found a short video on the recently completed conference on War and Global Health at the University of Washington:

Looked like a good event. Maybe next year...

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## The New Laws Of War

by [Christopher R. Albon](#) on April 28, 2010 [[edit](#)]

Last week Harper's interviewed Gary Solis, Georgetown University Law Center professor and author of [The Law of Armed Conflict](#), on the [legality of some of the United States' more controversial actions in recent years](#). This includes a legal take on the events surrounding the [Wikileaks video released a few weeks ago](#) showing a U.S. Army helicopter mistaking two groups of civilians as combatants and killing them.

While all of Professor Solis' interview is useful to students of war, it is the last question really hit home for me:

*6. Do you expect to see the law of armed conflict change to more closely address conflicts involving nonstate actors, like terrorist groups?*

Yes, such changes seem inevitable. The Geneva Conventions remain vital and viable in the “war on terrorism,” but in the foreseeable future conflicts will likely continue to be between states and non-state actors. Such conflicts are not directly addressed in the 1949 Geneva Conventions. Considering specific issues of non-international armed conflict, and new weapons and tactics that currently vex combatants and commentators alike, will

what armed response if any is appropriate to cross-border terrorist attacks? Will white phosphorus munitions be banned? Can there be international agreement on the lawfulness of targeting civilian communication facilities? What is the status of captured members of armed opposition groups? Should depleted uranium munitions be prohibited?

Solis' is correct. Western countries spend large amounts of money and time educating their militaries on the laws of war, yet those soldiers are increasingly faced with situations not discussed in the Geneva Convention or elsewhere. Given this, and given that nonstate actors (accounting for more than half of combatants) are not beholden to the rules of war, the Geneva Convention's applicability to modern war is rapidly and tragically decreasing.

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## **Good Reads For April 28, 2010**

by [Christopher R. Albon](#) on April 28, 2010 [[edit](#)]

Early this week, much of South Africa was disconnected from the internet due to a problem with an undersea cable. For this reason there was no new posts on Conflict Health. However, everything is now back up and working and here is a list of the stories I missed last week. Enjoy.

### **Our Business: Trafficking Weapons, Delivering Aid**

The global transport industry plays a crucial role in conflict economies. Ethical Cargo, a new information portal by one of our partners, the Stockholm International Peace Research Institute (SIPRI), sheds light on this role and helps donors to choose the right companies when giving out contracts.

### **Feeling Warehoused in Army Trauma Care Units**

But interviews with more than a dozen soldiers and health care professionals from Fort Carson's transition unit, along with reports from other posts, suggest that the units are far from being restful sanctuaries. For many soldiers, they have become warehouses of despair, where damaged men and women are kept out of sight, fed a diet of powerful prescription pills and treated harshly by noncommissioned officers. Because of their wounds, soldiers in Warrior Transition Units are particularly vulnerable to depression and addiction, but many soldiers from Fort Carson's unit say their treatment there has made their suffering worse.

### **How to Write About Afghanistan**

Always use the word 'war-torn' in your title. Subtitles may include the words 'tribal,' 'Taliban,' 'corrupt,' and 'Sharia.' Also useful are words such as 'shuras,' 'fighters,' 'refugees' and 'insurgency.' Do not distinguish between different ethnic groups with different languages, religions and histories, or regions with different landscapes and

same way, and vice versa. Whenever possible, mention Pashtunwali. (Note: you do not need to understand what Pashtunwali is. You get points for mentioning it anyway.)

## **We Have Met the Enemy and He Is PowerPoint**

“PowerPoint makes us stupid,” Gen. James N. Mattis of the Marine Corps, the Joint Forces commander, said this month at a military conference in North Carolina. (He spoke without PowerPoint.) Brig. Gen. H. R. McMaster, who banned PowerPoint presentations when he led the successful effort to secure the northern Iraqi city of Tal Afar in 2005, followed up at the same conference by likening PowerPoint to an internal threat.

## **1889 Pandemic Didn’t Need Planes to Circle Globe in 4 Months**

The 1889 Russian flu pandemic circled the globe in just four months, captivating the world, despite the lack of airplanes or hyperventilating cable news stations.

If that was possible, closing down air traffic in the event of a new pandemic might not do much, argue the authors led by Alain-Jacques Valleron, an epidemiologist at the Institut National de la Santé et de la Recherche Médicale in Paris.

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## **MoD’s Guide To NGOs**

by [Christopher R. Albon](#) on April 22, 2010 [[edit](#)]

In early March, the Department of Defense [published a “humanitarians 101” handbook](#). The work is a primer for the military on how to interact with humanitarians and other NGOs, especially in the field. Last week at the World Bank’s Innovation Fair, I had the opportunity to have some beers with [Laura Hudson](#) of [FrontlineSMS](#) on humanitarian-military relations in the UK’s Ministry of Defense. Laura knows her stuff, and pointed out that the MoD’s Development, Concepts, and Doctrine Centre (DCDC) had previously published their own guide to NGOs, titled [Sharing The Space](#):

Sharing the Space aims to be a back-pocket guide for personnel operating alongside civilian organisations, providing advice on the likely roles, motivations and methods of NGOs. Greater understanding of their civilian counterparts in theatre should lead to an appropriate dialogue between the military and aid organisations.

You can download a PDF of Sharing The Space [here](#).

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## **World Bank’s Massive Data Release**

by [Christopher R. Albon](#) on April 20, 2010 [[edit](#)]

Today, the World Bank released an incredible catalog of previously closed data on their [new data website](#). The collection includes over 2000 variables gathered by the World Bank and other organizations, from the number of start-up procedures to register a business to the number of nurses per 1000 people. This is not the rough data researchers are often forced to use, but high quality clean data collected using well developed methodologies.

For quantitative international relations researchers today is Christmas. However, probably more important is the use of this data by start-ups and other for-profit groups creating useful tools for practitioners and policymakers alike.

For easy browsing, I have listed over one thousand of the available variables after the jump.

[Read More...](#)

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## Suicide Bomb Against IDP Camp

by [Christopher R. Albon](#) on April 20, 2010 [[edit](#)]

If anyone needed more evidence that the rules of war have little sway in AfPak, [early this week Taliban fighters attacked a Pakistan an IDP camp in Pakistan's North West Frontier Province](#). The attack allegedly consisted of two suicide bombers and killed 41 IDPs. In response, the United Nations has been forced to suspend relief operations in that area of the troubled country.

The motive behind the bombing is unclear, but Kohat police chief Dilawar Khan Bangash said “it seems the purpose was to target members of the Manikhel and Baramadkhel tribes who had constituted a large percentage of those fleeing recently”.

He said the bombers, who had disguised themselves by wearing loose ‘burqas’, could have been seeking “revenge” as members of those tribes had raised a militia to fight Taliban militants in their areas. According to media reports, militant outfits based in Punjab Province in the east took responsibility for the blasts.

“We are not safe. At home we face death and when we try to find safety by leaving our homes, we confront death here too,” Kharan Khan, a 60-year-old IDP in Kohat, told IRIN. He described “scenes of mayhem and chaos” as the bombers struck an area where IDPs were queuing to collect food rations.

In modern war, neutrality offers little protection, both to those providing humanitarians assistance and those needing it.



## **Criminal Cleansing in Mexico and the Coming of the Narco-Refugees**

by [Paul Rexton Kan](#) on April 19, 2010 [[edit](#)]

*This is the third in an excellent series of guest posts by [Paul Rexton Kan](#). The [first](#) and [second](#) articles explored drugs in warfare and peak insurgency. Kan also recently contributed to a special issue of [Small Wars and Insurgency](#).*

The ongoing drug cartel violence in Mexico took an ominous turn last month. While the killings of two Americans who were consular employees in Ciudad Juarez was a serious escalation, even more troubling was an event that took place several miles away and several days later. [Thirty people of the small Mexican town of El Porvenir walked the 860 yards to the US border](#), crossed it and went to a small Texas town of Ft. Hancock to seek political asylum from an explicit cartel threat. The threat was simple as it was cruel—leave before the outbreak of a gang war or your children will be targets...unless you provide 5000 pesos per child for protection. The gang was able to purge the town of human obstacles and earn money for weapons from those who could afford to pay the extortion money.

Political asylum cases are not new, but those who qualify are targeted for their political beliefs or ethnicity in countries that are typically repressive or coming apart. Mexico is neither and the reason people are being targeted in Mexico by cartels and gangs is not for what they believe or for who they are, but for what they do—police who investigate crimes; mayors who govern towns; journalists who write about the violence. And now people are being targeted merely because they are in the way, because of where they live.

If such acts of criminal cleansing are repeated and sustained, US communities will feel an even greater burden on their systems of public safety and public health from “narco-refugees”.

Given the ever increasing cruelty of the cartels, the question is whether and how the US should begin to prepare for what could be a new wave of people like those whose hometown of El Porvenir is Spanish for “the future”.

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## **Post-Conference Good Reads**

by [Christopher R. Albon](#) on April 18, 2010 [[edit](#)]

For those that did not know, I was in Cape Town for the World Bank’s Fragile State [Innovation Fair](#) and thus not able to post on Conflict Health. More on the conference later, but for now, here is some articles I enjoyed while in Cape Town.

### **On Battlefields, Survival Odds Rise**

is new ways to control bleeding before soldiers lapse into comas or their vital organs shut down. Thanks to new clotting agents, blood products and advanced medical procedures performed closer to the battlefield, wounded American soldiers are now surviving at a greater rate than in any previous war fought by the U.S.

### **Deadly Afghan Bus Shooting Spotlights Civilian Harm**

It's the latest in a series of deadly "escalation of force" incidents that have caused civilian outrage. Gen. Stanley McChrystal, the top U.S. commander in Afghanistan, has issued guidance that makes it clear to troops on the ground that they need to do their utmost to avoid civilian casualties, even if it means more risks in the short term.

### **War Kills; COIN Kills Fewer**

But I don't know how you can wage a war that does not involve civilian casualties, which is one of the reasons war is a wretched thing that should be avoided when the national interest is not implicated, and I don't know how you can neglect the reduced proportion of U.S.-caused deaths when evaluating the success of a strategy that seeks to get that civilian-casualty-causation figure down. No one I have ever encountered who has waged, studied or advocated for counterinsurgency has made the case that counterinsurgency is a kinder or gentler method of warfare, or that it's no more than development work with an M4. They tend instead to use phrases like the "brotherhood of the close fight" to underscore just how nasty and brutal it actually is.

### **Navy Thinker Calls for Bigger U.S. Navy with Smaller Ships**

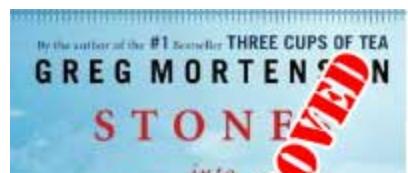
In a follow-on article for the same publication entitled, "More Henderson, Less Bonds," the officer argues more forcefully for a Navy that can have a wider, more persistent presence across the globe, even at the expense of firepower. Hendrix compares today's 9,000-ton destroyers and 100,000-ton aircraft carriers to American baseball player Barry Bonds, a homerun-hitter who commanded a multi-million-dollar salary. Smaller, more numerous ships he likens to Ricky Henderson, a less famous baseball player who quietly and reliably scored runs through less dramatic hits that earned him a high on-base percentage.

{ Comments on this entry are closed }

## **Petraeus' Book Recommendation**

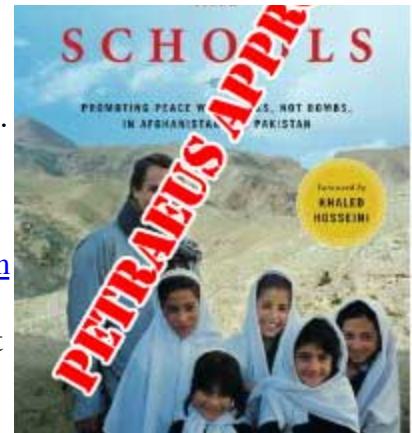
by [Christopher R. Albon](#) on April 8, 2010 [[edit](#)]

Earlier this week, Tom Ricks' Best Defense blog [posted an interview](#) with General David Petraeus. In the interview, the CENTCOM Commander was asked what books he recommended to his staff. His answer:



that, at present, we're focused on a number of official reports/analyses; they're keeping us occupied for the time being.

This is an unconventional choice for one of America's top military minds, considering the book's full title is "[Stones into Schools: Promoting Peace with Books, Not Bombs, in Afghanistan and Pakistan](#)". I cannot imagine Patton recommending a book on improving the lives of children in his battlespace. Of course, I am not complaining. It is great to see that Petraeus looks outside the military-intellectual box for insights into soft power. Now, if only he read Conflict Health.



{ Comments on this entry are closed }

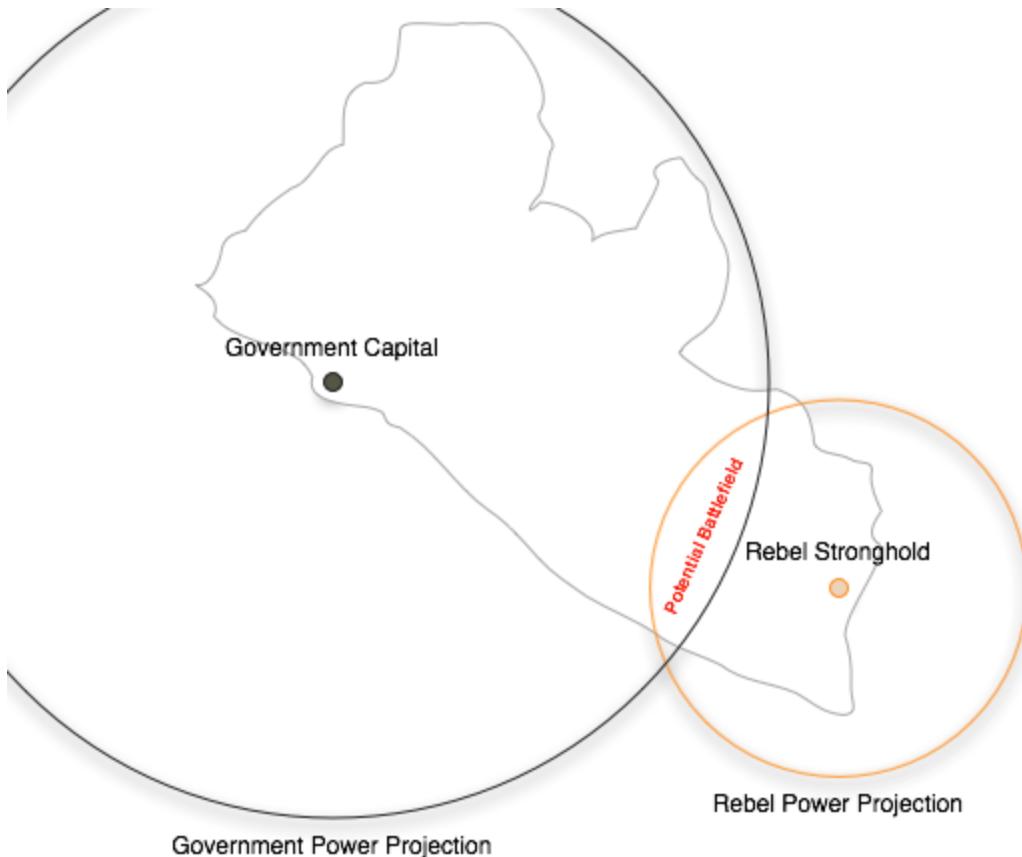
## [Predicting Civil War Battlefields](#)

by [Christopher R. Albon](#) on April 7, 2010 [[edit](#)]

In the 1960s, political scientist Kenneth Boulding argued that military power was depleted by geographic distance. The cost of logistics and long range weapon development meant that most states are exceptionally limited in their ability to project power. In other words, Belize has little to fear from Mozambique's military power. Called the [loss of strength gradient](#), Boulding's theory refined how global strategists thought about power. Last week, Halvard Buhaug published a brilliant extension of Boulding's theory by applying loss of strength gradients to civil wars (unfortunately it is gated):

"I argue that a significant factor influencing the location of civil wars relative to the capital city is the power distribution between the state and the non-state actors. In countries where the state is strong—typically in institutionally consistent and wealthy regimes—or the rebels are very weak, emerging conflicts are likely to occur in the remote periphery. Weaker states pose less of a threat to armed non-governmental groups and may not be able to exert force outside urban areas, so in such countries the battles are expected to take place closer to the state's home base." (Buhaug 2010, 108)

Here is a quick graphic I created demonstrating Buhaug's theory:



Buhaug's paper is no less than a first attempt to predict the areas of a country most likely to be affected by political violence. Developed more, the theory could help the international community identify regions most at risk during intrastate armed conflict. I am looking forward to see how this vein of research pans out.

{ Comments on this entry are closed }

## [\*\*AidData Offers Development Data\*\*](#)

by [Christopher R. Albon](#) on April 6, 2010 [[edit](#)]

A special thanks is due to [Alanna Shaikh](#) for introducing me to [AidData](#). AidData, currently in beta, offers financial data on organizations in the development sector.

The core of the AidData database currently encompasses multilateral and bilateral donor projects spanning the years 1945-2009. It contains information from traditional aid sources such as the OECD's Creditor Reporting System (CRS) as well as donors not captured by the CRS and activities that do not fit the OECD definition of Official Development Assistance (ODA). AidData augments existing data by publishing more complete project descriptions and more detailed aid project purpose codes. In particular,

non-DAC bilateral donors (NDBs) to provide a more complete picture of development finance flows and activities. This resource will allow donor organizations, citizens in donor countries, researchers, NGOs, recipient governments, and, ultimately, the beneficiaries on the ground in developing countries to gain a more detailed understanding of past and present trends in aid.

The hoarding of data, especially financial data, by NGOs is a huge problem in the development world. Despite all the hype over openness, many NGOs continue to keep their data closed to outsiders for little reason. Hopefully projects like AidData will give us a peak inside these organizations and their activities.

{ Comments on this entry are closed }

## **Stop Worrying About China's "Carrier Killer"**

by [Christopher R. Albon](#) on April 6, 2010[edit]

The [Chinese antiship ballistic-missile \(ASBM\)](#) has garnered immense attention from the media and military thinkers in recent months. Most of this punditry has varied only in the level of sheer terror at the thought of these "carrier killers". In this month's Proceedings, fellow USNI blog contributor [Craig Hooper](#) and [myself](#) argue [for a different perspective](#):

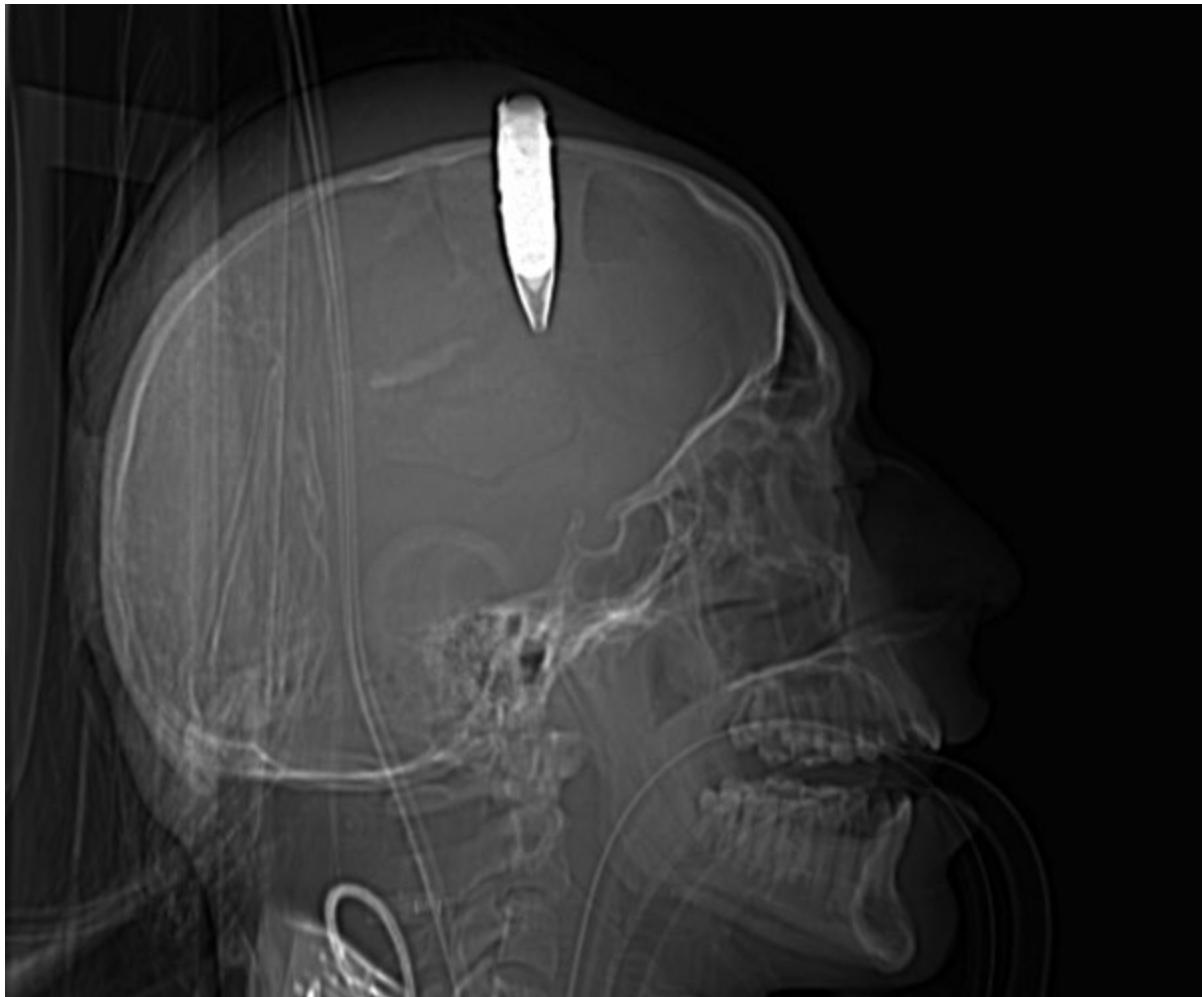
By focusing on the distant question of supercarrier vulnerability, naval analysts forfeited an ideal opportunity to frame the ASBM threat as a shared regional hazard. In Cold War Europe, farsighted strategists wasted no time in portraying Russia's medium-range RT-21M Pioneer/SS-20 Saber missile as a European-wide threat. But today, despite the domestic uproar over this Asian "game changer," the U.S. Navy and State Department might do well to exploit the ASBM threat in a similar fashion.

The best counter to China's ASBM is diplomacy, not fear mongering.

{ Comments on this entry are closed }

## **UXO In The Head**

by [Christopher R. Albon](#) on April 5, 2010[edit]



On March 18th, American military health personnel in Bagram [removed](#) a 4.5 mm high explosive incendiary round lodged in the skull of an Afghan National Army soldier. The photo above is real.

“Initially I thought it was a spent end of some sort of larger round,” said Colonel Terreri, who is also deployed from the Wilford Hall Medical Center.

“I saw that it was not solid metal on the inside,” he added. “I then looked at the scout image and could see there was an air gap on one end and what looked almost like the tip of a tube of lipstick at the end and decided this didn’t look quite right.”

Colonel Terreri, a native of Tonopah, Nev., explained when reviewing scans, the radiologist may come across images that reveal information for which the surgical team must be prepared for, and a unexploded ordnance is one of those cases.

He immediately went to inform the neurosurgeon who had already left to prepare for surgery.

“I went directly to the operating room and evacuated all unnecessary personnel,” Major

monitor the patient.”

Major Bini then notified his chain of command and the explosives ordnance disposal team and began to secure areas of the hospital to protect patients and staff.

To add another twist to this already intense situation, Major Bini explained there was another surgical team operating on a patient with multiple life threatening injuries in another operating room and they couldn’t safely evacuate as the patient was in critical condition.

“It was kind of a case of Murphy’s Law coming into play,” said Tech. Sgt. William Carter, the 455th EMDG/TF MED-E NCO in charge of central sterile processing and a medical technician deployed from Wright-Patterson AFB, Ohio. “We had an (operating room) full of trauma cases and we had people in other rooms who were busy taking care of patients and it was really an all hands on deck event.”

Sergeant Carter explained one of the greatest difficulties the teams in the other operating rooms faced was the ability to pass through the cordoned area to gain lab work and blood products.

“We donned our IBA and made sure the individuals in the other operating room did not have to pass through the area and had everything they needed,” he said.

He referred to it as a tag team effort and the team ensured their ultimate goal, which is to save lives, could still be accomplished.

When the explosive ordnance disposal team arrived at the hospital, Major Bini took them to review the CAT scan images. He then proceeded to the operating room, donned his IBA and removed the round from the patient’s head.

After the unexploded ordnance was removed from the patient and given to EOD, the areas were reopened to normal operating room traffic. Major Bini turned the operation over to the neurosurgeon and the operating room team to complete the operation.

{ Comments on this entry are closed }

## **Leaked Video Depicts Civilian Deaths**

by [Christopher R. Albon](#) on April 5, 2010 [[edit](#)]

Wikileaks, the controversial organization known for leaking mountains of classified and private information, [has released 2007 gun camera footage](#) of the killing of a group of civilians, including two Reuters reporters.

The video appears to depict a case of [confirmation bias](#) by the American helicopter pilots. Confirmation bias is the tendency of the human mind to unconsciously prefer information reinforcing existing beliefs. In this case, the fact the pilots were looking for armed insurgents made them predisposed to believe that any item carried by the persons were weapons.

{ Comments on this entry are closed }

## [Anatomy Of An LRA Raid](#)

by [Christopher R. Albon](#) on April 1, 2010 [[edit](#)]

The [BBC has uncovered evidence of 321 people killed](#) in a border raid by the Lords Resistance Army last December. The BBC story outlines the tragic massacre and the inability of the UN forces to protect the population. However, what caught my eye was this map detailing the raid:



From the map we can extrapolate (guess) some LRC techniques and strategies.

1. It is a raid in the purest form. The route is clearly designed to hit as many minor population centers in as short amount of time as possible. The main thrust occurs towards and then onto Poko Road, increasing the speed at which the attackers can travel. The raiders were planning on using speed and surprise to overcome any resistance from the government forces or peacekeepers.
2. The raiders likely split up. Notice on the first two days the raid made four attacks a piece. That is incredibly fast given the distance involved. According to the map key, the distance between the farthest two attacks on the first day is approximately 60-70km. That is too far for a single raid group to cover, especially considering that they are “country miles”.
3. The main operation (eight attacks) occurred in the first two days. The remaining three days involved only two additional attacks, either from fear of counterattack or being weighed down with loot and prisoners. Geographically, it is a shallow raid, the attackers are never far from the safety of the river, especially if they left a force in Mavanzongda to cover their backs.

I make no claim to expertise in military strategy or operations, and I hope readers with more knowledge in this area will be able to shed some light on the anatomy of the raid.

Here is a satellite view of the river crossing:



{ Comments on this entry are closed }

## [Video: US Navy And Global Health](#)

by [Christopher R. Albon](#) on March 30, 2010 [[edit](#)]

Somehow I missed [this CSIS video](#) on the future of the US Navy's involvement in humanitarian and disaster relief operations. Participating is Gene Bonventure of CSIS (who I had the pleasure of meeting in September); Captain James Terbush, Commander Fourth Fleet; and Commander Bradley Hartgerink of the Navy Bureau of Medicine and Surgery. CSIS has been on the leading edge of policy discussion on health diplomacy for the last few years, as evidenced in this video and more significantly the release a [massive report on “Smart Global Health Policy” last week](#). More on this report when I get around to writing up a post on it.

{ Comments on this entry are closed }

## UXO In Laos

by [Christopher R. Albon](#) on March 29, 2010 [[edit](#)]



Friend of the blog Patrick Clarkin has [published a brilliant and indepth discussion](#) on a Lao National Regulatory Authority report on unexploded ordnance (UXO) in the country. The report puts plainly the long term danger of UXOs:

What is particularly significant from the LNRA report is that 40% of recorded casualties actually occurred after 1973, the year that bombing ceased. The nature of the bombing campaign, in particular the near indiscriminate use of cluster bombs, meant that it was inevitable that massive amounts of ordnance would remain in Laos for decades.

Khamvongsa and Russell (2009) note that between 1996- 2006, removal teams had

total contaminated land. In a 2009 AlertNet article by Thin Lei Win, Boddington stated that “after 15 years of official clearance operations, we have managed to clear about 400,000 (of an estimated 80 million cluster bombs still in Laos). If you do the sums, you’ll find that in order to clear all of the bombs in this country, it will take 3,000 years.” Think about that. Meanwhile, the number of UXO casualties remains around 250 people per year into the present, 37 years after the bombing campaign officially ended.

In an era of aging cold-war cluster munition stockpiles, there is a serious lesson to learned from a country tragically well experienced in the perils of UXOs. The lesson should be particularly pertinent to Israel. One IDF commander [claimed Israeli forces](#) “fired around 1,800 cluster bombs, containing over 1.2 million cluster bomblets” during the 2006 Israel-Lebanon war, of which a [significant proportion](#) did not detonate on impact.

{ Comments on this entry are closed }

## Health And Armed Conflict Reading List

by [Christopher R. Albon](#) on March 25, 2010 [[edit](#)]



Last week, journalists and academics [posted the ten books that most influenced them](#). Putting a twist on that idea, I present seven works (articles and books) that have been seminal in the development of my own thinking on armed conflict and public health.

*Azam, Jean-Paul, And Anke Hoeffler. 2002. “[Violence Against Civilians in Civil Wars: Looting or Terror?](#).” Journal of Peace Research 39(4):461-485.*

While not directly related to public health, Azam and Hoeffler (2002) present a causal mechanism between the political conditions of conflict and deliberate violence against civilians. The authors combine a game theoretic model with a statistical analysis of African refugee data to conclude that violence against civilians is often part of a larger, purposeful military strategy.

*Ghobarah, Hazem Adam, Paul Huth, and Bruce Russett. 2003. “[Civil Wars Kill and Maim People—Long after the Shooting Stops](#).” The American Political Science Review 97(2):189-202.*

research. The authors, publishing in political science's top journal, find that armed conflict negatively impacts health after the war has concluded. More importantly, the article is an initial attempt to reconcile the data and literatures of both fields.

*Kaldor, Mary. 2007. [Human Security](#). Polity.*

Mary Kaldor's book is a collection of seven essays describing the historical context, theoretical foundations, and development of human security as a concept. Human security is part of an attempt by a growing number of political scientists to study conflict from the perspective of populations rather than states. This sub-discipline is also the most open to incorporating public health into concepts of security.

*Levy, Barry S., and Victor W. Sidel. 2000. [War and Public Health](#). American Public Health Association.*

The edited volume is a collection of core readings of the public health during armed conflict. While informative, the works contained are largely normative appeals as to the importance of health during conflict.

*Murray, C J L et al. 2002. “[Armed conflict as a public health problem](#).” BMJ 324(7333):346-349.*

In the article, political scientist Gary King and three epidemiologists discuss the basic concept of war as a negative health consequence, the problems acquiring information on the health impact of war, and propose new and better measures of the health impact of armed conflict. Most importantly, the authors call for greater collaboration between political scientists and public health experts to better understand the dynamic between health and conflict. The article is not a research project but rather an attempt to publicize the gap in research regarding armed conflict and public health.

*Prinzing, Friedrich. 1916. [Epidemics Resulting from Wars](#).*

Friedrich Prinzing's book is one of the first major studies of public health during armed conflict. The author, writing during the first half of World War I, systematically describes epidemics during more than twenty wars. Prinzing offers few theories regard the relationship; rather he presents a historical overview of wartime epidemics. This work is the intellectual parent of Smallman-Raynor and Cliff's 2004 seminal book.

*Smallman-Raynor, M. R., and A. D. Cliff. 2004. [War Epidemics: An Historical Geography of Infectious Diseases in Military Conflict and Civil Strife, 1850-2000](#). Oxford University Press, USA.*

Smallman-Raynor and Cliff's 2004 book is a comprehensive review of infectious disease epidemics during and after armed conflict throughout modern history. This seminal work uses both historical accounts and modern statistical analyses to describe the behavior of war-related epidemics. However, similar to Prinzing's 1916 book, the authors develop few theories on the causal relationship between conflict and epidemics. Rather, they focus on presenting a detailed descriptive account of the phenomenon.

[Comments on this entry are closed](#)

## One Rebel Group's Potemkin Humanitarians

by [Christopher R. Albon](#) on March 25, 2010 [[edit](#)]

In a comment on [Bob Geldof's row](#) with the BBC over claims that aid in the 1980s to Ethiopia was diverted to buy arms, Edward Girardet of The Guardian [remembers one method rebels used to hoodwink](#) even reputable aid groups:

During the 1980s, I had regular contact with guerrilla groups in the Horn of Africa, such as the TPLF (including its humanitarian wing, Rest), the EPLF and ELF. I also reported from the government side out of Addis. All did their best to dupe both aid workers and journalists.

Rest, for example, was extremely well organised. It provided impressive humanitarian surveys, such as the number of lactating mothers in specific villages and refugee camps. However, there was no way of verifying whether all the aid was actually going through or not. Inside the guerrilla zones Rest always controlled what you saw and where you travelled. The Ethiopian Dergue did exactly the same thing.

Everything was elaborate while the show was on, but the moment one left it was a different matter. Once I visited a bustling “government displaced centre” near the Sudanese border. Twenty minutes after leaving I returned because I had forgotten my jacket. The camp was empty. It had been a complete charade in a bid to solicit international sympathy and funding.

{ Comments on this entry are closed }

## Don't Ask, Don't Tell Prevents Genocide

by [Christopher R. Albon](#) on March 24, 2010 [[edit](#)]

Or so testified retired Marine Corp General John J. Sheehan [during a Senate Armed Services Committee hearing on Thursday](#):

“As a result, they declared a peace dividend and made a conscious effort to socialize their military,” he said, noting that the Dutch allowed troops to join unions and enlisted openly gay soldiers. Dutch forces were poorly led and unable to hold off Serb forces in 1995, leading to the execution of Bosnian Muslims and one of the largest European massacres since World War II, Sheehan said.

There are many reasons for the failure of Dutch forces in 1995, but sexual preference was not one of them.

{ Comments on this entry are closed }



by [Paul Rexton Kan](#) on March 23, 2010[edit]

*Today's guest post is the second by [Paul Rexton Kan](#) of the U.S. Army War College. Kan recently contributed to a special issue of [Small Wars and Insurgency](#).*

There have been two articles that could be read together as one study on the near future of conflicts. In the current edition of Foreign Policy magazine, "[Peak Insurgency](#)" by Joshua Keating covers the research of two Yale political scientists who conclude that the number of insurgencies worldwide has actually declined since 1991. Meanwhile, [a study by James Fearon](#) concluded that civil wars last 39 years longer when the belligerents are actively involved in illicit activities, primarily cocaine and heroin trafficking.

Are the terror groups and insurgent movements currently active in the world those that will be part of the international security landscape for the foreseeable future? Phil Cerny describes this landscape as "durable disorder"; Phil Williams, "the new Dark Ages" and the US Army , "the era of persistent conflict". This is the "new abnormal" school that sees violent non-state actors and asymmetric threats as a type of fixed magnetic north for security studies. Future research, new policies and novel strategies can be plotted by focusing on the assessments that are embraced by this school.

I count myself as one of the adherents of the new abnormal. But anything abnormal still rests on a conception of what is "normal"; trends come in bunches and patches. The question should not be about what the near future holds, but how we avoid becoming conventional in our thinking about the unconventional.

*Editor's Note: Kan is eager for feedback, we strongly encourage readers to post their thoughts in the comments section.*

{ Comments on this entry are closed }

## [Photos: USNS Comfort In Haiti](#)

by [Christopher R. Albon](#) on March 20, 2010[edit]

USNS Comfort [returned to Baltimore on Friday](#) after completing their humanitarian mission in Haiti. The hospital ship made a rushed departure from Baltimore on January 16th only days after an earthquake devastated the island nation. It is the weekend, and rather than discuss the number of patients treated or supplies delivered, I think it is appropriate to just take a look at the good work of her crew through the photos of some MCs.

Cmdr. Sam Critides, from Glen Ridge, N.J., a neurosurgeon embarked aboard the Military Sealift Command hospital ship USNS Comfort, speaks with Carl Shapiro, site director of St. Boniface Hospital, as a local crowd observes. Photo by Petty Officer 2nd Class Shannon Warner.



Sailors assigned to Helicopter Sea Combat Squadron 28, embarked aboard the Military Sealift Command hospital ship USNS Comfort, prepare for the landing of an MH-60S Sea Hawk helicopter during an underway replenishment off the coast of Haiti. Photo by Petty Officer 2nd Class Shannon Warner.



Marines from the 24th Marine Expeditionary Unit transport patients discharged from USNS Comfort (T-AH 20) to an intermediate aftercare facility in Port-au-Prince, Haiti. Photo by Petty Officer 3rd Class Matthew Jackson.



The USNS Comfort as seen from the air Feb. 8 in Port-au-Prince. The last Haitian patient was discharged from the vessel Feb. 27. There were 88,646 patient encounters including primary care, pediatrics, dental, OB/GYN, immunizations, lab work and pharmacy scripts. The highest number of patients aboard the ship were 485, Jan. 29. Photo by Sgt. 1st Class Kelly Jo Bridgwater.



Petty Officer 3rd Class Brittany Saulsberry, from Dallas, Texas, comforts a young boy before he receives medical treatment aboard the Military Sealift Command hospital ship USNS Comfort. The boy was brought aboard for treatment of a cancerous infection in his eye and a variety of other life-threatening conditions. Photo by Petty Officer 3rd Class Matthew Jackson.



The Military Sealift Command hospital ship USNS Comfort, left, and the Military Sealift Command fleet replenishment oiler USNS Leroy Grumman conduct an underway replenishment in the Caribbean Sea. Photo by Petty Officer 3rd Class Matthew Jackson.



Haitian-American Sailors embarked aboard the Military Sealift Command hospital ship USNS Comfort sing Ayiti Cheri (Haiti My Darling) in Creole during a remembrance ceremony for the people of Haiti. Photo by Petty Officer 2nd Class Edwardo Proano.



The Military Sealift Command hospital ship USNS Comfort arrives at Naval Station Norfolk following a seven-week deployment to the U.S. Southern Command area of responsibility to provide medical care in Haiti as part of Operation Unified Response. Photo by Petty Officer 3rd Class Ryan Steinhour.



Good job USNS Comfort!

{ Comments on this entry are closed }

## **Marines: Get Malaria, Get Punished**

by [Christopher R. Albon](#) on [March 19, 2010](#)[edit]

Two Marines from the 22nd Marine Expeditionary Unit in Haiti have contracted malaria. Cases of malaria are usually non-stories. However, [Seth Robson from Stars and Stripes is reporting](#) that:

Marines in Carrefour said they've been told they could face nonjudicial punishment, for disobeying an order to take their daily anti-malaria pills, if they contract the disease.

Cargile said the decision to punish a servicemember in such circumstances would be up to individual unit commanders based on the circumstances of each case.

For the anti-malaria pill ([doxycycline](#)) to be effective, it must be taken daily. Missing a single pill leaves you vulnerable. I am assuming the commanders are considering contracting malaria as a signal that their orders to take the pill daily were not followed.

Personally, I imagine getting malaria is punishment enough.

{ Comments on this entry are closed }

## Good Reads For March 17th 2010

by [Christopher R. Albon](#) on [March 17, 2010](#)[[edit](#)]

- Chairman of the Joint Chiefs of Staff Adm. Mike Mullen [argues for soft power](#).
- Robert D. Kaplan takes a look at [McChrystal and his war](#).
- Watch McChrystal present [a video lecture on counterinsurgency](#).
- [RIP Powell Doctrine](#).
- James Traub: America [sucks at state building](#).
- Bill Easterly discusses the [end of humanitarian neutrality](#).
- [Africa's Forever Wars](#).
- War Is Boring: [In Defense Of Military Aid Work](#).
- Agriculture [after Haiti's earthquake](#).
- Survivor stories of [ethnic violence in Nigeria](#).
- Spotting the [USNS Comfort from space](#).
- Sean McFate on his experience on [building an African army](#).
- Ahsan Butt: [The ultimate measure of success in this war is the security of the Pakistani people](#).
- Craig Kiebler: [H1N1: Musings on Conflict and Disease Transmission](#).

{ Comments on this entry are closed }

## The Mullen Doctrine

by [Christopher R. Albon](#) on [March 16, 2010](#)[[edit](#)]



In the early 1990s, General Colin Powell, then chairman of the Joint Chiefs of Staff presented a vision of military action based around using overwhelming force as a last resort to achieve attainable goal of vital national security interest, all with a clear exit strategy. Called the [Powell Doctrine](#), it has shaped American use of force for twenty years. Now, the current chairman of the Joint Chiefs of Staff, Adm. Mike Mullen, has outlined a new doctrine for the use of the military in international affairs. Spencer Ackerman calls it the [Mullen Doctrine](#):

military forces “should not – maybe cannot – be the last resort of the state.” On the surface, Mullen appeared to offer a profligate view of sending troops to battle, contradicting the Powell Doctrine’s warning that the military should only be used when all other options exhaust themselves. Powell’s warning has great appeal to a country exhausted by two costly, protracted wars, one of which was launched long before diplomatic options had run out.

But Mullen’s aides said the chairman was trying to make a subtler point, one that envisioned the deployment of military forces not as a sharp change in strategy from diplomacy but along a continuum of strategy alongside it. “The American people are used to thinking of war and peace as two very distinct activities,” said Air Force Col. Jim Baker, one of Mullen’s advisers for military strategy. “That is not always the case.” In the speech, Mullen focused his definition of military force on the forward deployment of troops or hardware to bolster diplomatic efforts or aid in humanitarian ones, rather than the invasions that the last decade saw.

“Before a shot is even fired, we can bolster a diplomatic argument, support a friend or deter an enemy,” Mullen said. “We can assist rapidly in disaster-relief efforts, as we did in the aftermath of Haiti’s earthquake.”

{ Comments on this entry are closed }

## Webinar On Protecting Civilians During Air Warfare

by [Christopher R. Albon](#) on [March 15, 2010](#) [[edit](#)]

A big thanks to [Charli Carpenter](#), who [spotted](#) an online seminar next week by [Harvard’s Humanitarian Law and Policy Forum](#) titled “Protecting Civilians in the New Battlespace: Challenges of Regulating Air Warfare.”:

This live seminar will examine legal and policy responses to the challenges of civilian protection in situations of armed conflict, specifically in the context of air warfare. Against the backdrop of the recent release of the HPCR Manual on International Law Applicable to Air and Missile Warfare, the seminar will address the following questions:

- What are the primary features, definitions and principles contained in the Manual? How do these relate to the larger framework of international humanitarian law, or the law of armed conflict?
- What is the relevance for the military of the provisions of the Manual, which are a restatement of existing law applicable to air and missile warfare?
- How might the Manual contribute to enhanced protection of civilians during conflict?

Panelists and participants will examine these questions by reference to the HPCR Manual and to specific situations of air warfare.

Readers can register to attend virtually [here](#).

{ Comments on this entry are closed }

## **New Publication: Current Intelligence**

by [Christopher R. Albon](#) on March 15, 2010 [[edit](#)]

I am happy to announce the launch of [Current Intelligence](#), a new publication “preoccupied broadly with culture, politics and current affairs; narrowly with conflict, crisis, and the state of the world “out there”; and laterally with the intellectual concerns of those who research, teach, and write about the issues”.

Every weekday Current Intelligence publishes posts, essays, reviews, and missives by one of the smartest collection of academics and thinkers I have seen in a new publication (minus one). Staff writers include John Matthew Barlow from John Abbott College, Charli Carpenter from University of Massachusetts-Amherst, Bryan Finoki from Woodbury University, Central Asia expert Joshua Foust, author James Harkin, journalist Eric Randolph, Tim Stevens of the Centre for Science & Security Studies, security analysts Marisa Urgo, Kazys Varnelis from Columbia University, Jon Western of Mount Holyoke College, defense expert Michael A. Innes and myself. It is a testament to Mike’s reputation that he was able to bring together this distinguished group of people from such a wide variety of backgrounds.

Be sure to check Current Intelligence out [online](#), or subscribe to the quarterly tree-hating print edition.

{ Comments on this entry are closed }

## **Whiplash Transition And Stress Of Drone Wars**

by [Christopher R. Albon](#) on March 15, 2010 [[edit](#)]



Except during take-off and landing, military drones are not controlled from their bases in Afghanistan, but by pilots in the United States. Yet, there is a growing belief that these pilots face combat stress like their comrades in the warzone. Last week, Spiegel [posted an online interview](#) with robotic war expert

**SPIEGEL ONLINE: One drone pilot told SPIEGEL ONLINE that they suffer from just as much stress and trauma.**

Singer: Yes, all this doesn't mean we're not seeing all sorts of new stressors. In the beginning we feared that drones may make the operators not really care about what they're doing. But the opposite has turned out to be true. They may almost care too much. We're seeing higher levels of combat stress among remote units than among some units in Afghanistan. We found significantly increased fatigue, emotional exhaustion and burnout. Drone operators are more likely to suffer impaired domestic relationships, too.

**SPIEGEL ONLINE: What explains this stress?**

Singer: There are different theories as to why. Traditional bomber pilots don't see their targets. A remote operator sees the target up close, he sees what happens to it during the explosion and the aftermath. You're further away physically but you see more. Also, the drone war takes place 24/7, 365 days a year. The war doesn't stop on Christmas. It's like being a fireman when there's a fire every single day, day after day after day. That's emotionally and physically taxing. On top of that, many units are understaffed.

Singer does not mention another likely cause of the stress, the so-called "[whiplash transition](#)". Many suspect that the very ability of these drone pilots to live at home with their families and "commute" to the warzone everyday is taking its toll on the mental health of the pilots. Drone pilots could conduct a deadly airstrike in Northern Afghanistan, and attend their kids soccer game an hour later. This stress (as Singer points out) is likely heightened by the [high-def nature of drone warfare](#):

In a fighter jet, "when you come in at 500-600 mph, drop a 500-pound bomb and then fly away, you don't see what happens," said Col. Albert K. Aimar, who is commander of the 163rd Reconnaissance Wing here and has a bachelor's degree in psychology. But when a Predator fires a missile, "you watch it all the way to impact, and I mean it's very vivid, it's right there and personal. So it does stay in people's minds for a long time."

However, despite all the talk about drone pilot stress, I find it unlikely the stress is at levels comparable to those physically present in the warzone. I suspect the latter is more akin to the stress problems of police and firemen than servicemen on long-term deployment.

{ Comments on this entry are closed }

## **Increased Birth Defects In Fallujah?**

by [Christopher R. Albon](#) on March 12, 2010 [[edit](#)]

Doctors in Fallujah have reported a rise in birth defects. In 2004, the city was the location of brutal urban combat between [insurgents and US Marines](#). Now, [doctors are saying that they are seeing an increased incidence of some birth defects](#). One researcher claims that heart defects have risen to rates 13 times higher than Europe:

that doctors in Fallujah were witnessing a “massive unprecedented number” of heart defects, and an increase in the number of nervous system defects.

She said that one doctor in the city had compared data about birth defects from before 2003 – when she saw about one case every two months – with the situation now, when, she saw cases every day.

This is not the first time US military operations (or, more specifically, US weaponry) has been blamed for post-conflict health conditions. However, in this case there has been no published study confirming the Fallujah observations. I doubt we will have long to wait.

{ Comments on this entry are closed }

## NEJM Discusses Military's Role In Haiti

by [Christopher R. Albon](#) on March 10, 2010 [[edit](#)]



For readers that do not know, [The New England Journal of Medicine \(NEJM\)](#) is the world's oldest and most influential medical journal. If it matters to doctors, it can be found in the NEJM.

On February 24th, NEJM published [a description and evaluation of the US military's disaster relief mission in Haiti](#). The article offers a fair assessment of the operation, pointing out a number of failures and lessons learned. However, the punchline is this:

“The support of the U.S. military was unequivocally integral to the success of the medical mission. The military supplied us with critical equipment and supplies, such as tents to establish our emergency room, stretchers, medications, food, and water. The soldiers who assisted us in the hospital compound brought not only skill but also a “can do” attitude and energy to a medical staff that was stretched to its physical and emotional limits. We saw consistent professionalism, competence, and compassion in the American soldiers.”

Overall, the military was a knight-in-shining-armor for beleaguered aid workers. While not perfect, the military did an heroic job supporting civilian relief efforts. It is good to see NGOs accept the military as an important partner in disaster relief operations. Slowly humanitarians are seeing the military as a potential ally rather than an organizational leper. Now, let us hope the military's old guard can reciprocate by seeing aid workers as more than naive amateurs.

{ Comments on this entry are closed }

## [USAF Sends C-130s For Chile Disaster Relief \(Updated\)](#)

by [Christopher R. Albon](#) on March 8, 2010[[edit](#)]

Nothing too surprising here. Still, [it](#) is worth noting.

The humanitarian airlift deployment will join the ongoing U.S. relief efforts led by the U.S. Agency for International Development's Office of Foreign Disaster Assistance (USAID/OFDA) and will augment an ongoing C-130 airlift relief operation led by Chile's Air Force.

The C-130 missions will deliver aid to affected communities near the earthquake's epicenter in the vicinity of Concepcion.

The C-130 Hercules can carry up to 42,000 pounds and use its high-flotation landing gear to land and deliver cargo on rough, dirt strips.

The two aircraft departed Muñiz Air National Guard Base, Puerto Rico Friday and made an overnight refueling stop in Cartagena, Colombia before continuing their transit to Chile.

Updated: SOUTHCOM announced today it has also sent a [U.S. Air Force Expeditionary Medical Support \(EMEDS\) team](#).

{ Comments on this entry are closed }

## [Military Publishes “Humanitarians 101”](#)

by [Christopher R. Albon](#) on March 5, 2010[[edit](#)]

The Department of Defense is releasing a [new handbook \[pdf\]](#), but inside you will not learn how to transport a tank, plan an ambush, or jump out of a C-130. Instead, this publication is “a primer for the military about private, voluntary, and nongovernmental organizations operating in humanitarian emergencies globally”. In other words, “humanitarians 101”.

The guide is meant to help familiarize servicemen on the in’s and out’s of NGOs, in turn promoting amicable relations between the two, which have traditionally varied between mild curiosity to outright hostility. The guide’s eighteen chapters cover the gambit of NGO topics from “What is an NGO?”, to non-profit bureaucracy, to humanitarian logistics, to international NGO coordination, to physical security. Overall, the primer offers a fair and largely positive assessment of NGOs and their capabilities, portraying them as nimble, creative if underfunded groups and the “the driving force in deploying humanitarian assistance programs”. Where NGOs stumble says the primer, is logistics and large-scale operations. The most NGOs lack the capacity to manage large, international movement of

cheaper but often unreliable in emergencies. Second, the limited resources of NGOs prohibit most from running country-size programs. While there are coordinating bodies, the fragmented nature of the greater humanitarian community means that “[no] matter how much coordination occurs, NGOs are still individual entities, often both small and private, that act independently during emergencies”, preventing unified, cohesive action.

The primer offers lengthy discussions of ‘typical’ NGO personnel. To its credit, it counters the long held stereotype of aid workers as unprofessional do-gooders, observing that “[t]he days of witnessing untrained and young ‘humanitarians’ attempting to get involved are not over, but now more than ever value is placed on professional operations, experience, protocol, training, and capacity to handle extremely technical tasks in difficult working environments. Advanced degrees and program specialties are major rank indicators and most NGOs found operating in humanitarian emergencies can be trusted to meet their objectives”. NGO personnel are portrayed as professional, experienced and independent. They are free agents operating in a loose organizational structure, “often tasked with responding to the needs of NGO beneficiaries before that of the NGO”. Yet, while highlighting the independent nature of humanitarians, the guide cannot resist offering a laughable guide to the aid worker ‘uniform’:

“That is, there is no easy way to identify NGO personnel. Instead, and to generalize grossly, many NGO personnel wear what has become seemingly if informally standard — multi pocketed vest (normally tan or black), khaki pants, chukka boots, and sometimes a badge with an ID card or insignia. Medical personnel often wear or tote fanny-packs filled with essential tools or medicines, and engineers and logisticians often carry small tool belts.”

Where the guide does falter is in local NGO personnel. Local aid workers are only briefly discussed, yet play a major and growing role in NGO operations. Locals are often hired for their ability to move and operate amongst the population (i.e. no fanny-packs). Thus, in many cases they will be the primary points of contact in the field.

The last chapter contains the primer’s core message: that there are areas of potential, value-added cooperation between humanitarians and the militaries. Specifically, the military can support NGO operations by offering physical security, logistical capacity, and communications. In those three areas the military’s capacity dwarf those in the NGO sector. The primer also explains NGOs reluctance to work with the military, highlighting the value of the USAID OFDA as a civilian middleman between the two sides. NGOs are not going anywhere. The number of humanitarian groups has skyrocketed since World War II. In the foreseeable future, the military is going to have to work closer with NGOs, whether during combat operations in Central Asia or disaster relief in the Caribbean. This new primer is both an acknowledgment that NGOs cannot be ignored and an argument for greater cooperation.

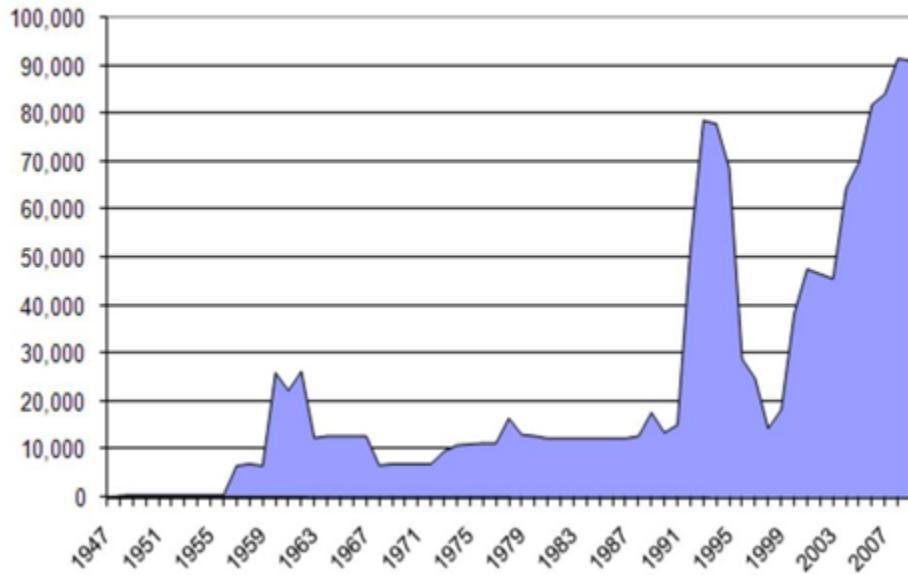
You can download a pre-release draft [here \[pdf\]](#).

{ Comments on this entry are closed }

## 100,000 Peacekeepers

by [Christopher R. Albon](#) on March 4, 2010 [[edit](#)]

**Size of Peacekeeping Forces (1947-2009\*)**



There will soon be 100,000 United Nations peacekeepers in missions around the globe. Wow. When did that happen? Top contributors: Pakistan (10,826), Bangladesh (10,596), and India (8,759).

The political science blog [Monkey Cage](#) has more.

{ Comments on this entry are closed }

## **Charity: Soft Power Threatens Humanitarians' Security**

by [Christopher R. Albon](#) on March 4, 2010 [[edit](#)]

Save the Children's Patrick Watt recently [argued that combining humanitarian and security domains risks the safety of humanitarians](#):

“If aid is to be effective it must be planned and carried out in close and trusted consultation with affected communities,

It is clear that soldiers involved in the conflict in Afghanistan should not be carrying out sensitive and complex humanitarian work with vulnerable communities.

It is only through impartial aid organisations, such as Save the Children, that essential rebuilding can be done safely and successfully.”

Mr. Watt is making an impossible argument here. There are real benefits to be gained from partnering with the military, but let us put that aside. Strictly from a political perspective, it is inappropriate to

expect governments to isolate development spending from strategic considerations while waging a war. If integrating civilian development efforts with the military prevents even a handful of combat casualties, the risks would be well worth it in the eyes of governments.

{ Comments on this entry are closed }

## **Fast Littoral Fleet For Disaster Relief?**

by [Christopher R. Albon](#) on March 3, 2010 [[edit](#)]

After the earthquakes in Haiti and now Chile, I cannot help but be reminded of an old idea once posited by my good friend [Craig Hooper back in 2005](#):

“An underlying problem is strategic. America simply lacks a presence in shallow intertidal zones. Had fast-moving assets been nearby, the Bush administration, by getting firsthand information from the disaster zone, would have better understood the scope of the tragedy and avoided making an embarrassingly low initial aid offer of \$15 million.

...

Auxiliaries may not capture the imagination. But imagine if 24 American-flagged ships had, within hours of the tsunami, swarmed into the shattered regions of the Indian coast, disgorging helicopters, mobile hospitals and recovery specialists. That’s an exciting enough vision for even Rumsfeld to embrace.”

It is an idea that might be worth reconsidering.

{ Comments on this entry are closed }

## **Genocide As A National Security Threat**

by [Christopher R. Albon](#) on March 2, 2010 [[edit](#)]

At Foreign Policy, [Michael Abramowitz and Lawrence Woocher detail the statements of Director of National Intelligence Dennis C. Blair](#), who on February 2nd included “mass killing or genocide” in congressional testimony on national security threats. The authors argue that Blair’s comments suggest that the security community is finally accepting genocide as more than just a humanitarian tragedy:

“Genocide’s negative consequences for the United States are increasingly plain. Mass violence destabilizes countries and entire regions, threatening to spread trafficking in drugs, arms, and persons, as well as infectious disease pandemics and youth radicalization. When prevention fails, the United States invariably foots much of the bill for post-atrocity relief and peacekeeping operations — to the tune of billions of dollars. And even as Washington is paying, America’s soft power is depleted when the world’s only superpower stands idle while innocents are systematically slaughtered.”

{ Comments on this entry are closed }

## How NATO Measures Civilian Casualties

by [Christopher R. Albon](#) on February 26, 2010[[edit](#)]

Civilian casualties in Afghanistan is a hot topic these days. After years of civilian airstrike deaths hurting Afghan public opinion of NATO and its forces, commanders have reined in their use. Killing civilians is particularly damaging in NATO's new strategy, specifically focused on winning over the trust of the population. To prove the point, earlier this week International Security Assistance Force (ISAF) Commander Gen. Stanley A. McChrystal made a [public apology for the killing of 27 civilians](#) during a US airstrike.

Previously on Conflict Health, I discussed a 2008 Madelyn Hsiao-Rei Hicks and Michael Spagat article proposing the brilliantly named "[Dirty War Index](#)" as a quantitative means of measuring "particularly undesirable or prohibited, i.e., 'dirty,' outcomes inflicted on populations during war (e.g., civilian death, child injury, or torture)". The Dirty War Index is calculated as follows: ("Dirty" Events / Total Events)\*100. It is a quick and umm... dirty measurement of a conflict's impact on non-combatants. Friend of the site Drew Conway, [has discussed DWI at length](#).

It turns out that since October 2009 a derivative of the Dirty War Index is reportedly being used by NATO to measure operations in Southern Afghanistan. The less brilliantly titled "Civilian Battle Damage Assessment Ratio (CBDAR)" is

"...a method for assessing and tracking proportional patterns of civilian casualties from combat. CBDARs can be applied by both military forces and humanitarian organisations towards the common goal of minimising the civilian impact of conflict. These ratios complement absolute numbers on casualties, are easily integrated into existing assessment systems, and can track proportions of civilians, women, or children among casualties. The ratios can be used for monitoring, and to make comparisons between time periods, geographic areas, combatant forces, and between weapons, tactics or rules of engagement".

The developers of CBDAR have a new article in the British Army Review discussing the method. The journal is normally closed to the public, but because the authors are awesome (and Conflict Health readers), they convinced the-powers-that-be to allow the article to be available for download. You can do so [here](#).

Have a good weekend!

### Sources

Cameron E, Spagat M, Hicks MH (2009) 'Tracking Civilian Casualties in Combat Zones using Civilian Battle Damage Assessment Ratios'. British Army Review, 147: 87-93.

Human Rights Tool for Examining and Monitoring Armed Conflict Outcomes.” PLoS Medicine 5(12): e243 EP -.

{ Comments on this entry are closed }

## **Conflict And Health Roundup**

by [Christopher R. Albon](#) on February 25, 2010[edit]

It has been a good week on Conflict Health, with our first guest post by [Paul Kan](#). Even better, this the first week I have had a car in South Africa (a 2004 VW Citigolf, if you were wondering). Below is a selection of items I did not get to writing about this week:

Stars and Stripes reporter asks, “[When will the U.S. mission to Haiti end?](#)“.

Huffington Post’s [take on health diplomacy](#).

Journal article: [Measuring the Scale and Distribution of Armed Violence](#).

Journal article: [Tracking Violence in Timor-Leste: A Sample of Emergency Room Data, 2006–08](#).

Information Dissemination [takes on hearts and minds](#).

Civil-Military relations in Haiti, [from the ground](#).

Journal article: [Patterns of Mortality Rates in Darfur Conflict](#).

Charli Carpenter on [counting casualties in the Congo](#).

{ Comments on this entry are closed }

## **Craig Kiebler: Service As Security**

by [Christopher R. Albon](#) on February 24, 2010[edit]

Soft power supporters stand between two ideological poles. On one hand, humanitarians complain that military involvement in the development sector will taint their work. On the other hand, hard power evangelists complain that incorporating soft power strategies will reduce their warfighting capability to slightly above that of the Peace Corps. Craig Kiebler is one of a few people able to exist, even thrive, between the two sides. In a post worthy of note, Kiebler [argues for service delivery as a critical compliment to physical security](#):

“The foundation of social services sets the stage for market and economic sector development, support to individual livelihoods, public health, and food security, which in the end, supports the efforts of units trying to provide physical security. Services become forms of ‘soft infrastructure’, if you will, by investing in the human capital in a region.

services. Therefore, can we devise methodologies to plan and implement security functions in conflict areas with more of a holistic approach?"

Also, feel free to harass him over email until he writes Part II of the post.

{ Comments on this entry are closed }

## **WARNING: Black Market Cigarettes May Be Hazardous to Countries in Conflict**

by [Paul Rexton Kan](#) on February 23, 2010[edit]

*Today's guest post is by [Paul Rexton Kan](#) of the U.S. Army War College. Kan recently published a book on drug trade and use in modern warfare. The book was [previously reviewed](#) on Conflict Health and can be [purchased on Amazon](#).*

A carton of menthols can be just as deadly as a clip of ammo. The well-known associated health risks of smoking are not what make cigarettes deadly in war zones. Smoking may shorten one's life, but that calculation is lost on a combatant who lives in the daily crosshairs of possible death. Beyond providing combatants a simple rush of nicotine, cigarettes play a critical role in prolonging many of today's ongoing and persistent conflicts.

Second only to the trafficking in illegal narcotics, the smuggling of cigarettes—both legitimate and counterfeit—fund a variety of groups involved in terrorism, insurgency, civil wars and interstate conflicts. Because cigarettes are small and light weight, they are easy to smuggle into a variety of conflict zones. Plus, the disparity in their taxation across the globe has created a rich environment for smuggling. The World Health Organization estimates that over 10 percent of the 5.7 trillion cigarettes sold globally each year are illicit. This means that the global black market alone would supply 4.5 packs annually to each person on the planet.

Cigarettes and modern war have an intimate connection. In fact, the mass production of cigarettes coincided with the mass mobilization of the Great War. Bull Durham tobacco company wanted American GIs to smoke their way to victory: "when our boys light up, the Huns will light out!" Mass production of cigarettes in a time when heavy, conventional forces faced each other across a defined battle space has given way to mass smuggling by groups who operate in the shadows of the legitimate economy to fund violence across the spectrum of conflict.

Nonetheless, smuggling lives up to Bull Durham's World War I marketing slogan—cigarettes are an expression of patriotism. Those who raise money for many of today's violent conflicts through the smuggling of contraband are seen as heroes by those who support the movement. In fact, when the conflicts are over and the international community seeks to build a stable and sustainable government, smugglers often become members of the new government because they are already popular among the people they served in the war.

There are very few pressures or disincentives for today's belligerents to give up smuggling cigarettes.

patriotism and political power means that warring groups are just as hooked on cigarettes as smokers themselves.

{ Comments on this entry are closed }

## Did A Siege Spread The Plague To Europe?

by [Christopher R. Albon](#) on February 21, 2010[edit]

In the 14th century, Caffa was a bustling trading city. By virtue of its location on the Crimean Peninsula, the city was a major center for commerce between the Mediterranean and Asia. Inside her walls lived and worked a worldly population of merchants, traders, and sailors. In 1343 and again in 1346, the Mongol leader Janibeg besieged Caffa, the first siege was ended by a timely intervention of an Italian army, the second by an epidemic of plague that swept through the Mongol ranks. In the latter stages of the second siege, a widely read and cited account by Genoese Gabriele de' Mussi claims the Mongols catapulted diseased corpses over the city walls, classic biological warfare. As the attack spread plague through the port city, de' Mussi observes that:

“...among those who escaped from Caffa by boat were a few sailors who had been infected with the poisonous disease. Some boats were bound for Genoa, others went to Venice and to other Christian areas. When the sailors reached these places and mixed with the people there, it was as if they had brought evil spirits with them: every city, every settlement, every place was poisoned by the contagious pestilence, and their inhabitants, both men and women, died suddenly” (Translation from Horrox 1996, cited in Wheelis 2002).

Based on this account, many have credited the 1946 siege of Caffa for introducing the black plague to Europe. In this theory, the use of biological warfare in the siege indirectly spread the plague by infecting refugees. The theory's implications for modern society is easy enough to grasp: the tactical use of biological warfare by a desperate commander triggered the greatest epidemic in European history. Undoubtedly, the implied warning increases the theory's appeal in certain circles, especially during the Cold War when the world's superpowers actively researched biological weapons and trained to use them. However, in a 2002 article Mark Wheelis counters the accuracy of the theory. He argues “it is unlikely that the attack had a decisive role in the spread of plague to Europe. Much maritime commerce probably continued throughout this period, from other Crimean ports. ... Thus, refugees from Caffa would most likely have constituted only one of several streams of infected ships and caravans leaving the region”. To Wheelis, the theory that Caffa played any special role in spreading the disease requires an assumption that trade in other forms and from other ports was nonexistent. Of course, this was not true. Trade occurred all along the frontier between Europe and Asia, and the bubonic plague had a multitude of avenues to reach Europe both overland and oversea. Still, whether fact or fiction, the original theory has a core insight: the impacts of tactical WMD use, whether by foe or friend, will extend beyond the battle and the battlefield, to incorporate the whole state, region, or globe.

### Sources:

Horrox R, editor. The Black Death. Manchester: Manchester University Press; 1994. p. 14–26.

Wheelis, Mark. 2002. "Biological Warfare at the 1346 Siege of Caffa." 8(9): 971-975.

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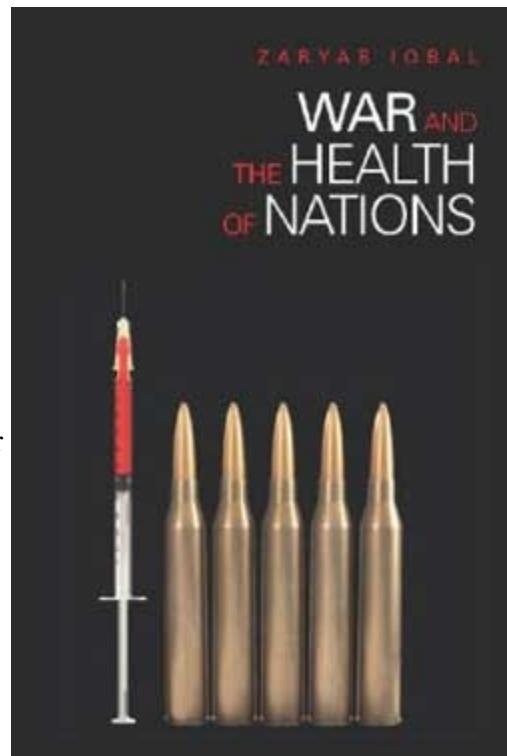
## New Book: War And The Health Of Nations

by [Christopher R. Albon](#) on February 18, 2010[[edit](#)]

Just a heads up, [Zaryab Iqbal](#), an assistant professor at Penn State, has a new book out on the health consequences and armed conflict, descriptively titled [War and the Health of Nations](#). Personally, I am pretty damn excited about it. I have not got my hands on the book yet, but when I do I will post a review on Conflict Health. Until then, you will have to be satisfied with the publisher's description:

Assessments of the costs of war generally focus on the financial, political, military, and territorial risks associated with involvement in violent conflict. Often overlooked are the human costs of war, particularly their effects on population well-being. In War and the Health of Nations, Zaryab Iqbal explores these human costs by offering the first large-scale empirical study of the relationship between armed conflict and population health. Working within the influential "human security" paradigm—which emphasizes the security of populations rather than states as the central object of global security—Iqbal analyzes the direct and indirect mechanisms through which violent conflict degrades population health. In addition to battlefield casualties, these include war's detrimental economic effects, its role in the creation of refugees and forced migration, and the destruction of societies' infrastructure. In doing so, she provides a comprehensive picture of the processes through which war and violent conflict affect public health and the well-being of societies in a cross-national context.

War and the Health of Nations provides a conceptual and theoretical framework for understanding the influence of violent interstate and intrastate conflict on the quality of life of populations and empirically analyzes the war-and-health relationship through statistical models using a universal sample of states. The analyses provide strong evidence for the direct as well as the indirect effects of war on public health and offer important insights into key socio-economic determinants of health achievement. The book thus demonstrates the significance of population health as an important consequence of armed conflict and highlights the role of societal vulnerabilities in studies of global



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## Designing The Next Hospital Ship: Lessons From Haiti

by [Christopher R. Albon](#) on February 3, 2010 [[edit](#)]

Over the last few weeks, USNS Comfort has been part of the Haiti zeitgeist, both in America and overseas. The ship appears in [hundreds of stories, articles, videos, and blog posts](#). Her white hull has become a symbol of United States humanitarianism in Haiti. However, the converted oil tanker's original primary purpose was to support combat operations, not conduct the humanitarian assistance and disaster relief missions that gained her renown. So I ask the readers, if you were to design the next generation of hospital ship, the next USNS Comfort, what would the vessel look like? Here are some of my own thoughts.

### **Small, Fast, And Shallow**

As previously mentioned on the USNI blog, USNS Comfort arrived off the coast of Haiti slightly over [88 hours after the earthquake](#). In that time, the converted oil tanker, manned by only a skeleton crew, was stocked with supplies, staffed with medical personnel from multiple services and NGOs, and sailed down the Atlantic coast. In getting the massive ship from a pier in New England to a disaster zone in the Caribbean, the crew proved themselves to be true professionals. Impressive is not strong enough a word to describe their accomplishment, it was Herculean. And, that is the problem.

To maximize effectiveness, rapid arrival on station after a disaster should occur because of the ship's design, not in spite of it. Hospital ships must be small, fast, and shallow. They must operate in areas with small, damaged, or no ports. They must navigate waterways littered with debris without assistance and anchor in the shallow waters close to shore. Most importantly, hospital ships must be fast. Arriving in the first 24 hours is orders of magnitude more helpful than arriving in the first 48 hours, or 88.

### **Dedicated Medical Team**

Instead of staffing hospital ships with an ad hoc complement of riders, hospital ships deserve dedicated medical contingents. Dedicated medical teams would reduce deployment time and improve mission effectiveness. I am not discounting the importance of NGOs such as Project Hope, but rather suggesting that NGO health professionals should supplement a core medical team that has trained and worked with each other and with the ship. Many will say the armed forces do not have enough medical personnel. They are right, but that does mean we should not do it. Rather, it only means we must train more personnel.

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## Genocide By Environment

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Last week, Melissa Batchelor Warnke, an organizer for the Save Darfur Coalition, commented on a new study on the region in [a letter to the New York Times](#). The study estimated that disease caused 80% of the deaths in Darfur. It is an unremarkable finding. Disease is most often the primary killer in conflict. And, as far as I know, nobody has claimed Darfur is the exception to the rule. Warnke's letter attempted to preempt those that would argue the study weakens claims that genocide is taking place in Darfur. Warnke points out that "deaths by indirect means — starvation, diarrhea, pneumonia, malaria and infection — are as much a product of the campaign of destruction as direct physical violence". In other words, the natural world can be a weapon of genocide.

This strategy is hardly new and appears in a number of variations. Take an example highlighted in Hugo Slim's book, [Killing Civilians](#): In 1904, the German colony of South West Africa experienced a revolt by the local Herero tribe. After the German Governor failed to put down the rebellion, the Kaiser sent General Lothar von Trotha to the territory with orders to crush the Herero tribe. The General's strategy was both eloquent in its simplicity and total in its brutality. Outmaneuvering the rebels, he encircled them except for a small gap in the lines facing Omaheke sandveld. Left with little choice, the Herero people fled into the desert. Next, Trotha's forces sealed all waterholes around the sandveld and blocked any escape from the desert with 250km of fences, guard posts, and patrols. The Herero tribe was trapped in the unforgiving sandveld with no means of survival or escape. Eventually, Trotha would order his forces on the border of the sandveld to kill all Herero on sight. Thomas Pakenham describes the effect of the General's strategy: "German patrols encountered the remnants of the Herero people trying to break back west to their land and water, walking skeletons who were shot or bayoneted as a matter of course". The environment was an effective weapon, before the 1904 rebellion Hereros numbered 80,000 in South West Africa. In 1911, that number was 15,000.

## Source

Slim, Hugo. 2007. Killing Civilians: Method, Madness and Morality in War. C. Hurst & Company, Publishers, Limited.

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## [Ends And Means In Sri Lanka](#)

by [Christopher R. Albon](#) on February 1, 2010[edit]

In August, a video was released reportedly showing Sri Lankan soldiers executing bound and blindfolded Tamils during the last weeks of that country's long civil war. Last month, the U.N. special investigator on extra-judicial killings [declared that the videos are likely authentic](#) and has called on the Sri Lankan government to conduct its own investigation:

"In light of the persistent flow of other allegations of extra-judicial executions committed by both sides during the closing phases of war against the LTTE, I call for an independent inquiry to be established to carry out an impartial investigation into war crimes and other grave violations of international humanitarian and human rights law allegedly committed in Sri Lanka"

The video tape is the latest in a string of allegations of human rights abuses by the Sri Lankan military during the end and immediate aftermath of the civil war. The most prominent event was the forced detainment of thousands of ethnic Tamil civilians in camps, often with little food, security or access to health care. Not that the rebels can claim the moral high ground either; during the final government offensive LTTE herded thousands of civilians into the battleground to use as human shields. Still, the allegations have tainted an otherwise undisputed victory against the Tamil rebel group. Given the scope of the alleged abuses, history might well remember the brutal means used by both sides in the war more than the end result.

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## **Health In The 2010 Quadrennial Defense Review**

by [Christopher R. Albon](#) on January 31, 2010 [[edit](#)]

Today, the Department of Defense's Quadrennial Defense Review (QDR) [was released online](#). The QDR details the future thinking and direction of the US military for the next four years. The 2010 release describes itself as "truly a wartime QDR", examining the doctrine of a military involved in two major conflicts in Central Asia and smaller operations around the globe. In addition to outlining the DoD's thinking on the combat operations, the review highlights two areas relating to humanitarian assistance and disaster relief.

### **Strengthening Civil Affairs**

The QDR correctly points out that non-state violent groups flourish in regions with ineffective governance. Improving the capacity of governments to provide basic services, including health, to populations can deny those areas to enemies of the United States. This mission is the purview of civil affair units. In recent years, civil affairs have been almost entirely manned by reserved personnel. To improve civil affairs capacity, the QDR calls for expanding the DoD's civil affairs teams with "the first active duty civil affairs brigade to support general purpose forces". In other words, the DoD is enlarging its soft power forces.

### **Strengthening Allies**

The review places particular emphasis on the United States' "unmatched capabilities and a willingness on the part of the nation to employ them in defense of our interests and the common good". The stewardship role referred to in the QDR is largely operationalized through strengthening and supporting US allies, especially in Oceania and Asia.

Poignantly given the earthquake in Haiti, humanitarian disasters are mentioned as one such area where the US could have a national security interest in strengthening weakened governments against natural disasters. The DoD envisions achieving this goal mainly through assisting foreign militaries: "In some nations, the military is the only institution with the capacity to respond to a large-scale natural disaster. Proactive engagement with these countries can help build their capability to respond to such events". Comparatively little space is dedicated to working with foreign civilian institutions

The DoD discusses at length partnering with Asia and Oceanic states to improve their capacity to respond to humanitarian crises and natural disasters. Africa and South America are only briefly mentioned regarding the same topic. Clearly the disaster diplomacy that occurred in Asia after the tsunami is still part of the DoD's institutional memory and is driving the focus on DoD health diplomacy in Asia as opposed to other regions.

Overall, the QDR offers a glimpse of a military shifting increasingly towards soft power while still hoping to maintain its traditional hard power focus. Whether they can achieve expertise in both will be the question of the decade.

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## [An Observation From South Africa](#)

by [Christopher R. Albon](#) on January 31, 2010[edit]

Greetings from Durban, South Africa. The most frustrating consequence of moving is disconnecting from the global conversation. I admit it, I am a news junkie. My typical reading list includes almost a dozen newspapers and hundreds of other sites and blogs. For the first week, the only news I can get in my cottage home was from the South African Broadcasting Company's (SABC) morning show. Unfortunately, their global news segments just a few minutes, covering a maximum of five stories.

Haiti has featured prominently in SABC broadcasts since I started watching. That much is appropriate, and expected. But, more striking is the impressive exposure the USNS Comfort has had on SABC. Almost everyday, the US Navy ship is mentioned and shown working in Haiti. The broadcasts include both segments of interviews with the health workers onboard, or B-roll of the ship off the coast.

It was with great pleasure and pride that I watched SABC show clip after clip of US servicemen in Haiti and US Navy ships off her coast. Keep up the good work, the world is watching.

{ Comments on this entry are closed }

## [Photo: Flying Ambulance](#)

by [Christopher R. Albon](#) on January 21, 2010[edit]



Caption: Petty Officer 2nd Class Cory Clare, left, from Apopka, Fla. assigned to the staff of Africa Partnership Station West, Petty Officer 2nd Class Damien Pauline, from New York, and Petty Officer 2nd Class Jeffrey Dixon, from Baton Rouge, all three embarked aboard the amphibious dock landing ship USS Gunston Hall, transport a patient from the Military Sealift Command hospital ship USNS Comfort to the Killick Haitian Coast Guard Base medical clinic.

{ Comments on this entry are closed }

## **Moving To South Africa: T-Minus Three Hours**

by [Christopher R. Albon](#) on January 19, 2010 [[edit](#)]

for a bit, mostly likely until the weekend. No blogging until I am setup down there.

Wish me luck.

{ Comments on this entry are closed }

## **Video Of Seahawk Dropping Aid In Haiti**

by [Christopher R. Albon](#) on [January 16, 2010](#)[edit]

An incredible, desperate aid drop by a U.S. Navy Seahawk into a crowd in Haiti. Good luck all.

{ Comments on this entry are closed }

## **Haiti Military Disaster Relief Updates**

by [Christopher R. Albon](#) on [January 15, 2010](#)[edit]

For the past few days I have been [posting news stories and accounts](#) of armed forces providing disaster relief in Haiti. However, the original format I chose (organized by country) has become unwieldy. Instead, on this page I will be post links to stories about military disaster relief in Haiti listed chronologically. This format will be easier for me, and for readers.

Please consider donating to the civilian relief effort, [here is a good list of NGOs working there](#).

**Updates:**

**01/16/10 @ 4:53PM PST:** [82nd Airborne Soldiers Arrive in Haiti](#)

**01/16/10 @ 4:30PM PST:** [USNS Comfort Begins Race to Provide Relief in Haiti](#)

**01/15/10 @ 2:44PM PST:** [Air Force intelligence agency officials support Haitian relief efforts](#)

**01/15/10 @ 2:31PM PST:** [U.S. floating hospital faces daunting challenge in Haiti](#)

**01/15/10 @ 2:25PM PST:** [Military cargo planes fly 259 Americans from Haiti to N.J. military base](#)

**01/15/10 @ 2:25PM PST:** [USS Comfort prepares to depart.](#)

**01/15/10 @ 2:25PM PST:** [82nd Airborne rapid response unit handing out food, water and medical supplies outside the airport. A helicopter lifted off with water to distribute and another chopper went searching for drop zones around Port-au-Prince so troops could distribute more aid.](#)

**01/15/10 @ 11:19AM PST:** [USS Carl Vinson providing water, airlift, and supplies in Haiti. It is a nuclear powered desalination plant.](#)

**01/15/10 @ 10:45AM PST:** [22nd MEU: Partnering with NGOs and Bridging the Language Gap in Haiti](#)

**01/15/10 @ 10:00AM PST:** HOPE volunteers joining effort aboard the USNS Comfort, HOPE also sending meds, supplies, and water purifier

**01/15/10 @ 6:58AM PST:** [Paratroopers from the 82nd Airborne Division deploy to Haiti to provide support & humanitarian aid](#)

**01/15/10 @ 6:24AM PST:** The USS Carl Vinson arrives off the coast of Haiti.

**01/15/10 @ 5:00AM PST:** [Cuban military agrees to open Cuban airspace to US relief aircraft, cutting flight time to Haiti by 90 minutes.](#)

{ Comments on this entry are closed }

## **List Of Military Aid In Haiti**

by [Christopher R. Albon](#) on January 14, 2010 [[edit](#)]



**Note: This post is now closed. The new one is [here](#).**

Our hearts and prayers go out to all Haitians tonight. While still early, cable news is reporting possibly 100,000 casualties. The number is beyond comprehension. Right now Haiti needs our support. You can donate \$10 to the Red Cross Haiti relief by texting HAITI to 90999.

Armed forces are playing a major role in the relief effort, especially in these early stages. Below is a list of military aid operations in Haiti by country. It is quick and dirty, but the situation is developing too fast for something more. If you find events I am missing, [please email me here](#). I will update as I can.

Last Updated: January 15th, 10:25am PST

Note: Two good sources of information on the maritime relief efforts: [Information Dissemination](#) and [Next Navy](#).

## Argentina

- [Argentine Mobile Military Hospital is reportedly the only functional hospital in Port-au-Prince as of 10:49 on January 13th](#)
- [Argentine helicopters are evacuating casualties to Santo Domingo](#)
- [Argentine is reportedly sending a plane of aid to the area](#)

## Poland

- The Tu-154M airplane with a rescue team is arranged to depart in early hours of 15 January Warsaw time.

## **Qatar**

- Qatar sent a 26-member rescue team and C-17 strategic transport aircraft loaded with 50 tons of relief materials.

## **Russia**

- Russia sends air mobile hospital and other aircraft

## **Turkey**

- The Turkish government has also prepared a military transport plane which will be used to carry in a field hospital and emergency medical team.

## **Portugal**

- The government announced it will send a C-130 with 32 members of the disaster rescue team “Proteção Civil” (Civil Protection) and immediate cash relief of half a million Euros.

## **Mexico**

- As an emergency response the government sent three military aircraft carrying over 20 tons in supplies
- The government also confirmed the imminent departure of the Navy's ARM Papaloapan amphibious lander and ARM Huasteco hospital ship.

## **Jamaica**

- 150 JDF personnel, armed with technical expertise in a variety of areas, would be participating in the search-and-rescue mission, the paramount exercise to be executed in the aftermath of the earthquake.

## **United States**

- The U.S. Air Force is flying an RQ-4 Global Hawk out of Naval Air Station Patuxent River, Maryland, to provide overhead views of the situation in Haiti, and is providing the images over the unclassified Internet to anyone who needs them.
- 1/14/10 @ 11:59 PST: More than 300 U.S. military personnel are in Haiti now, helping the aid effort, according to military officials. More than 5,000 are expected there by early next week, including 3,000 soldiers and 2,200 Marines, the officials say.
- 1/14/10 @ 5:02 EST: P.J. Crowley, U.S. State Department spokesman, says U.S. military air traffic controllers are running the Port-au-Prince airport through an agreement with the Haitian government.
- 1/14/10 @ 11:00am PST: DEPLOYING: USS Carl Vinson, USS Underwood, USS Bataan, USS Normandy, USS Higgins, USS Fort McHenry, 22nd MEU, USNS Comfort, IN HAITI: USS Higgins, SOUTHCOM assessment /C2 team, AF Special Ops personnel
- 1/14/10 \* 10:16am PST: Air Force Special Operations Command sending C-130Es. MC-130P.

- 1/14/10 @ 10:14am PST: MEU is 22nd out of Lejeune aboard USS Bataan, USS Carter Hall and USS Fort McHenry
- 1/14/10 @ 9:52am PST: 2,000 Marine MEU is prepping for 90day deployment to Haiti
- 3,500 900 82nd Airborne Division brigade paratroopers deploy to Haiti via C-17.
- US military secures main airport.
- Air Force 1st Special Operations Wing deploying to Port-au-Prince to provide emergency air traffic control.
- Navy P-3 Orion surveyed earthquake damage.
- USS Carl Vinson deploying to Haiti to provide airlift capacity.
- SOUTHCOM considering sending flat-top amphibious ship with a MEU to provide disaster relief and possibility security.
- Coast Guard Cutters and Navy Destroyers headed to Haiti.
- One 82nd Airborne Division brigade put on alert for possible Haitian deployment.
- SOUTHCOM deploying 30-man team to Haiti to examine damage and coordinate military relief response.
- Air Force C-130s are delivering civilian search and rescue teams to Haiti
- USNS Comfort, a USN hospital ship is preparing to deploy to Haiti
- Coast Guard Cutters Valiant, Mohawk, Tahoma, and Forward are deployed or deploying to Haiti
- Haitian refugees could go to Gitmo.

## Brazil

- Immediate aid will be dispatched as two C-130 Hercules aircraft carry, in total, 28 tons of food (sugar, powdered milk, sardines and ham), bottled water and other supplies to help the affected people.
- In addition, the Brazilian Navy will deploy a ship to Haiti with equipment capable of producing drinkable water.<sup>[31]</sup> This is Brazil's largest foreign aid contribution in response to a natural disaster.
- The Brazilian army is currently doing its work on foot due to the amount of debris on roads. With the largest contingent of foreign troops in Haiti, Brazil's servicemen are providing help in the search for survivors.
- The Brazilian Army is also sending 18 detection dogs to help with the body search.
- The Brazilian government said on Thursday that it is sending another two C-130 planes loaded with aid supplies to Haiti after a devastating earthquake hit the small Caribbean nation on Tuesday.
- At least two field hospitals will be built by the Brazilian Air Force and Navy in Port-au-Prince, as many local health workers were killed or injured when the three largest hospitals in the Haitian capital collapsed in the 7.3-magnitude earthquake.
- Ministry of Defense has ordered its troops in the country to do whatever they can to provide assistance.

## Canada

- Canada sending military Disaster Assistance Response Team (DART).

- Canadian helicopters being flown over to provide airlift and evacuate Canadians if necessary.

## France

- France is sending ships and a hospital ship to Haiti.
- Two ships, the Siroco and the BATRAL Francis Garnier were dispatched.
- 400 French civil guard and security personnel will be in Haiti

## Italy

- The Italian government has prepared a military transport plane which will be used to carry in a field hospital and emergency medical team.

## Dominican Republic

- According to sources, 19 private planes and 14 military helicopters are being used to carry help to Haiti.

## Colombia

- On January 14 a C-130 aircraft departed for Haiti with 3 tons of rescue, medical and security supplies, a mobile military hospital, several medical and rescue teams plus search and rescue trained dogs.

{ Comments on this entry are closed }

## Photo: Blood Donations

by Christopher R. Albon on January 7, 2010[edit]



Caption: Bags of donated red blood cells are transferred electronically prior to physical movement for shipment through the Air Force at Joint Base Balad, Iraq, March 12. The Blood Support Warehouse manufactures, stores and distributes blood and blood products to medical treatment facilities throughout sites in Iraq and Afghanistan. Photo by Master Sgt. Linda Miller.

{ Comments on this entry are closed }

## [The Politics Of Sunk Hospital Ships](#)

by [Christopher R. Albon](#) on December 30, 2009[edit]



On May 14th, 1943, [AHS Centaur](#), an Australia hospital ship sailed off the coast of Queensland towards Port Moresby in Papua New Guinea. The ship had 332 medical personnel and crew on board. She was marked with large red crosses and sailed without military escort as per the Geneva Convention requirements. The vessel would not survive to see dawn. The Japanese submarine I-177, commanded by Hajime Nakagawa, torpedoed AHS Centaur in an early morning attack, taking 268 lives. Now, [the discovery of her wreck on December 20th](#) has resurfaced the sensitive issue between Australia and Japan.

The sinking of AHS Centaur violated international war law and is considered one of Australia's worst wartime tragedies. Her demise turned the vessel into a martyr for Australians, confirming the brutality of the Japanese in the public's mind. General Douglas MacArthur claimed the attack showed the "limitless savagery" of the Japanese. The Australian government used the sinking to enrage public opinion and rally Australians in support for the war effort.

I-177's captain was never tried for the sinking, but was convicted on other war crimes by the Allies. The attack has long been a sore subject for the Japanese, who only acknowledged in 1979 that I-177 did indeed sink the hospital ship, after denying involvement since 1943. Furthermore, Tokyo claims it never ordered the attack, a fact if false would likely lead to Australian pressure for additional war crime charges. In a statement on the search for AHS Centaur, Japan said it "made the greatest efforts for world peace and prosperity as a responsible member of the international community and has also developed a close relationship with Australia." To their credit, the Centaur Association, the RSL, and the Department of Foreign Affairs and Trade have all made statements that Japan does not need to apologize for the sinking of AHS Centaur. Apparently 66 years of good relations is enough time for some countries to let history be history.

## The Sons Of War (Updated)

by [Christopher R. Albon](#) on December 28, 2009 [[edit](#)]

For decades demographers and epidemiologists have observed a peculiar phenomenon during and after war. In these times, the ratio of male to female newborns shifts ever so slightly towards the former. In other words: more boys are born during and soon after wars. The change is slight, MacMahon and Pugh's 1954 study finds one sex ratio shifted from 51.406 to 51.481 after WWII.

A number of theories explaining this 'returning shoulder effect' have been posited. One in particular has potential broader application in conflict research. Satoshi Kanazawa of the London School of Economics and Politics argues that the phenomenon is a "byproduct of the fact that taller soldiers are more likely to survive battle and that taller parents are more likely to have sons".

Kanazawa tests his theory by examining the height of a non-random sample of British enlisted men serving in WWI. More specifically, Kanazawa draws his sample from only one of the 23,608 reels of microfiche at the UK National Archives. Since the reels are organized by last name, his sample contains only soldiers with the names Ababreltom to Ablett. Methodological problems of a non-random sample aside, the author finds supportive results: "The surviving soldiers in my sample have a significantly higher mean height than fallen soldiers". Since height is positively related to the probability of having a son, war would have a positive relationship on the number of male births after intense conflict.

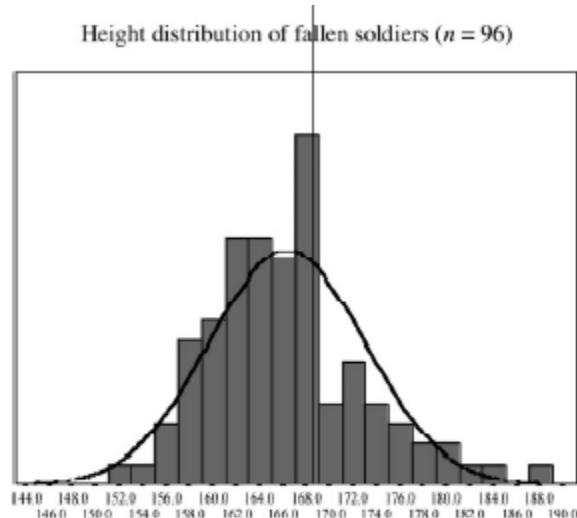


Figure 1: Height distributions of surviving soldiers (top panel) and fallen soldiers (bottom panel), British troops during the World War I. The solid vertical line indicates the mean height of surviving soldiers (168.63 cm).

While Kanazawa resists providing a theory on why taller soldiers are more likely to survive warfare, he does offer some possibilities. First, taller and larger soldiers are more resilient to disease and wounding. Second, since height is related to intelligence, taller soldiers would be more likely to rise in the ranks and avoid the most dangerous duties. Third, and my personal favorite:

Dominic D. P. Johnson suggests another interesting hypothesis. If vital organs in the body do not increase in size linearly with the body size (height and weight), then it means that taller and heavier soldiers, while they may be more likely to be shot because of their larger body size, have nonetheless more room in their body where they can be ‘safely’ shot and still survive the injury.

Beyond explaining the returning soldier effect, the article is a reminder that even among similarly aged enlisted soldiers, war does not try men equally. Armies are not unitary objects, but organizations of individuals facing individualized risk. The same argument can be applied to civilian populations. Warfare’s effect and risk is unique to the person. Populations face war as individuals.

Update: [Eduardo Leoni](#) points out that a data scientist I respect very much has [serious questions about Kanazawa's statistics](#) in this and similar papers.

## Sources

Kanazawa, Satoshi. 2007. “Big and tall soldiers are more likely to survive battle: a possible explanation for the ‘returning soldier effect’ on the secondary sex ratio.” *Hum. Reprod.* 22(11): 3002-3008.

{ Comments on this entry are closed }

## **Recommended Reading For 12/17/09**

by [Christopher R. Albon](#) on December 18, 2009[edit]

Below is a list of stories I enjoyed but did not have time to write about. Happy holidays everyone.

### Connectivity is Soft Power

I was once asked what I would use a single airship in a massive natural disaster response scenario. The question was actually more specific, it was how I would use a single airship responding from Bahrain to Karachi, Pakistan in a humanitarian support operation following a massive natural disaster with an airship that could move at 100 mph to prepare the way for naval forces responding from the sea.

### Winning the War, 30 Taliban at a Time

But the much more important point remains: how could we possibly have any idea how the war is going, here or anywhere else, when the bad guys seem only to die in groups of 30? The sheer ubiquity of that number in fatality and casualty counts is astounding, to the point where I don’t even pay attention to a story anymore when they use that magic number 30. It is an indicator either of ignorance or deliberate spin... but no matter the case, whenever you see the number 30 used in reference to the Taliban, you should probably close the tab and move onto something else, because you just won’t get a good sense of what happened there.

## H1N1: Musings on Conflict and Disease Transmission

Malnutrition has always been a major risk factor for disease transmission, allowing diseases that would normally be considered of minor public health importance to take a foothold in a population and become major issues. Lack of food security also contributes to the consumption of poorer quality food, increasing the potential for outbreaks of foodborne illness in an already compromised group.

## International Medical Corps: A Thousand Words

For 25 years, International Medical Corps has been training doctors and providing medical care in some of the world's most troubled places. From Angola and Bosnia, to Afghanistan and Somalia, International Medical Corps staff have been working with locals to mitigate the effects of things like war, natural disaster, and malnutrition. Along the way, the group has collected photos from the field. Now, those photos have been published in a new book called *A Thousand Words*. International Medical Corps President and CEO Nancy Aossey recently sat down with *The World* to talk about some of her favorite photos from the book.

{ Comments on this entry are closed }

## ICRC Visits Taliban Prisoners

by [Christopher R. Albon](#) on December 17, 2009 [[edit](#)]

This week, the International Committee of the Red Cross (ICRC) announced that they have [visited Afghan government security forces held by the Taliban](#) in Badghis province. This is the first time ICRC has been able to meet the Taliban's prisoners. ICRC hopes the success of the visit (and their ability to keep the details confidential) will make other groups more open to ICRC visits.

H/T: [Una Vera](#)

{ Comments on this entry are closed }

## The Art Of Successful Capitulation

by [Christopher R. Albon](#) on December 15, 2009 [[edit](#)]

In May, the Sri Lankan government won a crushing victory over LTTE rebels in the northern reaches of the island country. Now, [a Sri Lankan Army General is accusing the Defense Minister of ordering the killing of surrendering LTTE leaders](#). General Sarath Fonseka was in charge of Sri Lanka's military during the last offensive of the war. Now, he is challenging the sitting president in the upcoming elections and accusing Defense Minister Gotabhaya Rajapakse, the President's brother, of ordering the Army to take no prisoners during the last days of the war. Rajabhaya denies the accusation. Fonseka claims he was in China when the Defense Minister gave the orders, only learning

Did the Sri Lankan military kill surrendering LTTE? Probably, but likely not on orders. The moment of surrender is one of the most dangerous times for a soldier. Both the captor and captive are vulnerable to active deceit or adrenaline brutality. Is the surrender a trap? Will the captors seek revenge? Furthermore, the act of surrendering is the only commonplace battlefield activity left out from most military educations. When considering how best to surrender, every soldier has to reinvents the wheel.

{ Comments on this entry are closed }

## USAID In War

by [Christopher R. Albon](#) on December 14, 2009 [[edit](#)]

Change.org's [War and Peace](#) blog has been [posting](#) a [series](#) on the militarization of humanitarianism in Afghanistan. It is a good series and I recommend you read it. Today's article is from Una Vera, a good friend in the development community. Let's hope what I am about to say doesn't change that, because I disagree with her wholeheartedly. [Una writes:](#)

It's flat out wrong for USAID to attach counterinsurgency strings to aid funds. Period. If organizations like the IRC and Oxfam don't want to do post-battle reconstruction and development work, they should not be expected to, and they should be eligible for USAID funding anyway. Most of the major humanitarian NGOs working in Afghanistan are working in dozens of other countries, and their leadership must consider how civil-military relations in Afghanistan could affect relief and development efforts elsewhere in the world. For an organization like CARE, working closely with the US military in Afghanistan –especially in areas where coalition forces have caused civilian casualties– could imperil vital projects in other conflict zones.



I have heard this argument before, and both then and now I am left scratching my head. The United States is, for better or worse, at war. I wish we weren't at war, but I am only given a single vote in deciding such matters, and I was outvoted. [USAID](#) and [DoD](#) are both institutions of the United States government. When American servicemen are giving their lives to win a war, how could it be "flat out wrong" for USAID to use its budget to help them win? It is impossible to expect USAID to remain neutral while soldiers, sailors, airmen, and marines fight.

Unlike USAID, NGOs are independent actors. They can have as much or as little interaction with the US military as they wish. But, they cannot accept US government funds and then not expect some strings attached. Well, *they can*, but the United States has the right to give the money to someone else. Is what the US government doing humanitarianism? Absolutely not. It is a military and political strategy. If cooperating with that strategy furthers an NGO's own normative goals, they should take

I wish the US government was an absolute humanitarian and altruistic force in the world. But, it isn't. The United States is a country working maximize the self-interest of its own citizens. Sometimes those of us with normative goals can use this self-interest to help some people (e.g. promoting hospital-ships instead of warships). Sometimes we can't. But, what we can never do is expect the United States to act with solely humanitarian motives.

There are international organizations working for all: the United Nations and ICRC to name just two. I believe in these organizations. I love these organizations. Their work and ideals are the best of humanity. But, USAID is not one of these organizations, and it is unreasonable to expect them to act like one, especially in war.

{ Comments on this entry are closed }

## **Moving To South Africa For Fieldwork**

by [Christopher R. Albon](#) on December 13, 2009[edit]

On January 20th, I am moving to Durban, South Africa for a year. Durban will be my base from which to conduct field research around Southern Africa relating to my dissertation. During that time, my wife is taking a year off from medical school to complete a masters program in development at the University of KwaZulu-Natal. The move is the culmination of almost two years of preparations on our part. We are excited. Southern Africa is my family's homeland and going back fulfills a longtime goal. There will certainly be more details to come, but three things are worth noting upfront:

First, I will continue to write Conflict Health in Durban. Writing this site is far too enjoyable to stop now. My best ideas have come from posts on this site, especially those critiqued by commentors.

Second, in addition to regular posts, I am planning on writing a series of posts about my time in Africa. The series will focus primarily on the experience of conducting research there. Hopefully it will both be useful and entertaining for readers.

Third, if you live in South Africa, are coming out for the World Cup (we have quarter-final tickets), or know great people there, please send me an email. Having been spoiled by all the interesting people to meet in the Bay Area, I would love the opportunity to meet more while in South Africa.

Cheers all,

A handwritten signature in black ink, appearing to read "Chris Albon". It is written in a cursive style with a long, sweeping line extending from the left side of the signature.

{ Comments on this entry are closed }

## Legitimacy, Health, And Obama's Surge

by [Christopher R. Albon](#) on December 8, 2009 [[edit](#)]

Early last week, President Obama put forward his Afghanistan endgame. For those few readers living in a hole, the new strategy will deploy 30,000-37,000 additional NATO troops to the country. The hope is that the influx of ground forces will give the Afghan government time to build the legitimacy and capacity needed to continue fighting after international forces withdraw, optimistically scheduled for 2011. This is a markedly different strategy from the previous administration, which readily accepted the possibility of a semi-permanent, strong American presence in the country. Does health have a place in Obama's new strategy? Absolutely. Enhancing Afghanistan's local healthcare capacity offers a means to establish the political legitimacy of the central government.

Currently, most Afghans have little relationship with Kabul. Outside the capital, the government has little role in the lives of citizens, providing minimal services or public goods. The dubious reelection of Karzai only reinforced the disconnect between the general population and the political machinations in Kabul. Obama's plan is contingent on closing this divide, building (note: not rebuilding) Afghanistan's social contract. Increasing the capacity of Afghanistan's local health system would be an important move towards increasing the interaction between the population and the Afghan government. In other words, hospitals and health clinics are "points of sale" for selling the value of the central government. The more citizens perceive interacting with the central government as beneficial to their lives and livelihoods, the more they will support that government when threatened. Whether Obama's strategy includes such a goal is unclear.

But, I must end with a note of caution. As pointed out eloquently by Maj. Gail Fisher, the concept of [political legitimacy might be inappropriate in Afghanistan](#):

Ideas of legitimacy are most likely created by cultures as shared meanings and understandings about governance and the relationship between the government and the individual in that culture. So I am looking for an understanding of "legitimacy" of systems outside our own Western view. For example, Afghanistan is a clientelistic society— what does that mean for governance? What does that mean for the health of their people? I doubt that the people of Afghanistan have the same understanding and ideation of governance as I and my neighbors. Their expectations are different, meaning that development must fit in to their schema, rather than mine. Do the people of Afghanistan expect the central government to supply a health system? I would suspect they do not. We, in America, have the same debate at this very time over the lack of coverage of nearly 50 million people and what should be done. Most people do not expect the government to provide health care to the population. Working with the Minister of Public Health in Afghanistan to build the health system is admirable work, but is it legitimizing the government? Does it delegitimize the coalition efforts to be involved? Should only NGOs do this work? All these questions depend upon the cultural ideation of legitimacy and health institutions, I think.

Food for thought for sure.

{ Comments on this entry are closed }

## War and Global Health Conference, April 2010

by [Christopher R. Albon](#) on December 4, 2009 [[edit](#)]



Seattle is hosting a conference Conflict Health readers might be interested in attending. This year, the theme of the Western Regional International Health Conference is [War and Global Health](#). Here are some details:

Call for Abstracts: Posters and Presentations

Submission Deadline: December 15, 2009 (we will notify submitters of their status by January 30, 2010)

Criteria for Submission: students, faculty and professionals of all disciplines are invited to submit abstracts for posters and/or oral presentations on the conference theme of “war and global health.” We will accept approximately 50 posters through a competitive process. Posters may address any war-related theme.

I would love to attend, but unfortunately I will be in Africa in 2010 (more on that to come).

{ Comments on this entry are closed }

## Does The Navy Have A Place In McChrystal's War?

by [Christopher R. Albon](#) on November 30, 2009 [[edit](#)]



Last week, President Obama announced the deployment of [30,000 additional troops to Afghanistan](#). The troop surge is part of a [new strategy set forth by General Stanley A. McChrystal](#). The strategy shifts focus from kinetic to non-kinetic operations: protecting civilians, development projects, and winning hearts and minds. It will be central to America's operations in Afghanistan for years to come, and even the basis for an American endgame there. Army, Marine, and Air Force roles in the McChrystal approach are clear. The former two are boots on the ground, while the latter provides logistical, intelligence, and combat support. The Navy, however, appears to have little place in this new strategy. The Navy's primary contribution so far has been combat air support. But, airstrikes have fallen out of favor in Afghanistan as of late due to mounting civilian casualties. McChrystal's new strategy should worry the Navy leadership, since Secretary of Defense Gates has demonstrated a strong preference for funding programs with applications in current conflicts, and a willingness to cut programs failing that criteria (and more importantly: to fight legislators' attempts to block cuts). Does the Navy have a place in McChrystal's war? Yes, but not without some soul-searching.

The Navy can play a significant role in McChrystal's strategy. Every year, thousands of sailors deploy on humanitarian, development, and disaster relief operations around the world. Sailors have repaired schools in the Pacific, organized health clinics in South America, and delivered disaster aid in the Caribbean. These operations are outside traditional military education and have required developing a new set of skills, notably the ability to plan and work side by side with different services, agencies, governments, and NGO partners. The missions have given the Navy hard won experience adapting military resources to humanitarian, development, and disaster relief challenges. This is particularly true of short term, high impact programs, [the type of military involvement in development envisioned by Secretary of Defense Gates](#). The Navy could have precisely the type of soft-power experience McChrystal's Afghanistan strategy requires.

The main obstacle to a major Navy role in Afghanistan is not material, but cultural. The Navy's leadership is dominated by line officers. This perpetuates an institutional culture valuing warships and warplanes. However, the enemy has neither fleet or coastline. All the carrier strike groups in the world

strategy requires a surge of a new sort: of nurses, doctors, dentists, engineers, and civil-affairs units, the domain of the staff corp officer. While staff corp officers have a secondary role in the Navy's traditional warfighting focus, they have played a major part in the Navy's humanitarian and development cruises. Staff corp officers might not be able to plan a defense of the North Atlantic, but they can run health clinics, manage construction projects, and coordinate with NGOs. They are America's soft-power specialists. If the Navy is going to take advantage of the humanitarian and development institutional knowledge of its staff corp officers, it must overcome its cultural biases towards the interests of line officers. In the 1980s, the Soviet Army learned that Afghanistan was not the Fulda Gap. Now, the US Navy must accept it is not the Taiwan Strait either.

{ Comments on this entry are closed }

## Spectrum Of Post-Conflict Health Systems

by [Christopher R. Albon](#) on November 30, 2009[edit]

[RUSI Journal has a new article](#) out on the relationship of armed conflict and medicine, rather unoriginally titled "war and medicine". The author is the UK's Surgeon General of the Defense Medical Services Lt. General Louis Lillywhite. In the article, Lillywhite addresses a gamut of issues, with emphasis on the role of the MoD and Surgeon General. The article is too broad to do justice in a single post, but one point deserves attention: Lillywhite's spectrum of post-conflict health systems.

We have at one extreme the situation in Western Europe at the end of the Second World War, with its preconflict modern health service, health personnel in place and a need simply for economic aid and infrastructure repair.

In the middle, we have countries such as Iraq where there was in many parts a modern health service which had over fifteen years slowly deteriorated, and where the need was primarily to modernise. Part of the UK contribution to Iraq via the Department of Health was, and is, to take clinicians from Iraq to the UK in order to introduce them to modern techniques so that they could return to Iraq to raise the overall standard of medical care in that country.

At the other end of the spectrum, we have countries such as Afghanistan where it is not health re-construction that is required, but health construction.

The natural policy implication of this spectrum, mentioned only in passing by Lillywhite, is that different types of post-conflict health systems require different health strategies. More interestingly, there is likely contrasting costs and benefits based on a system's position on the spectrum. Health systems towards the middle and top of the spectrum are easier to reconstruct. The foundation of the health infrastructure and institutional knowledge is already present. However, health systems at the bottom of the spectrum still have "low hanging fruit" health problems. These are diseases and conditions which can be cheaply tackled but have significant health benefits to the population. If Gates is interested in using development to win hearts and minds in Afghanistan, he would be wise to go for the low hanging fruit.

Hat Tip: [Tim Stevens](#)

{ Comments on this entry are closed }

## **Who Doesn't Pose As Aidworkers Anymore? (Updated)**

by [Christopher R. Albon](#) on November 28, 2009 [[edit](#)]

Last week, [Jeremy Scahill of The Nation](#) claimed Blackwater (Xe) contractors run covert snatch and grab missions out of Karachi for the US military. It is a great piece to read over turkey leftovers. Scahill's claims of private black operations in AfPak has inspired comment by every pundit with a tangential relationship to national security. In addition, the article has triggered a second [firestorm](#) in the humanitarian and development communities over allegation that Blackwater employees "work undercover as aid workers". Una Vera, a good friend in the aid community, responded to the story this way: "This is going to be ruinous. I'm so angry I'm literally at a loss for words now".

Personally, I am amazed either of Scahill's claims surprised people. First, PMC contracting is a common method of working under the radar. Granted, the majority of these contracts involve training and not 'tip of the spear' missions, but still there is little doubt they happen. Second, and relevant to this site, who else is an undercover team of burly westerners going to pose as? Tourists? Exchange students?

The truth is that posing as aid workers is a nothing new. During a daring hostage rescue of FARC hostages, Colombian [special forces dressed up as members of a fake NGO](#), "Mision Internacional Humanitaria". Some accounts even claim [the special forces wore ICRC armbands](#), a clear violation of the Geneva Convention. In 2006, [Kruma Yaya posed as an Afghani aid worker](#) setting up a computer science training during an attempted suicide assassination of the regional governor. Even journalist [admit posing](#) as aid workers.

This is not to say posing as aid workers is right. The practice has real dangers for humanitarians in the field. But, it is not a revolutionary tactic, or even a new one.

Update: Una Vera has more at [Change.org](#).

{ Comments on this entry are closed }

## **Gates On Military's Role In Development**

by [Christopher R. Albon](#) on November 23, 2009 [[edit](#)]

Last week, at the National Guard Joint Senior Leadership Conference, Defense Secretary Gates was asked about the military's role in development. [His answer is telling](#). It offers an insider's view of the military's vision of itself in development. His response will likely be cited by policymakers and academics for years to come. Below is Secretary Gate's answer in its entirety, emphasis is mine.

GATES: THE MILITARY'S ROLE IN DEVELOPMENT

in referring to peacekeeping said, “It’s not a soldier’s job, but often only a soldier can do it.”

I think that there’s a question of sequencing here when we have — and it ties in with the capabilities we can bring — when the security situation still is not stable enough for civilians to be deployed. It seems to me what’s really important as we clear, hold and build that the build — that these are not sequential. We have to hold and clear or clear and hold, but we need the development assistance. We need money like the CERP funds [Commander’s Emergency Response Program] in there not when security is completely established, but right after we’ve cleared.

*We need people as General Petraeus did in Iraq, as soon as we’ve cleared an area literally the next day or the same day, we need somebody in there with some money and some capability that begins putting young men to work and putting a shovel or a broom in their hands instead of a gun. And it seems to me that’s often the situation where the Guard and the expertise in the Guard can provide the initial response in areas in Afghanistan until the security situation is stabilized enough for the civilians to come in.*

Now, the truth of the matter is as I’ve said for almost two and a half years now, the civilian elements of our government that were expert in these areas have been neglected for a very long time. *When I retired in 1993, the Agency for International Development had about 16,000 employees. It was an expeditionary agency. Most of those people had the kind of expertise in agricultural development, rule of law, governance, water systems, irrigation systems and so on. And they expected to be deployed to developing countries. They expected to live in primitive conditions. And they expected to have situations that were occasionally dangerous. And that was part of their career and that was part of what they wanted to do with their lives.*

*The Agency for International Development now has about 3,000 employees and it’s mainly a contracting agency. So we’ve lost that civilian capacity that played such an important role for us in the developing world all through the Cold War. And so I think that until, and it is beginning to change under both Secretary Rice and now under Secretary Clinton and with the support of two successive presidents and the Congress, the State Department is beginning to get the kind of funding that is necessary for — to rebuild these capabilities. But it’s still a ways in the future and, in my view, there has to be a role. There will be a role for us and particularly as one of the central themes in the QDR is the development of partnership relationships with other partner relationships with other countries so that we can help them build their capacity so we don’t have to send soldiers in there. Part of that will be helping them with some of their development and I think the partner relationships that exist between a number of our state Guards and these others countries and I will tell you ever time I meet with a minister of defense of a country where we have those kinds of relationships, they bring it up with me.*

*So I think that there will be an institutional role for the Guard in this arena, but I will tell you I don’t think it’s a function we should take over as a long-term significant mission of*

*there to help them.* We ought to be there when we're in a situation like Afghanistan where the security may not be as strong enough for civilians to go in, to have people in there working on agricultural development and so on as the first phase so that we aren't waiting too long to begin showing people ways in which their lives can improve on a daily basis.

My own view is we need to be very cautious about some of the big projects that people think about for development. That reminds me of the way the Soviet Union did business. *What we need and what works, in my view, is to do things that can be done quickly and that in a small village can show people that their lives have actually changed for the better by ISAF troops being there. And it can be a well. It can be an all-weather road for local farmers. It can be a little bridge. It can be a one room schoolhouse. You can do a lot of these small projects within the framework of the dollars that we have available. But the most important thing about them is that the Afghans see them and the local Afghans see their lives getting better because we're there. The first stage of doing that, I think, can be done by our military forces and especially by the National Guard, but longer term, that mission has to go to the civilian side of the government.*

Huge hat tip to [Ink Spots](#).

{ Comments on this entry are closed }

## [\*\*130,000 Tamil IDPs Released\*\*](#)

by [Christopher R. Albon](#) on November 23, 2009[edit]

The incredible and brutal end of the Sri Lankan civil war last year gave hope for reconciliation between the government and the island nation's Tamil ethnic population. Instead, the government rounded up and detained 300,000 mostly Tamil civilians. In the face of horrific humanitarian conditions, the international community picked up most of the tab for feeding and sheltering detainees.

The Sri Lankan government argued the camps were necessary to screen populations of Tamil Tiger rebels, hiding amongst the civilians. Ethnic Tamil civilians claim the camp are revenge for years of resisting government control. Southerns have taken the opportunity to move north and reclaim land lost to them during the long civil war.

Since the war's end, detainees have been released slowly. [Now, in the face of mounting international pressure, the Sri Lankan government is releasing the last 130,000 Tamils in the internment camps.](#) The world is left to see if Tamil grievances over treatment in the camps give the Tigers new support and recruits.

{ Comments on this entry are closed }

## [\*\*DataBlog: Journalism Plus Data\*\*](#)

I do not know why I never heard of the [Guardian's DataBlog](#) before this morning. It is certainly a must-read for quantitative researchers. The basic premise is simple: every few days Guardian journalists use data to reveal things traditional journalism cannot. That is great in itself, but the true brilliance is that the Guardian posts all the data for download. Want to confirm their conclusions about civilian causalities in Afghanistan? Download the data, fire up R, and see for yourself. It is a great feature for the DIY generation and (if I might be so bold) a model for the future of journalism. Give me the story, but also give me the resources to find stories myself.

Three recent DataBlog posts (and their datasets) will interest Conflict Health readers:

### [\*\*Piracy around the world: all the attacks by pirates in 2009\*\*](#)

Somali pirates are suspected after Paul and Rachel Chandler's yacht disappeared off the coast of east Africa. Where else have pirates struck this year?

[Piracy Dataset](#)

### [\*\*British dead and wounded in Afghanistan, month by month\*\*](#)

What is the human cost of the war in Afghanistan for British forces? These are the latest figures – including new wounded statistics

[British Casualty Dataset](#)

### [\*\*Afghanistan elections: results of the investigation, polling station by polling station\*\*](#)

The UN-backed Electoral Complaints Commission has published the results of its investigation into the Afghan elections. What did it say? And where did it investigate?

[Afghanistan Election Data](#)

{ Comments on this entry are closed }

## [\*\*New Documentary On Human Terrain Teams\*\*](#)

by [Christopher R. Albon](#) on November 18, 2009 [[edit](#)]

There is a new documentary very likely of interest to Conflict Health readers. [Human Terrain: War Becomes Academic](#) is the story of Human Terrain Teams, social scientists embedded with military units in Iraq and Afghanistan. Here is the official synopsis:

'Human Terrain' is two stories in one. The first exposes the U.S. effort to enlist the best and the brightest of American universities in a struggle for the hearts and minds of its enemies. Facing long wars in Iraq and Afghanistan, the U.S. military adopts a controversial new program, 'Human Terrain Systems', to make cultural awareness a key element of its counterinsurgency strategy. Designed to embed social scientists with

it misguided and unethical to gather intelligence and target potential enemies for the military. Gaining rare access to wargames in the Mojave Desert and training exercises at Quantico and Fort Leavenworth, ‘Human Terrain’ takes the viewer into the heart of the war machine and the shadowy collaboration between American academics and the armed services.

The other story is about a brilliant young scholar who leaves the university to join a Human Terrain team. After working as a humanitarian activist and winning a Marshall Scholarship to study at Oxford, Michael Bhatia returned to Brown University to conduct research on military cultural awareness. A year later, he left to embed as a Human Terrain member with the 82nd Airborne in Afghanistan. On May 7, 2008, en route to mediate an intertribal dispute, his humvee hit a roadside bomb and Bhatia was killed along with two other soldiers.

Asking what happens when war becomes academic and academics go to war, the two stories merge in tragedy.

The trailer:

{ Comments on this entry are closed }

## **Conflict Health Readings For Nov 18, 2009**

by [Christopher R. Albon](#) on November 18, 2009 [[edit](#)]

I am doing a large amount of data entry today and do not have much time for writing. But, below are

### The U.S. Navy: America's Unrecognized Public Health Shield –

Not too many Navy people know their organization serves on the front line of America's disease defenses. Even fewer officers know—or even care—that the Navy occasionally beats the Centers For Disease Control and Prevention at disease detection, discovering, for example, the first domestic case of H1N1 Influenza.

### State of the World's Vaccines and Immunizations, 2009 –

“The State of the world’s vaccines and immunization (Third edition) is a call to action to governments and donors to sustain and increase funding for immunization in order to build upon the progress made so far in meeting the global goals. It focuses on the major developments in vaccines and immunization since 2000.

### Agricultural Development Teams -

USAID does not have the agricultural specialists needed for the mission in Afghanistan, but the National Guard sure does. They have been especially successful in Ghazni.

### Risk to aid workers goes up in 2009 -

The world is less safe for aid workers, access to needy communities in conflict is on the decline, and aid is increasingly tied to military or other strategic objectives. These are among the gloomy conclusions of Development Assistance Research Associates (DARA), an aid watchdog, as it releases its 2009 Humanitarian Responsiveness Index today.

### Tallying Collateral Damage -

So are unintentional civilian deaths trending up or down in absolute terms and / or as a percentage of all civilian deaths? This analysis suggests that collateral damage rather than war crimes now constitute the majority of civilian deaths in international wars worldwide, and that the total number of collateral damage deaths is 20 times higher than at the turn of the last century.

{ Comments on this entry are closed }

## **Afghanistan Briefing Reveals Softer COIN**

by [Christopher R. Albon](#) on November 17, 2009[edit]

[The powerpoint of 1st Battalion, 5th Marines' after action report](#) is making its rounds online.

Important to Conflict Health readers, the presentation reveals a softer side of Afghanistan counterinsurgency strategy: development, making friends, and protecting civilians. This is exactly the type of strategy recently pitched by General Stanley A. McChrystal.

or the American public. They are by Marines, for Marines. It is an insider's view of a new type of American strategy in Afghanistan.



**This wheelbarrow is the most expensive thing this man owns.**

**Treat it accordingly.**



Bridges can be massive improvements for local villages.

Let them use them.



Polaroid pictures are a great tool.  
This is the first picture this man ever had of his family.



Protect the people where they gather.



When you pull out a local farmer's tractor, he remembers, and sometimes returns the favor.



This was one of ten sheep a man owned.  
It made a difference to him that we saved one.



If you need things moved, use Afghans.  
They'll amaze you.



**Education will take time to develop.  
Get the kids in school even while the building is being  
fixed.**



When elders and children integrate into your patrol, you have earned their trust.  
And it means they are now confident in the security you've brought.



**Putting in a bridge where there has never been one is a  
big deal.**



\$500 can build things that change how people live.



Hire local men to do the things that they want and need done.



Returning families are a sign of progress.



Civilians will pop up in the middle of a firefight.  
Protect them.

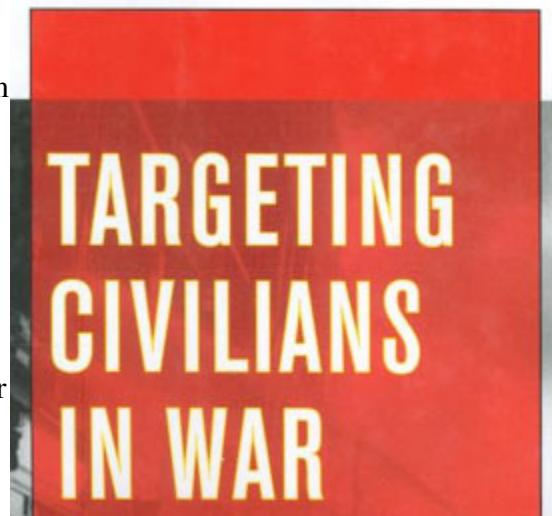
{ Comments on this entry are closed }

## Data On Targeting Civilians

by [Christopher R. Albon](#) on November 16, 2009 [[edit](#)]

In his book, Alexander Downes uses a dataset on civilian deaths in wartime to conclude that governments kill civilians for two reasons: (1) to reduce the risk to their own military and (2) to seize territory. It is a good study, offering a mix of quantitative analysis and historical case studies. I often look at Downes' book as a model for my own dissertation.

This week, [Charli Carpenter of The Duck of Minerva linked](#) to the treasure-trove for conflict researchers: Downes' replication data. Downes deserves huge credit for releasing his data online. You can [download his Web Appendix and Dataset here](#). I know what I am going to be doing tonight!



Below is a list of variables included in Downes' dataset:

ALEXANDER B. DOWNES

- War number
- COW state number
- Abbreviated state name
- Name of war
- Year war started
- Year war ended
- Strategy of targeting civilians intentionally or using force indiscriminately
- Same, capable states only
- State killed 50,000 or more civilians
- Same, capable states only
- Civilians killed per state, low estimate
- Civilians killed per state, medium estimate
- Civilians killed per state, high estimate
- Civilians killed per capable state, low estimate
- Civilians killed per capable state, medium estimate
- Civilians killed per capable state, high estimate
- Civilians killed in campaign of civilian victimization
- Ordinal indicator of civilians killed, low estimate
- Ordinal indicator of civilians killed, medium estimate
- Ordinal indicator of civilians killed, high estimate
- Ordinal indicator of civilians killed, low estimate
- Ordinal indicator of civilians killed, medium estimate
- Ordinal indicator of civilians killed, high estimate
- Ordinal indicator of civilians killed during campaign of civilian victimization, medium estimate
- Log of low estimate of civilian fatalities
- Log of medium estimate of civilian fatalities
- Log of high estimate of civilian fatalities
- Log of civilian fatalities inflicted during campaign of civilian victimization
- Log of medium estimate of civilian fatalities, capable states
- Polity 4 index of democracy/autocracy, -10 to +10
- Polity 4 score of +7 or greater
- Coded as a liberal state by Doyle 1997
- Polity score between -6 and +6
- Polity index, 0-20
- Regimepos squared
- Insular state, protected by water from great powers
- States in war from different civilizations as coded by Huntington 1996
- States in war from different regions as coded by COW
- War of attrition
- Log of state's battle deaths
- Log of war duration in days
- War aim is unconditional surrender, regime change, or expanded during the war
- War aim is to annex territory

- Log of enemy state's population
- State and its opponent have capability to kill civilians
- State's civilians targeted by adversary
- State had some positive number of civilians killed
- War occurred after 1945
- War occurred after 1970
- War initiator

{ Comments on this entry are closed }

## The Dutch Approach

by [Christopher R. Albon](#) on November 14, 2009 [[edit](#)]

It seems everyone is going Dutch these days. Gen. Stanley A. McChrystal recently triumphed a softer Afghanistan strategy focusing on civilian protection and development. This week, the LA Times [published a piece on a similar strategy already done by Dutch forces](#):

"Dutch planners said they've concentrated on community development nearly as much as military security and have worked to ensure that complex tribal, political and governmental interests had a stake in building schools and other civilian projects. This, they hoped, would encourage residents to protect the structures against Taliban attacks, even if the process required far more time and effort than paying foreign contractors to throw up a showcase project."

I am happy to see Dutch forces in Afghanistan getting some well deserved attention.

{ Comments on this entry are closed }

## UN Peacekeepers Across The US Border?

by [Christopher R. Albon](#) on November 12, 2009 [[edit](#)]

Businesses in Juarez, Mexico are [asking for the deployment of United Nations peacekeeping troops](#) to stop the ongoing drug violence (insurgency?). The deployment is unlikely; a UN operation would amount an acknowledgement by the Mexican federal government that it is unable to provide domestic security within its borders. However unlikely, the deployment would place UN peacekeepers less than a mile from El Paso, Texas. If that does not cause Washington to press the panic button, nothing will.

{ Comments on this entry are closed }



## **USAID Finally Gets Its Czar**

by [Christopher R. Albon](#) on November 12, 2009 [[edit](#)]

After more than three months of waiting, USAID might have an administrator. Yesterday [President Obama nominated former Department of Agriculture Under Secretary for Research, Education, and Economics Dr. Rajiv Shah as USAID Czar](#). But this is only the beginning of the fight. If Shah is confirmed, he takes over an organization struggling to find its way. More and more federal organizations are taking big steps into the development world, most notably the US military. If USAID is to remain relevant, Shah must build solid and productive relationships with these newcomers, turning usurpers into partners. If he doesn't, USAID risks becoming sidelined to the strategic development goals of the US military and other organizations. I do not envy Shah, but wish him luck.



{ Comments on this entry are closed }

## **AfPak From A Human Security Perspective**

by [Christopher R. Albon](#) on November 10, 2009 [[edit](#)]

My first introduction to the concept of human security was from the [Human Security Report Project](#) at Simon Fraser University. As a political scientist, I knew of many conceptualizations of conflict, but had never heard about human security. At that early stage of my education, I was developing my first personal opinions on conflict, what it is, and what it is not. From an undergraduate background focusing on global health, my view of conflict went beyond the traditional focus. Conflict are more than generals, tactics, and strategy. Conflict are also about damaged roads, fleeing civilians, and a loss of stability. That idea crystallized when I stumbled upon [this definition of human security](#):

“Unlike traditional concepts of security, which focus on defending borders from external military threats, human security is concerned with the security of individuals.”

The sentence encapsulated my own beliefs eloquently and simply. Conflicts threaten people. Since then, I have been an avid follower of the Human Security Report Project. Now, the project is using two blogs to offer a human security perspective on AfPak. Both the [Afghanistan](#) and [Pakistan Conflict Monitors](#) are aggregators of human security information on the conflicts and are worthwhile readings for anyone in the field. Check them out.

{ Comments on this entry are closed }

## **Shut... Down... Everything!**

by [Christopher R. Albon](#) on November 4, 2009 [[edit](#)]



A while ago, an internet flash game called [Pandemic 2](#) became popular in some circles. In the game, players manipulate a disease's characteristics (symptoms, resistances, etc...) to develop the deadliest possible pandemic. Simply put, players design diseases to wipe out the human race.

Play Pandemic 2 for any significant length of time and you quickly realize why the game is so difficult: Madagascar. In the game, Madagascar has a hairpin trigger for closing its borders, making infecting the island nation almost impossible.

Madagascar's behavior in the game has started an ongoing internet joke about what goes on in [high level policy discussions](#) in the government during the simulated pandemic (one example is shown on the right).

The punchline has a ring of truth. Last spring, Mexico [shut down the country](#) for days to counter H1N1. But, is closing down a country (or even part of a country) actually a good option in the real world? Only if you face a biblical plague.

The economic cost of closing down (or closing off) a country for any length of time is immense. It is a lesson [Mexico learned the hard way](#). Not only does the domestic economic activity of a state take a major hit, the closure fuels fears amongst international trading partners that states are unstable and unreliable. Investors like policy stability. States prone to shutting down in the face of pandemics risk

more common, countries with reputations for resiliency during outbreaks will become attractive investment locations. The tendency of Pandemic 2's Madagascar to close its borders at the slightest sign of danger would make it an foreign direct investment (FDI) pariah. Unless of course, we faced the perfect pandemic, in which case, see you there.

{ Comments on this entry are closed }

## **Civilians, Social Science Central To New Army Capstone Concept**

by [Christopher R. Albon](#) on October 22, 2009 [[edit](#)]

The Army Capstone Concept (ACC) is a document framing the future direction of US Army training and doctrine. Brig. Gen. McMaster has posted a [draft version of the ACC online](#), and [is even looking for feedback from the online conflict community](#).

I have only briefly browsed the document, but one thing is clear: civilians, human security, history, culture, social science, and human terrain have a central role in the new ACC. This is a sea change from the last ACC, which emphasized the importance of advanced technology. Check out a summary of the ACC in this Army video below:

[The 2009 Army Capstone Concept](#) from [TRADOC](#) on [Vimeo](#).

{ Comments on this entry are closed }

## **Global Health Essay Competition**

by [Christopher R. Albon](#) on October 22, 2009 [[edit](#)]

has launched an essay competition. And, since you retain the copyright, it is no-loss situation for bloggers. If you lose, you still have a blog post ready to publish!

The CSIS Commission on Smart Global Health is seeking essay submissions that answer the following question in 500-800 words by midnight, November 20th 2009:

*“What is the most important thing the U.S. can do to improve global health over the next 15 years?”*

We are looking for fresh, innovative approaches to global health problems. The author of the winning essay will receive a \$1,000 scholarship with a chance to be published in the Commission’s final report. Complete details can be found at:

[Sign up here.](#)

The CSIS Commission on Smart Global Health Policy focuses on practical solutions that maximize efficiency, produce measurable results, and engage the American public. This essay contest is one way we’re expanding the conversation to include the ideas and opinions of people who are passionate about global health issues.

{ Comments on this entry are closed }

## [\*\*Navy's New Slogan Highlights Soft Power Mission\*\*](#)

by [Christopher R. Albon](#) on October 20, 2009 [[edit](#)]

Last week, a [fellow contributor to USNI](#) noticed that the US Navy has a new slogan: [\*“America’s Navy – A Global Force for Good”\*](#). The slogan is likely an attempt to highlight the Navy’s growing role as a instrument of US soft power around the world. From disaster relief in the Pacific to health clinics in South America, the Navy is quickly positioning itself as America’s de facto soft power force.

I would not at all be surprised if, in five years, you would be hard pressed to find a sailor that *hadn’t* participated in a humanitarian mission.

{ Comments on this entry are closed }

## [\*\*New America Foundation: Militants 67% of Drone Deaths\*\*](#)

by [Christopher R. Albon](#) on October 20, 2009 [[edit](#)]

A report published by the [New America Foundation](#) estimates up to 320 Pakistani civilians have died in US drone-based airstrikes. The statistic was estimated from an analysis of news reports.

We restricted our analysis to reports in the *New York Times*, *Washington Post*, and *Wall Street Journal*, accounts by major news services and networks—the Associated Press, Reuters, Agence France-Presse, CNN and the BBC—and reports in the leading English-

from Geo TV, the largest independent Pakistani television network.

Here is a summary of the results:

It is not possible to differentiate precisely between militant and civilian casualties because the militants live among the population and don't wear uniforms, and because the militants have the incentive to claim that all the casualties were civilians, while government sources tend to claim the opposite. However, of those killed in drone attacks from 2006 through mid-October 2009, between 500 and 700 were described in reliable press reports as militants, or some 66 to 68 percent.

Based on our count of the estimated number of militants killed, the real total of civilian deaths since 2006 appears to be in the range of 250 to 320, or between 31 and 33 percent.

The report offers a counterargument to the growing number of 'offshore balancers', who argue the United States should withdraw all ground forces and instead bomb Afghanistan and Pakistan from afar. Forcing civilians and militants to keep an eye on the sky [is not victory](#) as currently defined. In their words, "the drone program is a tactic, not a strategy".

{ Comments on this entry are closed }

## **[Conflict And Health Blogs You Should Be Reading](#)**

by [Christopher R. Albon](#) on October 12, 2009 [[edit](#)]

From time to time, I highlight blogs that have moved to the top of my daily reading list. Here are three conflict and health blogs that I have been thoroughly enjoying with my morning coffee. Check them out and consider adding them to your RSS reader.

**[VethnoGraphy](#)**. Craig Kiebler's blog focuses on agricultural and veterinary infrastructure, and their relationship with society. In practice, posts often mix global health, veterinary science, and conflict in one soupy delicacy. Why should you read it? Because it is fascinating and (more importantly) original. You can read about child health, HIV, and swine flu on a dozen great blogs, but VethnoGraphy is the only place writing exclusively on the relationship between animals and global health.

**[CTLab's Current Intelligence](#)**. I don't think I have given the Complex Terrain Laboratory enough credit. Michael Innes (who just published [two pieces](#) at Foreign Policy) and John Matthew Barlow have put together a serious team of contributors, minus [one lucky guy who snuck in under the radar](#). Don't believe me? Check out this nearly one thousand word post by Professor Charli Carpenter (founder of [The Duck of Minerva](#)) on the Russia-Georgia War.

**[War is Boring](#)**. Freelance journalist David Axe has turned his little blog into a solid publication, with one correspondent just returning from Afghanistan and a second just leaving. The site publishes article length posts on armed conflict at least three times a week, often with original photography. War is Boring is one of the few great independent war journalism blogs.

{ Comments on this entry are closed }

## H1N1 As International System Perturbation

by [Christopher R. Albon](#) on October 12, 2009 [[edit](#)]

In May, Adam Elkus [examined the H1N1 in terms of system perturbation](#):

Mexico's image has also taken a severe battering. Already portrayed in international media as a warzone riven by cartel violence, Mexico's status as a possible origin point of the influenza is likely to have adverse public relations and economic effects long after the influenza outbreak extinguishes itself. Non-essential services in Mexico have currently ceased and 168 have already died from flu-like symptoms. China experienced similar embarrassment after the 2003 SARS epidemic and the 2006 Avian Flu outbreak, spurring calls for healthcare and governance reforms. Many international actors perceived the reforms that resulted as effective. By the time the 2008 Olympics rolled around, Avian Flu was a distant memory. As an Associated Press story notes, Mexico will likely face a similar pressure for reform because of its lackluster response to the outbreak...

Could it have the same affect on the international stage? I won't be holding my breath. Thomas P.M. Barnett defines system perturbation as "[like a giant stone dropped into a calm pond](#)", after which "[...all bets are off. The old rule set evaporates, the new one is not yet gelled](#)". For all their effects, epidemics (and pandemics) have historically been weak causes of this type of international reorganization. United States foreign policy was affected by the 1918 Spanish Flu, but the pandemic did little to change the fundamental structure of United States behavior towards other countries in the international environment. Compared with the aftermath of WWII, which brought about a new system of international relations (e.g. hegemony with responsibilities, international organizations), epidemics are rather ineffectual as agents of system perturbation. Epidemics are significant, but don't expect them to reset the international environment.

{ Comments on this entry are closed }

## HIV Screening in the Zambian Air Force

by [Christopher R. Albon](#) on October 7, 2009 [[edit](#)]

Two former Zambian Air Force officers are [suing the country's military, claiming to have been tested for HIV without their knowledge](#). Military HIV testing is voluntary in Zambia. The military argues they discharged the two officers for other medical conditions (cancer and TB).

Both were put through medical tests in 2001 that they believed were routine check-ups, after which they were put on medication.

Much later, both men volunteered to be tested for HIV and claim it was only then that they were told that the drugs they had been taking were anti-retrovirals.

The case is bringing the debate over mandatory HIV screening in Zambia back into the public debate. Opponents claim mandatory screening is a violation of human rights. Proponents argue it is a public health necessity.

{ Comments on this entry are closed }

## Epidemics as Defensive Strategy

by [Christopher R. Albon](#) on October 5, 2009 [[edit](#)]



From April 1775 to March 1776 the Continental Army lay siege to British forces in the town of Boston. The eleven month siege resulted in a major victory for George Washington's scrappy army. Boston's geography (a peninsula connected to the mainland by a narrow isthmus) is often credited for the lack of an early decisive engagement during the siege. The physical terrain worked against the attacker in any potential maneuver. However, some recent histories highlight another reason for the long stalemate: smallpox.

Smallpox flourished during the war. The highly virulent disease spread rapidly as soldiers on both sides clustered in unsanitary camps. The incidence was fueled by the steady supply of new recruits with no previous exposure. One early report in the war claimed that between 30-35% of Washington's troops were sick (not always smallpox) and unfit for duty (Becker 2004, 393).

Washington's army was especially at risk from smallpox. While African Americans, Native Americans, and British troops commonly inoculated themselves to smallpox, American colonists widely scorned the practice. The inoculation procedure required the application of pus from a smallpox pustule onto the skin of a non-immune individual. Many New England colonist considered the practice repulsive — even blasphemous — and enacted heavy legal restrictions against it. As a result, Washington had great difficulty inoculating his troops and his army was perpetually at risk of debilitating smallpox epidemics within their ranks.

Historians debate why the British commander, General Howe, failed to fortify the Dorchester Heights, which overlooked his besieged town. While most historians blame the personal failings of Howe, Ann Becker argues that the epidemiological terrain made Howe consider a Continental offensive unlikely. During the siege, Washington commented in letters that smallpox existed throughout Boston and British troops inside the city were thoroughly inoculated. The Continental general considered smallpox "a weapon of defense they are using against us" and a "surety against any attempt of ours to attack" (George Washington to John Hancock and George Washington to Joseph Reed, both quoted in Becker 2004, 399). Any attack on Boston would expose the Continental Army to smallpox in Boston,

smallpox epidemic — felt secure from Continental attack.

## Work Cited

Becker, Ann M. 2004. "Smallpox in Washington's Army: Strategic Implications of the Disease during the American Revolutionary War." *The Journal of Military History* 68(2): 381-430.

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## Ibn Sina Hospital Closes

by [Christopher R. Albon](#) on October 2, 2009 [[edit](#)]

Today, the [NYTimes At War blog](#) profiles the hand over of the largest US military hospital in Iraq. Based in the Green Zone, Ibn Sina Hospital has provided medical care to US servicemen, civilians, and insurgents:

After visitors pass through body searches at a pair of security checkpoints outside the hospital, the interior of Ibn Sina (named for a Ninth Century physician), looks a lot like a civilian medical center in a mid-sized American town: There is a long central hallway, a small emergency room, a few operating rooms and a pharmacy with an electronic sign that reads, "Now Serving ...."

In its supply rooms, stocked among shelves lined with boxes of bandages, bottles of sterile water and J-tubes used for opening airways, are surgical kit bags containing instruments needed to perform various types of surgical procedures.

But soon enough, it becomes clear that this hospital is something else. There is a special arms room for storing weapons. Many of the kits on the shelf are marked "amputation" — an operation carried out with numbing regularity at Ibn Sina over the years.

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## LTTE Defeat Foreshadows New Conflict

by [Christopher R. Albon](#) on October 2, 2009 [[edit](#)]

The decisive defeat of the LTTE in Sri Lanka's northern region brought hope of ethnic reconciliation on the embattled island nation. However, a recent [Economist article](#) on the Tamil civilian population highlights a new conflict brewing.

After the May 17th defeat, over 260,000 mostly Tamil civilians were interned in 16 camps. Since then, by the government's own account, only 20,000 have been released. With many Tamils interned and off their land, thousands of Sinhalese families driven from land by LTTE during the long civil war are surging north to reclaim it:

In Irakandy, a short drive from Trincomalee, 1,050 Sinhalese, representing over 350 families, have gathered to reclaim land from which 80 families were driven in 1985. ... Priyantha Malvangoda, a well-dressed businessman from Colombo, says he and six siblings are all staking claims, his father having been driven from a nearby one-acre farm in 1985.

The root of the conflict is a rift between de jure and de facto ownership. Many of the Sinhalese coming north are carrying “documents supporting claims to have bought the leaseholds to the land” in former Tiger territory. However, for years (often decades) the land has been de facto owned and farmed by Tamil families.

Sri Lanka’s government must tread carefully. Post-war land disputes are powder-kegs. Supporting the Sinhalese owners could spark a new insurgency if young, male Tamil farmers feel their land was stolen from them by a racist government. Supporting the Tamil owners will alienate the government’s political base. Splitting the land will likely satisfy nobody.

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## War and Health Shuts Down, Becomes Conflict Health

by Christopher R. Albon on September 28, 2009 [[edit](#)]

Readers are noticing the major change to War and Health that occurred over the weekend: we changed domains! After two years of activity, War and Health is growing up and getting a new name: Conflict Health.

Why the new name? War and Health’s name originated as a play off Tolstoy’s masterpiece. However, I was never happy with it. The site never focused exclusively on ‘wars’. Many issues discussed here (e.g. the collapse of Zimbabwe’s health system) could only be labeled ‘wars’ under the widest of definitions. Furthermore, over time my interest in the health implications of less-than-war political violence has grown considerably. Conflict Health reflects this broader focus.

What does this mean for RSS and newsletter readers? *Nothing*. War and Health’s RSS Feed and Mailing List will continue to work indefinitely. There is no need to change anything at your end. Furthermore, all links to War and Health content are automatically redirected to their Conflict Health equivalents. Simply put: all RSS feeds, Mailing Lists, War and Health URLs, and inbound links work.

So, sit back and enjoy the show.



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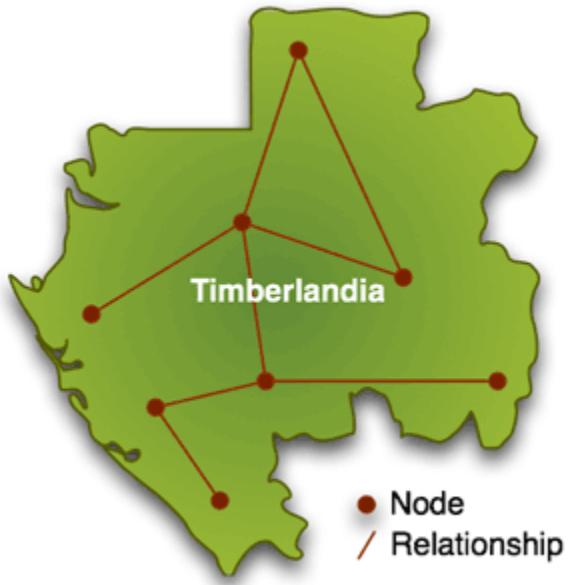
## The Social-Systemic Consequences of War

by [Christopher R. Albon](#) on [September 25, 2009](#) [[edit](#)]

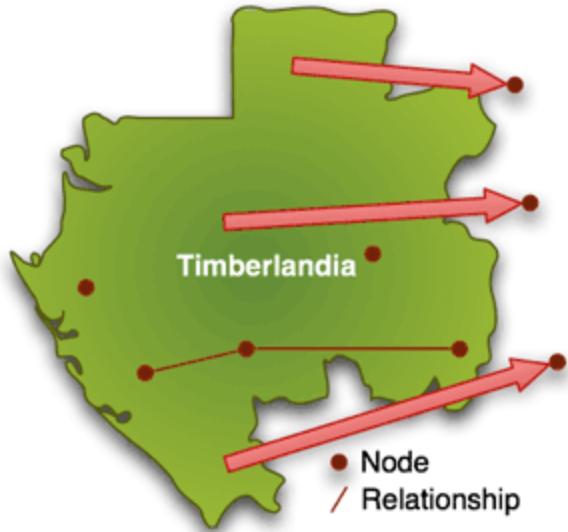
*"I am not an Arab or African, I am a Darfuri and my tribe now is called Refugee. We are all refugees"* -[Mohamed Hassan Yagoub](#)

Countries are comprised of layers of systems. These network of systems promotes efficiency by reducing the cost to connect with other nodes in a system. Systems of roads reduce the cost to travel from your town (a node) to another town (a node). Systems of justice reduce cost by allowing individuals resolve their grievances through an established and open (e.g. laws are public) framework.

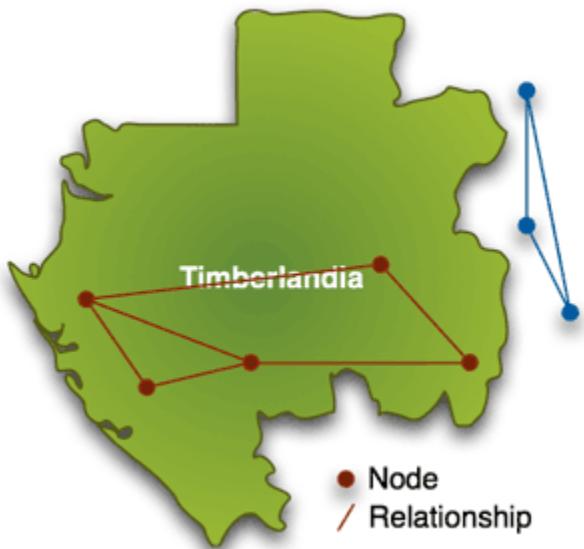
Now, let us look at a more complicated example: social relationships. Systems of relationships reduce the cost of social interaction. Meeting someone for the first time is costly. Utility is spent determining whether they are friend or enemy. Luckily, networks of social relationships reduce this cost by (amongst other things) signaling an individual's status. For example, you are more wary of a friend of an enemy than a friend of a friend. These social cues are valuable for everyone in the network. Armed conflict can have a dramatic and perilous effect on networks of social relations.



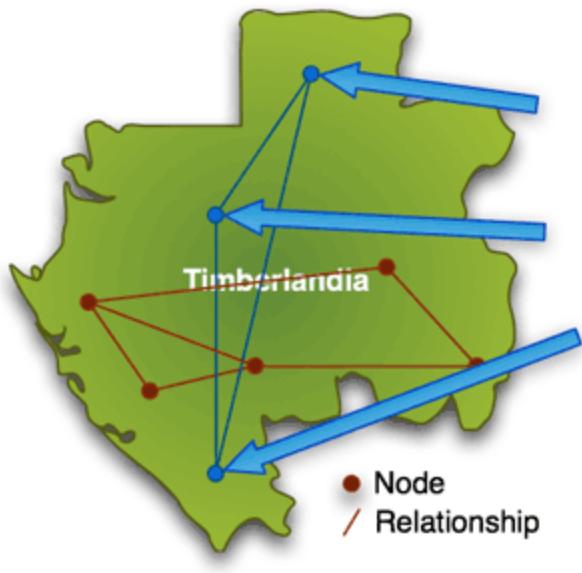
Imagine a state, Timberlandia. Within Timberlandia exists a number of groups (red circles) connected via a network of relationships (red lines). Before the conflict these relationships are used for social support, sharing information, and trade. Families use the network to find cheap lodging in while traveling. Friends use the network to find information on jobs. Businesspeople use the network to find customers.



During civil war some groups are forced to uproot and find safety in a neighboring states. The fighting disrupts the network by breaking up social relationships or eliminating nodes entirely. Disruption of nodes and relationships (fewer lines) reduces the efficiency-enhancing capacity of the social network. Friends have fewer people to call for work and businesspeople have a harder time finding customers.



Networks are organic. When disrupted, they rebuild connections. Separated by a border, the displaced nodes develop new social relationships with each other. That is, they build a new, diaspora social network (shown in blue). The nodes remaining in Timberlandia are busy too. The loss of nodes in their network has forced the establishment of new relationships to replace those lost. In the sense, the diaspora and remaining networks self-heal by building new relationships.



Problems can arise when the diaspora nodes (and their social network) return home. Before the civil war there was one social network, however, now there are two networks of relationships. Unless properly addressed, these networks can compete and conflict for jobs, resources, and power.

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## Why Navies Love Soft-Power

by [Christopher R. Albon](#) on September 22, 2009 [[edit](#)]

Last week, the Netherlands announced that the amphibious transport ship [HNLMS Johan de Witt will participate in Africa Partnership Station](#). The two month deployment is the Dutch Navy's first major soft-power cruise. The deployment of the Johan de Witt demonstrates the growing Dutch interest in soft-power. But why?

Part of it has to do with the increasing acceptance of soft-power as a useful tool in international relations. Secretary of Defense Robert Gates argued as such two years ago and I whole-heartedly agree. However, there is likely another reason: soft-power cruises give navies missions for their ships.

The last eight years of war have been — apart from combat air support, sea-lift, and small maritime security operations — land-based affairs. As such, the US Navy played only a limited, supporting role in both conflicts. In Europe, national security threats are even more remote and European navies have few reasons to justify maintaining expensive blue-water fleets. Enter soft-power.

The possible benefits of soft-power cruises are numerous, but during the USS Nashville's mission to West Africa, Captain Cindy Thebaud [stated](#) "the indicators [of success] will be long-term, not near-term". In other words, soft-power is important, but impossible to measure. Thus, soft-power provides politicians and naval leaders with a politically convenient mission justifying naval budgets

I am a strong supporter of soft-power, particularly using naval assets. There are significant diplomatic and stability benefits to US armed forces providing services and training after disasters and in marginalized regions. But, soft-power mission effectiveness *is* measurable. If our goal is to develop soft-power into an meaningful tool of foreign relations, then missions must be judged on useful metrics.

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