

The WHO Resolution on the Effects of Nuclear War on Public Health and the Associated Editorial

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It took over a year – based on an initial proposal tabled by international Physicians for the Prevention of Nuclear War (IPPNW), and with energetic action by IPPNW and a number of key countries, supported by an editorial that was published in medical journals around the world [1], with the official backing of the World Association of Medical Editors (WAME) – and it came to a successful conclusion at the World Health Assembly on 26 May 2025, when 86 countries voted in favour of “Pillar 3, 18.1 Effects of Nuclear War on Public Health”: WHO regained its mandate to re-engage with nuclear weapons and health and committed to preparing new reports on the subject.

WHO had lost this mandate in 2020 in a routine conclusion of its term. Reports on nuclear weapons and health had been published in 1983, 1987 and 1993, but nothing since then. Now, with this new mandate, WHO resolves to update the reports, cooperate with relevant parties and other United Nations bodies and international organizations, and report to the World Health Assembly in 2029 on progress in the implementation of this resolution.

Some background

From the tabling of the initial IPPNW proposal in July 2024, work accelerated in the Geneva office of IPPNW, managed by Chuck Johnson. Aided and abetted by a fluctuating team of volunteer students, and the input of IPPNW supporters worldwide, the Geneva team lobbied hard with country representatives and senior WHO staff.

Before the WHA, Chuck Johnson represented IPPNW at a meeting with WHO Director-General Dr Tedros Ghebreyesus, in which the DG was briefed about the proposal.

Then work began in earnest to develop the resolution. Led by Pacific Island nations and Kazakhstan – in particular by Samoan diplomat Marissa Toomata, Marshall Islands representative Augustine Sokimi, and Helen Weldu of Vanuatu, representing the three chief sponsor nations – a resolution was drafted and submitted in November.

The initial target was to have a viable draft supported by a number of co-sponsoring countries presented to the WHO Executive Board in January 2025. This was achieved with portions of the text still not “green-lighted”, but with enough momentum to have it approved for inclusion in the agenda of the World Health Assembly in May 2025.

An editorial

Meanwhile an editorial in support of the resolution was drafted by Tilman Ruff with assistance from Andy Haines and Chris Zielinski. This was circulated to a number of Editors-in-Chief of leading medical journals who had collaborated in a previous multi-journal editorial on nuclear risk in 2023 [2], and who agreed to share the authorship responsibilities for the new editorial [1]. The editorial was also formally supported by the WAME Board. Together with leading figures from IPPNW, and the Nobel Prize-winner Peter Doherty, there were 23 named authors of the editorial, which was sent out under the title, “Ending nuclear weapons, before they end us” to medical journals around the world [1].

Given the short time-frame – the editorial was distributed in March, aimed at the World Health Assembly, which was taking place in May – expectations were that there would be a

relatively small uptake. In the end, 135 journals published the editorial, which was a highly satisfactory result.

Our heartfelt thanks go out to all journal editors and administrators for this, and for providing Open Access and granting us APC waivers.

The World Health Assembly

Able led by the Marshall Islands, Samoa and Vanuatu, and the other co-sponsors, by the time the draft resolution was discussed at the World Health Assembly, the text had been fully “green-lighted”, and had attracted 34 co-sponsoring countries. This gave the resolution a powerful initial push. Prof Sir Andy Haines delivered the IPPNW statement at the Health Assembly and the debate started.

The principal objections can be summarized in the statement of the UK delegate who, in his post-vote explanatory remarks, expressed his government’s concern that the proposed report and work would “duplicate that of other international bodies when a constrained WHO budget is driving an urgently needed prioritization exercise”.

In fact, the UN General Assembly had agreed in late 2024, by a strong majority of 144 to 3, to establish an independent scientific panel to carry out a new study on the effects of nuclear war. The resolution called upon the United Nations system and relevant agencies, including WHO, to support and contribute to this work. Rather than duplicate effort, proponents of the WHO resolution agreed that close collaboration with the UN’s work would be required. They noted that WHO had a constitutional responsibility and unique authority to provide the international community with this research, as the UN’s specialised agency on health.

As to the financial requirements for such a study, while this was an important question, the funding required is quite modest in the context of WHO’s overall budget. According to WHO’s estimate, the amount needed in additional funding over four years was \$330,000. This would have a negligible impact on WHO’s operational effectiveness, even if no external funding is provided.

The votes at the Health Assembly

By the conclusion of voting, 86 countries had voted in favour, 14 were against, and there were 28 abstentions. This shows a strong global body of support, but it also illustrates the divisions .

The 14 nay-sayers were the Czech Republic, DPR Korea, Estonia, France, Germany, Hungary, Latvia, Lithuania, Monaco, North Macedonia, Poland, the Russian Federation, Slovakia, and the United Kingdom. 11 of the 14 no votes were from NATO countries - though not one of them spoke before the vote, leaving that to Russia and the DPRK.

Of the 28 abstentions, 19 were NATO countries (with NATO-candidates Georgia and the Republic of Moldova making it 21 out of 28), leaving only four nuclear weapons states (China, India, Israel, and Pakistan), plus Serbia, Belarus and Morocco to round out the rest. Interestingly, Ukraine voted yes, as did US allies Australia, Japan, and South Korea.

Conclusion

Even without detonation, nuclear weapons pose significant health risks at all phases of their preparation, testing, storage and other operations. Nuclear war would of course be a catastrophe for human health. WHO now has the global mandate to lead the review of this issue and ensure that

Member States are fully informed of the existential consequences of nuclear weapons .

The lists of countries above suggest a need for particular efforts to convince the governments of these countries to drop their support for nuclear weaponry. The concept of deterrence, taken to its logical extremes, implies that every country should acquire nuclear weapons, and this clearly would not make the world a safer place. The risks of intentional or accidental nuclear war increase with the production of every bomb .

As our editorial said, we need to end nuclear weapons, before they end us.

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