

# S A N A CIENTISTS AGAINST NUCLEAR ARMS

## A PROVISIONAL BRIEF ON CIVIL DEFENCE

for County, Borough and District Councillors

compiled in a hurry by

Professor Mike Pentz (Dean of the Faculty of Science at  
the Open University) Chairman, National Coordinating  
Committee of SANA.

14 June 1981

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NOTE This briefing package is provisional. When SANA Working Groups on Civil Defence are operational, a properly prepared package will be made available. This brief was produced at very short notice in response to an urgent request from Buckinghamshire County Councillors and from Broadlands (Norfolk) District Councillors. Given more time, and some collective effort, a much better and more readily usable package can be produced.

### THIS PROVISIONAL BRIEF CONTAINS THE FOLLOWING ITEMS:

1. A slightly expanded text of a talk given by Mike Pentz to an Open Seminar on 'EMERGENCY PLANNING FOR WAR', organised by Derby CND (18 March 1981)  
This contains: useful quotations of authoritative statements by scientists and medical people about the futility of Civil Defence (pp 1-6)  
examples of misinformation of the public following 'briefing' sessions conducted (in SUSSEX and in BUCKS) by Sir Leslie Mavor and others ('MAVOR'S TRAVELLING CIRCUS')  
some key points about the new policies of nuclear war, of which the Cruise Missile and Trident are an integral part, for which Civil Defence propaganda is important.
2. Excerpts from the Proceedings of the 1st Congress of The International Physicians for the Prevention of Nuclear War (Virginia, U.S.A., 20-25 March 1981)
3. A Fact Sheet on THE MYTH OF CIVIL DEFENCE by Exeter CND
4. The text of a short review article on the HMSO pamphlet 'PROTECT AND SURVIVE' published by Labour Monthly (August 1980). This refers to the CND pamphlet on Civil Defence by Philip Bolsover.
5. A copy of Philip Bolsover's pamphlet (CND, 1980). NB: a revised and updated edition of this pamphlet should be available now from CND. There is a CND Committee on Civil Defence and Local Government. It has produced an interim information sheet on Nuclear-free Councils, etc. For information, write to:

CND, 11 Goodwin Street, London N4 3HQ, or telephone 01-263-4954/8546.

6. An article from the Feb/March issue of SANITY on activities of Local Councils on Civil Defence.

7. An article by John Gleisner (a psychiatrist from Manchester) in the Guardian (26/10/80) about the message of a Civil Defence briefing conference held in London : WHEN 'CONTROLLING' THE SICK MEANS SHOOTING THEM.

8. Some notes derived from a CND Group Mailing on Civil Defence and Nuclear-free Zones.

Mike Pentz

14/6/1981



Queen's Hall Derby Wednesday 18 March 1981

I have been asked to present a paper on the subject of Emergency Planning for War - presumably because that was the title of the restricted seminar held by the Derbyshire Area Health Authority earlier today. I intend to show, however, that 'Emergency Planning for War' is at best futile and at worst dangerous, and that it would be a far better use of people's time and money if it were spent instead on Emergency Planning Against War, or, better still, Emergency Action *for Peace.*

Central to the notion of Emergency Planning for War is the concept of Home Defence, or Civil Defence, and I note that this topic received special attention in today's seminar. Consequently I shall start by discussing the simple question: 'CAN CIVIL DEFENCE PROTECT US ?'. I should make it clear that I understand the word 'US' in this question to mean the great majority of ordinary folk, not merely a handful of top politicians, senior County officials and senior members of the Armed Forces; mind you, I have grave doubts about whether the so-called Civil Defence measures being proposed will protect even this elite, except perhaps in a temporary and ultimately an illusory sense.

I propose to argue that the answer to the question 'Can Civil Defence protect us ?' is NO it can't, and that the only effective defence for the people of this country is disarmament, and in particular nuclear disarmament. Furthermore, I think it has to be said that the Government's policy on Civil Defence, as stated, for instance, by Mr. Leon Brittan, when he spoke as Minister of State for the Home Office to the GLC Home Defence Seminar on 13th November 1980, is at best misguided and at worst mischievous, even malicious.

Let me first call before you some witnesses for the defence - for the true defence, that is, of the people of this country:

My first witness is Mr. Anthony Tucker, the distinguished Science Correspondent of the Guardian, and through him I shall call over 600 members of the medical profession. Mr. Tucker wrote an article in the Guardian on 25 April 1980, entitled 'COMPREHENDING THE BOMB'. Let me quote a passage from it:

Q. TUCKER (1) (2)



TUCKER (1)

TUCKER (2)

ANTHONY TUCKER (Guardian  
25/4/1980)

The medical profession is not notable for its willingness to take political stances and it might be thought that, in the United States the Physicians for Social Responsibility would comprise rather young, long-haired, slightly left of centre medics recently out of college. Nothing could be further from the truth. The group includes the President-elect of the US Institute of Medicine, Dr. F.C. Robbins (who is Dean of Case Western Reserve Medical School), half a dozen Nobel Laureates, Prof. Howard Hiatt, Dean of the Harvard School of Public Health, and around 600 individuals who include a spectrum of the most senior people in America's medical schools and hospitals.

It is this authoritative group that issued from a Symposium in February 1980 a warning that

"it is meaningless to attempt medical disaster planning for a nuclear exchange, that there is no way of achieving an effective civil defence, and that recovery from a nuclear exchange would be virtually impossible"

As Anthony Tucker pointed out :

'The thing to remember is that the people who are saying that these weapon effects are beyond the scope of any medical service or any form of civil defence are experienced medical authorities who know and understand the problems of emergencies and essential services' Tucker concludes:

'It is a gross deception to pretend that civil, medical or rescue services could be available on a scale and in the time needed. It would not even be possible to cope with the single grotesque public health problem of burying the dead.'

Let me call as my second group of witnesses the members of the medical working group at the 30th Pugwash Conference on Science and World Affairs, which took place in the Netherlands last August and brought together distinguished scientists from 43 countries for 6 days' discussion of current world problems. The group issued a warning which they considered should become widely known. It is in two parts. In the first they state that MEDICAL DISASTER PLANNING FOR A NUCLEAR WAR IS FUTILE. This is what they say: Q. PUGWASH (1)



1. MEDICAL DISASTER PLANNING FOR A NUCLEAR WAR IS FUTILE

A nuclear war would result in human death, injury and disease on a scale that has no precedent in history, dwarfing all previous wars and plagues. There is no possible effective medical response after a nuclear attack; in one major city alone, in addition to the hundreds of thousands of sudden deaths, there would be hundreds of thousands of people with severe burns, trauma and radiation sickness, all demanding intensive care. Even if all medical resources were intact, the care of these immediate survivors would be next to impossible. In fact, most hospitals would be destroyed, medical personnel among the dead and injured, most transportation, communication and energy systems inoperable, and most medical supplies unavailable. As a result, most of those requiring medical attention would die.

Medical problems that would be minor and curable in normal times - infections and fractures for example - would prove fatal for many. Numerous deaths would also occur from the interaction of multiple, simultaneous injuries that would be trivial if each occurred singly. Large numbers of those who escaped an acute death would suffer mutilating injuries. Furthermore, under the conditions of rampant chaos and terror, the incidence of psychiatric disorders would sharply rise. The risk of long term effects, such as cancer, would increase during their entire lifetime for many survivors, and possibly for their offspring as well.

In the second part they state that EFFECTIVE CIVIL DEFENCE AGAINST A NUCLEAR ATTACK IS IMPOSSIBLE. Q. PUGWASH (2)

2. EFFECTIVE CIVIL DEFENCE AGAINST A NUCLEAR ATTACK IS IMPOSSIBLE

Bomb shelters in cities under nuclear attack would be useless owing to the blast, heat and radiation effects. Shelters as far as 10 kilometres from the centre of even a one megaton surface nuclear explosion would become ovens for their occupants; the great surface fires would cook them and asphyxiate them. At greater distances, shelters would provide only temporary protection against the high levels of radioactive fallout. In a nuclear war, one would emerge from a shelter into an environment that was a nightmare: water would be undrinkable, food contaminated, and the economic, ecologic and social fabric, on which human life depends, destroyed. For the survivors, the risk of epidemics would be great, as a result of the unburied human and animal corpses everywhere, radiation, and the high sensitivity to radiation of the human body's ability to fight infection.

In sum, there are no defences against the lethal effects of nuclear weapons, and there is no effective treatment for those who initially survived a nuclear attack. Under all conditions, medically, nuclear war would be an unparalleled catastrophe.

(Continued)



' As doctors of medicine and scientists in health-related fields, we conclude, therefore, that nuclear weapons are so destructive to human health and life that they must never be used.

PREVENTION OF NUCLEAR WAR OFFERS THE ONLY POSSIBILITY FOR PROTECTING PEOPLE FROM ITS MEDICAL CONSEQUENCES. THERE IS NO ALTERNATIVE. '

There is, of course, nothing new about these authoritative assessments of the futility of so-called civil defence, as my next witness can testify:

LORD ZUCKERMAN was Chief Scientific Adviser to the Government for the years 1964-71. In the Times of 21 January last year he wrote:

' As our own White Paper on Defence put it as long ago as 1957, there were then no means of protecting the population against the consequences of a nuclear war. There are none today, when the scale of attack that could be envisaged may be a hundred times greater than it was in the 1950s. '

Now I could continue to bring before you witness after witness, all of them as authoritative as those you have already heard. I shall limit myself to one more: Last November, a conference at the Royal Society of Medicine, chaired by Sir Douglas Black, President of the Royal College of Physicians, unanimously endorsed the view that organised medical assistance, even to those in urgent need, would not be possible in nuclear war and that there can be no effective civil defence. The conference also decided that there was a need to protect the public from misinformation, particularly that which might mislead it into believing that the effects of nuclear war might be tolerable or 'acceptable'.

*More recently (in fact, just a few days after the Derby meeting) there was the First Congress of the International Physicians for the Prevention of Nuclear War. It was reported in THE LANCET of April 4, 1981. This report is reproduced on the next 2 pages. See also the excerpts printed by the World Disarmament Campaign (blue fact-sheet)*



## Conference

THE LANCET, APRIL 4, 1981

### INTERNATIONAL PHYSICIANS FOR THE PREVENTION OF NUCLEAR WAR

THE first congress of the newly formed organisation known as International Physicians for the Prevention of Nuclear War was held on March 20–25 at Airlie House, Virginia, near Washington, DC. The meeting arose from discussions in Geneva last December between a group of doctors from the Soviet Union and the United States.

The following countries were represented: Canada (4 participants), France (2), Israel (1), Japan (3), Netherlands (2), Norway (1), Soviet Union (14), Sweden (1), United Kingdom (5), United States (54), West Germany (2).

The doctors from the Soviet Union who attended last month's meeting were led by Prof. E. I. Chazov, director general, National Cardiological Research Centre, U.S.S.R. Academy of Medical Sciences.

The United States medical group had at its head Prof. Bernard Lown<sup>1</sup>, professor of cardiology, Harvard School of Public Health, other U.S. doctors present were: Prof. Herbert L. Abrams<sup>1</sup> (Harvard Medical School), Prof. A. Clifford Barger (Harvard Medical School), Prof. Robert W. Berliner (Yale University School of Medicine), Dr Helen M. Caldicott (president, Physicians for Social Responsibility), Prof. Thomas C. Chalmers (Mount Sinai School of Medicine of the City University of New York), Dr Eric Chivian<sup>1</sup> (Massachusetts Institute of Technology), Prof. Jerome D. Frank (Johns Hopkins University School of Medicine), Prof. Alfred Gellhorn (Harvard School of Public Health), Dr Arthur H. Hoyte (Georgetown University School of Medicine), Prof. Alexander Leaf (Massachusetts General Hospital, Boston), Prof. John Mack (Harvard Medical School), Dr James E. Muller<sup>1</sup> (Harvard Medical School), Prof. Kenneth Rogers (University of Pittsburgh School of Medicine), Prof. Rita R. Rogers (UCLA School of Medicine), Dr Jonas E. Salk (Salk Institute for Biological Sciences, San Diego), and Prof. Claude E. Welch (Harvard Medical School).

The participants from the United Kingdom were: Prof. J. W. Boag (emeritus professor of physics as applied to medicine, Institute of Cancer Research, University of London), Dr Jack Fielding (department of haematology, St Mary's Hospital, London), Dr Andrew Haines (M.R.C. epidemiology and medical care unit, Northwick Park Hospital), Prof. Patricia Lindop (department of radiobiology, St Bartholomew's Hospital Medical College, London), and Claire Ryle (national organiser, Medical Campaign against Nuclear Weapons).

#### WHAT PHYSICIANS CAN DO TO PREVENT NUCLEAR WAR

The meeting outlined the following objectives:

Review available information on the medical implications of nuclear weapons, nuclear war, and related subjects.

Provide information by lectures, publications, and other means to the medical and related professions and to the public on the subject of nuclear war.

Bring to the attention of all concerned with public policy the medical implications of nuclear weapons.

Seek the cooperation of the medical and related professions in all countries for these aims.

Develop a resource centre for education on the dangers of nuclear weapons and nuclear war.

Encourage studies of the psychological obstacles created by the unprecedented destructive power of nuclear weapons which prevent realistic appraisal of their dangers.

Initiate discussion of development of an international law banning the use of nuclear weapons similar to the laws which outlaw the use of chemical and biological weapons.

Encourage the formation in all countries of groups of physicians and committees within established medical societies to pursue the aims of education and information on the medical effects of nuclear weapons.

Establish an international organisation to coordinate the activities of the various national medical groups working for the prevention of nuclear war.

#### APPEALS TO POLITICIANS AND DOCTORS

The congress framed three messages:

*An Appeal to the President of the United States of America  
and to the Chairman of the Praesidium of the U.S.S.R.  
Supreme Soviet*

We, physicians from eleven nations, guided by our concern for human life and health, are well aware of the great responsibility you carry and of the enormous contribution you can make to the prevention of nuclear war.

As physicians and scientists, we have for the past several days reviewed the data on the nature and magnitude of the effects that the use of nuclear weapons would bring. We have considered independently prepared medical and scientific analyses from many sources. Our unanimous conclusions are:

(1) Nuclear war would be a catastrophe with medical consequences of enormous magnitude and duration for both involved and uninvolved nations.

(2) The holocaust would in its very beginning kill tens of hundreds of millions of people. Most of the immediate survivors, suffering from wounds and burns, affected by nuclear radiation, deprived of effective medical care or even water and food, would face the prospect of a slow and excruciating death.

(3) The consequences of nuclear war would continue to affect succeeding generations and their environment for an indefinite period of time.

Science and technology have placed the most deadly weapons of mass destruction in the hands of the two nations you lead. This huge accumulation imperils us all. The interests of the present and all future generations require that nuclear war be avoided.

The medical consequences persuade us that the use of nuclear weapons in any form or on any scale must be prevented. To achieve this, we offer you our sincere support.

As physicians, we remember that the eradication of smallpox required intense international communication, cooperation, and dedication. Nuclear war is a far greater threat to mankind. It will require even more intense collaboration among the nuclear powers to achieve an early cessation of the race to produce these instruments of mass destruction.

*An Appeal to the Heads of all Governments and to the United Nations*

Advances in technology in the 20th century have benefited humankind but have also created deadly instruments of mass destruction. The enormous accumulation of these nuclear weapons has made the world less secure. A nuclear conflict would ravage life on earth.

We speak as physicians in the interests of the people whose health we have vowed to protect. The scientific data concerning the medical consequences of the use of such instruments of mass destruction convince us that effective medical care of casualties would be impossible. We therefore urge that elimination of this threat be given the highest priority. No objective is more vital than to preserve the conditions that make possible the continuation of civilized life on earth.

As physicians, we know that the eradication of smallpox, coordinated by the World Health Organisation, required intense international communication, cooperation, and dedication. Nuclear war is a far greater threat to humanity. Continuing discussion among the nuclear powers and other countries will be needed to achieve an early cessation of the race to produce these instruments of mass destruction, to prevent their spread, and ultimately to eliminate them.

1. Lown B, Chivian E, Muller J, Abrams H. The nuclear-arms race and the physician. *N Engl J Med* 1981; **304**: 726–28.



*An Appeal to the Physicians of the World*

Dear Colleagues:

We address this message to you who share our commitment to the preservation of health. Our professional responsibility has brought us together to consider the consequences of the use of nuclear weapons.

We have participated in full and open discussion of the available data concerning the medical effects of nuclear war and its effects on our planet. Our conclusion was inescapable—a nuclear exchange would have intolerable consequences.

Enormous numbers would perish in the first hours and days of a nuclear war. The wounded survivors, burned and affected by nuclear radiation, would face unbearably difficult conditions, without effective medical aid, water, or food. The consequences of a nuclear war would also be disastrous to succeeding generations. A

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major nuclear exchange would inevitably bring extensive long-term consequences even to countries not directly involved.

No one should be indifferent to the nuclear threat. It hangs over hundreds of millions of people. As physicians who realise what is at stake, we must practise the ultimate in preventive medicine—avoidance of the greatest hazard the world will ever know. Your help is needed in this great endeavour. We urge you

- (1) to inform yourselves, your colleagues, and the general public about the medical effects of nuclear war;
- (2) to discuss the medical consequences of nuclear war at meetings of members of medical societies, special symposia, and conferences;
- (3) to prepare and publish in the medical press and specialised journals articles about medical consequences of the use of nuclear weapons;
- (4) to speak about medical consequences of nuclear war to medical students and to your community;
- (5) to use your influence and knowledge to help strengthen the movement of physicians for the prevention of nuclear war.

Respectfully yours

PARTICIPANTS OF THE FIRST  
CONGRESS OF THE INTERNATIONAL  
PHYSICIANS FOR THE PREVENTION  
OF NUCLEAR WAR

Airlie, Virginia  
March 23, 1981.

**MEDICAL CAMPAIGN AGAINST NUCLEAR WEAPONS**

In the United Kingdom this Campaign is being mounted by members of the medical profession and people involved in health care who are convinced that the prevention of nuclear war offers the only possibility of protecting populations from its medical consequences. The chairman of the Campaign is Prof. John Humphrey, F.R.S.

Inquiries about membership to the Campaign should be addressed to MCANW, 120 Edith Road, London W14. Details concerning organisation may be had by telephone from Claire Ryle (0223 350917).

The New York Times of 21 March 1981 reported Dr. E. I. Chazov, Director of the National Cardiology Research Centre, USSR as saying:

'Some of the military, public functionaries and even scientists are trying to diminish the danger of the nuclear arms race, to minimise the possible consequences of a nuclear war

'Statements appear that a nuclear war can be won, that a limited nuclear war can be waged, that humanity and the biosphere will still persist even in conditions of total nuclear catastrophe. This is an illusion which many of them do not believe themselves and which must be dispersed.'

'Soviet studies have shown that a one megaton nuclear explosion on a Soviet city would kill about 300,000 people immediately and would or burn another 300,000. Eighty percent of the doctors would die in such a nuclear attack and most of the hospitals, drugs and blood supplies would be destroyed'

'We could not help the people' he said and called for a ban on nuclear weapons.

Dr. Chazov's remarks were closely paralleled by Dr. Bernard Lown, a Harvard University cardiologist who is the President of International Physicians for the Prevention of Nuclear War. 'A mythology is being created' he said, 'that a nuclear war will not occur, or that if one does occur it will not be extensive.'

'A nuclear attack on just one American city the size of Boston would more than exhaust the entire medical resources of the nation just in treating burn victims', he said.



It is in this context that I wish to draw to your attention certain aspects of the activities of the former Principal of the Home Defence College, now 'Coordinator of Voluntary Effort in Civil Defence'.

I am referring to Air Marshall Sir Leslie Mavor, who, accompanied by Mr. Alan Howard, Head of F6 Division of the Home Office, and a number of individuals whose names are not disclosed to the public, seems to have been spending quite a bit of time travelling around the country 'briefing' County Councillors and Local Government officers about 'Home Defence' at closed, invitation only, meetings. These 'briefings' are nevertheless generally covered by the local Press, by handouts or by other means, and I want to give you two examples of the sort of thing that is passed on to the general public.

1. From the Sussex Express of 24 October 1980, following a briefing by Mavor, Howard and Co., of County, District and Parish Councillors in East Sussex: The headlines include ACCORDING TO THE GOVERNMENT IT'S NOT AS BAD AS YOU MAY HAVE THOUGHT and "SAFE AFTER TWO DAYS" Under this last headline we find; 'Though East Sussex would almost certainly be affected by radioactive fallout ... this could be expected to disperse very rapidly, and staying indoors for 48 hours would avert the worst effects, say the experts'. (Incidentally, one of the Operation Square Leg targets in East Sussex was Dungeness nuclear power station, which received a megaton groundburst. Mavor's 'experts' must, of course, have heard of plutonium, but they apparently didn't think it important to tell the Sussex County Councillors about the implications of releasing the radioactive inventory of a nuclear installation like Dungeness, even though this would increase the area of long-lived contamination by a factor of 100 to 150 times that of the bomb alone). There are some other interesting items from this account of this 'briefing':

Animals which had died from radiation poisoning would be edible if they were bled first, and vegetables could be eaten after washing, the seminar heard.

Looting, civil unrest, and an influx of refugees from other parts of the country could, however, pose serious law and order problems. Food and fuel stocks would

have to be guarded, and little help could be expected from the armed forces, most of whom might be abroad.

Democratic government, as we know it, would go by the board.



2. My second example is from Buckinghamshire, where I live. Bucks Councillors received a similar briefing, at about the same time, also given by Mavor and Howard and sundry other 'experts', as a result of which the Emergency Planning Officer, Mr. Bernard Beckett, told the Public Protection Committee, among other things, that 'if a foreign power used the maximum amount of nuclear weapons at its disposal in a concerted attack on this country, only 10% of Britain would be destroyed and 85% of the population would survive' (He didn't say what 'foreign power' he had in mind, but I don't think he meant Bangladesh or Chad. In case he did mean the Soviet Union, it might be worth recalling that the strategic nuclear stockpile of that country contains over 7000 nuclear warheads, with a total explosive power of over 10,000 megatons (more than a half a million Hiroshimas), and this does not include the 'tactical' nuclear weapons that could also be targetted upon this country.) This was duly reported in the local newspapers under headings like MAJORITY OF PEOPLE WOULD SURVIVE. The report also attributed to Mr. Beckett the statement that 'most houses in Buckinghamshire would provide protection from the effects of radiation following such an attack'. This point was subsequently reinforced by the Chief Executive, Mr. Martin White, in a letter to me and to the Press, in which he repeats the assertion that 'a substantial degree of protection from nuclear fallout could be provided by existing buildings' in Buckinghamshire.

I challenged these statements in a letter to the Chief Executive and to the Press, in which I said that not a single one could stand up to even the mildest scientific scrutiny without being shown to be either meaningless, or grossly misleading, or simply false. I offered to demonstrate the truth of this by exposing Mr. Beckett to such scrutiny in the presence of the Press and the public.

In his reply, Mr. White covered up for Mr. Beckett by saying that these 'were not Mr. Beckett's personal assertions' but were merely his 'report of the assessment made by SCIENTISTS taking part in the national home defence exercise Square Leg' (Note that our anonymous EXPERTS are now equally anonymous SCIENTISTS). In my reply to Mr.



White I accordingly wrote: 'If this is so, and if, as you say, 'there is nothing secret about our home defence plans', then I think the public has the right to know who are these so-called scientists and what is the evidence upon which they base this and other 'assessments' they appear to have made, such as that 'most houses in the County would provide substantial protection from the effects of radiation following such an attack'' And I went on to say ' I am glad to hear that the Council has an 'open policy' on these matters. May I suggest that the Council should accordingly convene a public meeting at which these 'scientists' be invited to present their assessments of civil defence and medical assistance in the event of a nuclear attack on this country, together with the assumptions and the evidence upon which they base these assessments, and to answer questions and comments upon what they have to say'

About a month later I had a reply from Mr. White, but unfortunately he made no attempt to answer any of the points that had been raised, nor did he take any notice of the suggestion that the Council should provide a platform for ~~Sir Leslie's~~ tame scientists to perform on. All he did was to send me a copy of a Home Office handout consisting of the text of ~~the~~ ~~speech~~ made by Mr. Leon Brittan, which I mentioned earlier. Mr. White seemed to think that this speech 'summed up so well and succinctly the case for how we carry out our home defence planning' that he felt no need to amplify it - and he ended up by saying he ~~was~~ now treating our correspondence as closed. In fact, Mr. Brittan's speech said nothing at all about 'how we carry out our home defence planning' - though it did say some very significant things about the politics of civil defence, to which I'll return in a moment.

In my reply, I said that I must insist upon receiving straightforward answers to four questions. I think this Seminar will find it instructive to hear the answers I eventually got from Mr. White to these four questions, especially if we bear in mind that one of the major functions, according to Sir Leslie Mavor of the Home Defence College has been to give briefing and training to County Chief Executives, presumably including the one for Buckinghamshire.



Question 1. Who are the 'scientists' who told the unfortunate Mr. Beckett that 'if a foreign power used the maximum amount of nuclear weapons at its disposal in a concerted attack on this country, only 10% of Britain would be destroyed and 85% of the population would survive?'

Question 2. What is the evidence, and what are the assumptions upon which this assertion was made, if indeed it was made at all, by these 'scientists' ?

two questions.

Q. MARTIN WHITE

LETTER 22nd January 1981

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(See p.11 for copy of this letter)

One can only wonder what this 'one type of nuclear attack on this country' was supposed to be. Perhaps it was imagined that most of the nuclear weapons in the 'concerted attack' would for some reason or other fall into the Atlantic Ocean. And the people of Buckinghamshire are apparently to be left with the comfortable feeling that 85% of them would survive such a 'concerted nuclear attack' even though the origin of this figure is 'a mystery'. My next question was this:

Question 3. When you yourself stated, in your letter of 7th November, that "a substantial degree of protection from nuclear fallout could be provided by existing buildings", what, in quantitative terms did you mean by 'substantial', under precisely what circumstances ?

Here is Mr. White's answer to this question

Q. MARTIN WHITE

LETTER 22nd January 1981

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(See p.11)



# BUCKINGHAMSHIRE COUNTY COUNCIL

County Hall Aylesbury Bucks HP20 1UA  
Telephone Aylesbury (0296) 5000 Telex No. 8310172

Martin White Chief Executive

This matter is being dealt with by Mr. White  
Extension 200  
Your Ref  
M. Ref 3/5 MW  
Date 22nd January 1981

Professor M.J. Pentz,  
Chairman,  
Milton Keynes Peace Campaign,  
21 Marshworth,  
Tinkers Bridge,  
MILTON KEYNES,  
MK6 3DA.

Dear Professor Pentz,

Thank you for your letter of 8th January which was not received until 15th January.

My answers to your questions are:-

- ①
1. & 2. Every County in England and Wales is required to recruit volunteer scientists for peacetime planning and training in Home Defence and duties at County and District War Headquarters. Certain qualifications are stipulated by the Home Office including both academic and professional. Details of scientists recruited for Home Defence are submitted to and approved by the Home Office. They do their initial training on a regional basis under the auspices of the Home Office, and their completion and advanced training is undertaken by the Home Defence College. That training includes the assessment of damage, fire, radiation and casualties by using calculators and computers specially designed for that purpose. The scientists in Buckinghamshire have been recruited from industry, government and local government departments.

||| The 10% of the U.K. being damaged to which you refer was quoted by Mr. Beckett as an example of the result of one type of nuclear attack on this country. Where the figure of 85% came from is a mystery, unless it was from confusion with Mr. Beckett's answer to a specific question from a councillor who asked the percentage of people in his area estimated to have been affected by radiation from fall-out based on the recent "Square Leg" exercise and providing the home defence plans had been properly implemented.

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3. The statement was based upon the contents of the booklet "Nuclear Weapons" which can be obtained from Her Majesty's Stationery Office, price 80p. Part 8 of this booklet relates to the effects of residual gamma radiation from fall-out, pages 36 to 45, and Part 9, pages 44 to 56, relates to the protection against gamma radiation from fall-out. There is a number of other British and American publications which deal with the subject of protection against radiation. "Surviving Doomsday" by C. Bruce Sibley is one, and there is also the Home Office booklet "Protect and Survive" with which I know you are familiar.

continued/...



Now in fact Operation Square Leg envisaged a fairly modest attack on this country, with only 103 megaton range bombs on England and Wales, 57 of them groundbursts and 46 airbursts. Using data from references such as this (the US Congress Office of Technology Assessment Report on the Effects of Nuclear War), one can estimate, on certain assumptions about the weather, the amount of radiation from fallout over a period of say, 4 days (100 hours) after the attack, at various points downwind of the postulated groundbursts. In Milton Keynes, the figure, for an exposed person out of doors would amount to at least 30 000 rem over 4 days, most of which would come from High Wycombe, but also quite a bit from Greenham Common, Boscombe Down, Weymouth and even Exeter.

The advice we are given in 'Protect and Survive' about fallout is to 'stay indoors', if possible in an inner fallout shelter. According to the OTA Report, the protection factor of a 'typical home basement with earth piled over windows and against the walls' is only 20. So the 4-day dose in Milton Keynes for people in such basements would be 1500 rem, which is 2½ times the dose of 600 rem from which 90% of people would die.

Even if we take the more optimistic figures quoted in the Home Office booklet on Nuclear Weapons of 50-100, we are still left with 300-600 rem which is in the region of the LD50 of 450 rem. Hardly any houses in Milton Keynes have basements anyway, and for most of them the PF would be between 5 and 20. Yet Mr. White is apparently content to leave the people of Buckinghamshire with the impression that they would be protected and would survive such an attack if they stayed in their houses !

My fourth and last question to Mr. White was this:

Question 4. When you yourself stated, in your letter of 7th November, that 'elementary precautions would lead to the saving of many lives', what, in quantitative terms, did you mean by 'many', under precisely what circumstances, what did you mean by 'elementary precautions' and what precisely is implied, under these circumstances by the 'saving of lives' ?

And here is his answer: Q. MARTIN WHITE LETTER 22nd January p.2.

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See page

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- 4.(i) Numbers would obviously vary with circumstances. A whole range of assumptions can be made of circumstances and numbers, but neither can be quantified with the precision which you seek.
- (ii) The elementary precautions include such things as education of the public, improving protective factors of certain accommodation and temporary re-settlement of those in inadequate accommodation such as caravans, bungalows, etc.
- (iii) "Saving of lives" is a straightforward statement and is not implicative.

Yours sincerely,

*Y. White*

The point he is avoiding here is, of course, the weakest link in the whole concept of "surviving" a nuclear war. Sir Leslie Mavor himself was more candid about it than Mr. White. At the meeting in Sussex he was quoted as having said: Q. SUSSEX EXPRESS: 'The best expert advice

"The best expert advice is that if we took no precautions at all, 15 million people in Britain would survive such an attack.  
 "If we took even modest precautions, that figure would double to 30 million survivors.  
 "Even if the experts were wrong by a factor of 100, so that only 300,000 people survived, the planning and small expense involved would be thoroughly justified," said Sir Leslie.

Ⓐ that's been provided for

Well, Sir Leslie might regard the £45 million extra / these activities as 'a small expense', but I can't help feeling that even quite a small proportion of that sum, used to educate the public about the futility of civil defence and the urgent necessity for <sup>h</sup> this country to take some practical steps towards ending the nuclear arms race would save far more lives.

We must also ask ourselves, I think, what is the nature of the 'survival' of these survivors, be they 30 million, 15 million or only 300,000.?



The Home Office estimate of the probable weight of a nuclear attack is said to be about 200 Mt (equivalent to 13,000 Hiroshimas). But that is prior to the deployment of Cruise Missiles, which are supposed to be 'widely dispersed' in the event of a crisis. These weapons are so lethal against targets like ICBM silos that they would invite early elimination by a blanket nuclear barrage. A pattern attack with between 200 and 300 additional megaton warheads would suffice to cover the entire area of about 9 National Grid 100 km squares that lie within about a 100 mile radius of Greenham Common and Molesworth. (Derby would lie well within such an extended target area). With Cruise Missiles in this country, therefore, we could expect an attack equivalent to about 30,000 Hiroshimas.

Has any serious attempt been made to assess the effects of such an attack, beyond estimating the number of immediate fatal casualties? With industry, agriculture, power and water supplies, communications, transport, health and medical services destroyed or seriously disrupted over most of the country, with the complex web of interconnected dependence of everything on everything else which characterises an industrialised society like ours, with many of the survivors physically and mentally traumatised, what will be the realities of survival?

The OTA Report says of such questions

*'The effects of a nuclear war that cannot be calculated are at least as important as those for which calculations are attempted.'*

*'The situation in which the survivors of a nuclear attack find themselves will be quite unprecedented.'*

I think we have to ask questions about the integrity and social responsibility of those who appear to be engaged in brainwashing the public about the value of 'civil defence', and this must include Sir Leslie Mavor himself. I know that Sir Leslie does not approve of such questions being asked. On 5 March he wrote a letter to Lord Perry, whom he evidently believed to still hold office as Vice-



Chancellor of the Open University, that is to be my boss, drawing attention to the criticisms I have made of his activities, and ending with the interesting point that he is "sure that everyone having a regard for the reputation and standards of the Open University" would support his decision to bring this to the attention of Lord Perry "for such action as you think fit".

Leaving aside altogether the crude attempt at intimidation that is implicit in a letter of this sort, I want to take up a matter of principle that it raises. Sir Leslie appears to take exception to my criticism of his activities (which he interprets as an attack on his integrity and professionalism) because it is based, he says, 'on the notoriously unsafe ground of reports in provincial newspapers'.

The suggestion seems to be that if the Sussex Express or the Milton Keynes Gazette got it all wrong and misinterpreted Sir Leslie and his 'experts', that's not their fault and it's none of their business. And he has the brass to talk about professionalism and integrity !

If I gave a briefing to a County Council that was misreported in the Press to a degree likely to seriously mislead the public, I should consider it my duty to insist that a correction be prominently published. But perhaps I have a different conception of integrity, not to mention social responsibility.

I'm afraid it's hard to avoid the conclusion that we are witnessing a brainwashing exercise of the most cynical and irresponsible kind, intended to persuade the public that significant numbers of people can survive a nuclear war. I suspect, furthermore, that this exercise is being conducted just now with such vigour because >

it is seen to be a necessary part of what is now openly admitted to be the new nuclear strategy which has replaced the old-fashioned, simple-minded idea of nuclear deterrence, the new strategy known variously as 'flexible response', 'controlled escalation', 'limited nuclear war' or 'theatre nuclear war', a strategy in which nuclear weapons are no longer there NOT to be used, are no longer there to deter nuclear war, but in which nuclear weapons are there to be used, to fight and win a nuclear war. And if winning



a nuclear war is to be an acceptable concept, we must be persuaded that we can survive it - or at least that some of us can.

This is frequently confirmed in official government pronouncements. Mr. Pym, for instance, (before he moved on to Higher Things) often used the phrase "we must be prepared to use our nuclear deterrent". Mr. Leon Brittan says, in the statement I have already mentioned, "how credible can (our nuclear deterrent) be, if we fail to take basic measures for protecting our civilian population, and are seen to be failing to take those basic measures", and he too goes on to talk about "using our nuclear deterrent".

It is highly significant that ~~this~~ fraudulent attempt to 'appear to be protecting our civilian population' coincides with moves to escalate the strategic nuclear arms race through the deployment of <sup>the</sup> MX missile, Trident nuclear submarines and, especially, through the deployment of cruise missiles, which, in military strategic terms, are of highly dubious value, except perhaps as part of these 'new' concepts and theories of 'theatre nuclear war'.

I think Anthony Tucker was absolutely right when he said in the Guardian article I quoted earlier:

ANTHONY TUCKER (Science Correspondent, Guardian)  
'COMPREHENDING THE BOMB' Guardian 25/4/1980

The most serious danger..is that the desensitised populations of the major powers, fed statistics implying that there will be plenty of survivors and persuaded that 'nukes' are merely an extension of conventional weaponry, will allow Governments to consider nuclear war as a rational possibility.



I have devoted practically all my time to just a few of the reasons why the answer to the question 'Can Civil Defence Protect Us ?' must be an emphatic no. May I conclude by inviting all here to consider the implications of this.

It is obvious that the only effective civil defence, the only effective way of protecting ourselves from the disaster of nuclear war is to make sure that it never happens, and the only way of doing that, as the United Nations General Assembly has so plainly stated, is to achieve disarmament, including of course nuclear disarmament, and to do so without delay, else it may be too late. How to achieve this is, I think, the only issue worth discussing - and educating the public about the necessity for disarmament and about the problems of achieving disarmament is, I think, a far better thing to spend public money on than on the futilities of 'Emergency Planning for War'.

What is really important for Civil Defence is the question : how can we in Britain most effectively contribute to the goal set by the 149 member states of the United Nations Special Session on Disarmament, which, in its Final Declaration of July 1978, stated so plainly that either we end the arms race and proceed to world disarmament or we face annihilation.

The only aspect of 'civil defence' on which I think it is worth spending time, or effort, or money, is the question posed by Dr. Howard Hiatt, Dean of the Harvard School of Public Health, whom I mentioned earlier:

If we examine the consequences of nuclear war in medical terms, we must pay heed to the inescapable lesson of contemporary medicine: where treatment of a given disease is ineffective *or* where costs are insupportable, attention must be given to prevention. Both conditions apply to the effects of nuclear war—treatment programs would be virtually useless and the costs would be staggering. Can more compelling arguments be marshalled for a preventive strategy?

Success in preventing any epidemic requires an effective prescription. What steps would lead to a ban on the use of nuclear weapons without compromising national security? Perhaps during this election year we might ask that as one price for our support all candidates for high office offer their answer to this question.—HOWARD H. HIATT

(Bulletin of the Atomic Scientists,  
Sept. 1980, page 16)



This is the same question as that addressed by the late Earl Mountbatten, in his speech in Strasbourg in May 1979, and I shall conclude by quoting a few words from this remarkable statement:

" the nuclear arms race has no military purpose. Wars cannot be fought with nuclear weapons. Their existence only adds to our perils because of the illusions which they have generated. In the event of a nuclear war there will be no chances, there will be no survivors - all will be obliterated. Can we not take steps to make sure that these things never come about ? The world now stands on the brink of the final abyss. Let us all resolve to take all possible practical steps to ensure that we do not, through our own folly, go over the edge".

I believe that Earl Mountbatten had a deeper and a more realistic understanding of the folly of imagining that 'Civil Defence' can protect us than those, no doubt well-meaning and public-spirited, folk who waste their time and efforts on Emergency Planning for War when what they should be doing, if they really care about survival, is to join with CND and others in Emergency Action for Peace.



Excerpts from      **The Proceedings of the**  
**1st Congress of The International**  
**Physicians for the Prevention of**  
**Nuclear War,**

Airlie, Virginia, U.S.A., 20-25 March 1981

This congress was attended by 100 doctors from Denmark, France, West Germany, Israel, Japan, Netherlands, Norway, U.K., U.S.A. and U.S.S.R. \*

**PREAMBLE:**

Nuclear war would be the ultimate human and environmental disaster. The immediate and long term destruction of human life and health would be on an unprecedented scale, threatening the very survival of civilisation. The threat of its occurrence is at a dangerous level and is steadily increasing. Invaluable and limited resources are being diverted unproductively to the nuclear arms race, leaving essential human, social, medical and economic needs unmet.

**PREDICTABLE AND UNPREDICTABLE EFFECTS OF NUCLEAR WAR:**

We must distinguish between the immediate and the delayed effects of nuclear war. Among the immediate effects are mass deaths in the first hours, days and weeks after an explosion, caused by the simultaneous effects of blast, heat and large doses of penetrating radiation.

Numbers of such deaths would be magnified catastrophically by the destruction of buildings, by secondary fires, by disruption of all life support systems, including electric power, communication and transportation, and by the destruction and contamination of the water supply and of foodstocks.

Contemporary nuclear war would inevitably destroy hospitals and other medical facilities, kill and disable most medical personnel, and prevent surviving physicians from coming to the aid of the injured because of widespread radiation dangers.

Hundreds of thousands of burned and otherwise wounded people would not have any medical care as we now conceive of it; no morphine for pain, no emergency surgery, no antibiotics, no dressings, no skilled nursing, and little or no food or water.

The survivors would envy the dead.

In the aftermath of an explosion, and for many months thereafter, survivors suffer not only from physical injuries, but also from profound psychological shock,

The problem is social as well as individual. The risk is emotional as well as physical. Children are known to be particularly susceptible.

Exposure of oetuses would result in the birth of children with small head size, mental retardation, and impaired growth and development.

Delayed radioactive fallout would render large areas of land uninhabitable for prolonged periods of time, making it impossible to produce the food upon which the survival of whole populations would depend.

The use of nuclear weapons poses dangers to the entire planet, involving disruptions of the ecological balance, disturbances to all living organisms, crops, the atmosphere, with consequences we can only guess at.

The release into the atmosphere of large quantities of oxides of nitrogen, formed during multiple nuclear explosions, could disturb the ozone layer of the atmosphere, which protects the surface of the earth from ultraviolet radiation, causing death of vegetation and animals and injury to people.

Nuclear war has no precedent in the experience of mankind.

In an all out nuclear war between the USA and USSR, it is likely that:—

- ★ 200+ million men, women and children will be killed
- ★ 60+ millions will be injured
- ★ 80% of physicians will die
- ★ 80% of hospital beds will be destroyed
- ★ Stores of blood plasma, antibiotics, drugs will be destroyed or severely compromised
- ★ Food and water will be extensively contaminated
- ★ The effect on adjacent countries is incalculable.
- ★ Civil defence will be unable to alter the death and devastation to any appreciable extent
- ★ Food production will be profoundly altered
- ★ Profound changes in the weather will cause alterations in man, animal and plant species
- ★ Among long-term survivors, a striking increase in leukemia and other malignancies will be observed, most severe in those who are children at the time of exposure.

\* The World Disarmament Campaign acknowledges with gratitude permission to print this Fact Sheet by Medical Campaign Against Nuclear Weapons, 120 Edith Road, London W14.



## THE ROLE OF PHYSICIANS IN THE POST-ATTACK PERIOD

A 1-megaton thermonuclear explosion would result in 200-500,000 immediate deaths, with 400-600,000 injured. Instantaneous death will occur as a result of temperatures greater than the sun itself, and from blast effects.

Physical structures will become unrecognisable rubble.

The injured will have skin peeling in shreds from burns.

Grave psychological trauma affecting both physician and patient will further aggravate problems of diagnosis and treatment.

From London's experience in World War II, 34,000 serious burn cases would require 170,000 health professionals and 8,000 tons of supplies.

With more than 50,000 nuclear weapons in existence, we must expect hundreds, perhaps thousands of bombs, many times the explosive power of those that destroyed Nagasaki and Hiroshima.

The earth will be seared, the skies heavy with lethal concentrations of radioactive particles, and *no response to medical needs can be expected from medicine.*

## SOCIAL, ECONOMIC AND PSYCHOLOGICAL COSTS:

The greatest risk of the arms race is that it increases the likelihood of nuclear war. Activities develop which generate further pressure for more arms and thus establish a dangerous cycle.

Values become subverted and reoriented to reflect impoverishing priorities and values inherent in the building of arms.

The arms build up weakens the application of existing knowledge, technology and resources to the prevention and treatment of health problems.

Less developed countries which can least afford to use their scarce resources for arms will suffer grave health and social consequences.

Strains increase the likelihood of a nuclear war.

Consequences of the use of nuclear weapons defy human comprehension because of the enormity of their destructiveness.

Living in this threatening context undermines confidence in the possibility of a meaningful personal future.

Terror and guilt increase the likelihood of nuclear war by impairing realistic perspectives of those who possess nuclear arms, preventing the development and use of measures that could control the arms race, such as:—

**Avoidance:** The problem is too big to handle — leave it to others, the leaders, the experts.

**Old Ways of Thinking:** We seek security as humanity has traditionally done, from spurious notions of strength dominated by false concepts of winning and losing. Such thought patterns have become outmoded by the realities of nuclear weapons.

**Fear and Impulsivity:** The climate of terror engenders a vicious cycle of fear and mistrust. Fear destroys the capacity for rational thinking and promotes panic-driven impulsive actions, provoking panic responses among adversaries that escalate the danger of conflict.

**Perceptual distortion:** Threat forces regression into archaic thinking patterns, dividing the world into total goodness and total evil, impeding the discovery of common purpose, reducing the ability to deal realistically with threat or danger.

**Dehumanisation:** To justify our hostility, we deny our adversaries any worthy motives. The whole obscene jargon of the nuclear arms race destroys not only appreciation of the humanity of an adversary but our own humanity as well.

Wars are not inevitable. History has demonstrated the human capacity to change its institutions and practices which are no longer useful — cannibalism, slavery, human sacrifice.

Rationality and foresight are unique human characteristics which have enabled individuals and groups to override primitive responses.

Wars begin in the mind, but the mind is also capable of preventing war.

**WHAT PHYSICIANS CAN DO:** Inform, cooperate, educate, encourage studies of psychological obstacles created by nuclear weapons which prevent realistic appraisal of their dangers.

Develop international law outlawing the use of nuclear weapons.

The physicians ended their report with appeals to all governments, to the United Nations, and to Presidents Brezhnev and Reagan to give heed to these dangers.



*Survive* from your local bookshop or from any government bookshop in your area

I said that I regard the government's booklet as an obscene publication. It is obscene because it fraudulently and cynically sets out to persuade the innocent and ignorant that it is possible to 'survive' a full-scale nuclear attack on this country; it is, as Bolsover says, 'a careful political move at a time when efforts are being made to work up a revival of the cold war, . . . a mass confidence trick, a public fraud of the most heartless kind because it deals in human lives.'

Before the decision to allow US ground-launched cruise missiles (GLCMs) to be deployed in this country, 'Home Office planners envisaged that a nuclear attack on Britain would be in the order of 200 megatonnes, the equivalent of about 13,000 bombs of the type dropped on Hiroshima.'

The proposed deployment of GLCMs is likely to increase that number substantially. If this is followed, or accompanied by the arming of the US bomber squadrons based in Britain with air-launched cruise missiles such as the Boeing AGM-86A, or of any of the US nuclear submarines based in Scotland with submarine-launched cruise missiles, such as the General Dynamics Tomahawk YBGM-109, then the number of nuclear warheads targeted upon Britain is likely to increase still further. A conservative estimate of the weight of the nuclear attack on targets in Britain in the event of a conflict involving Nato and the Warsaw Treaty powers would be something above 400 megatonnes, or about 30,000 Hiroshimas. In case you might think this would be an excessive number to use against such a small target area as Britain, let me remind you that in 1979 the strategic nuclear forces of the Soviet Union, not counting long-range bombers, had more than 6,700 nuclear warheads with a total explosive power of about 6,500 megatonnes. If 400 megatonnes are aimed at Britain that would amount to only 6 per cent of the total. But, as the *Daily Telegraph* in an editorial (February 4, 1980) quoted by Bolsover rightly said:

The presence of cruise missiles on British soil, together with the fact that the United Kingdom will provide the main air and sea rear bases for Nato reinforcements of men and equipment coming from North America to the European front, indicates we shall be target number one.

The government itself assumes that if the suggested civil defence precautions are adopted, the number of 'survivors' immediately following a nuclear attack could be increased to as many as 30 million of Britain's 55 million people. In other words, immediate

## ONLY 25 MILLION DEAD!

Michael Pentz  
Chairman

J. D. Bernal Peace Library  
I WAS invited by the editorial board of *Labour Monthly* to write an article 'taking the HMSO pamphlet, *Protect and Survive*, to pieces.' I could do that simply by writing a review of a pamphlet just published by CND. It is entitled *Civil Defence—the Cruellest Confidence Trick\**. The author is a journalist and a member of the National Council of CND. But I am not going to do this. Philip Bolsover has done a job of total demolition. It would be pointless to paraphrase it, and a short review article would not do it justice.

Instead, I should like to urge every reader of *Labour Monthly*—and every trade unionist, every member of the Labour Party or the Communist Party or of any other organisation of the labour movement—to get a copy of Bolsover's pamphlet and read it carefully. I would advise you also to buy a copy of *Protect and Survive* itself.† (This is the first time I have publicly advised anyone to buy an obscene publication. According to the Foreword, you can get it free if you are prepared to wait until there is an immediate threat of nuclear war. I would advise against leaving it as late as that to do something to protect yourself and your family and give them some chance of survival.)

You can get Philip Bolsover's pamphlet from CND, 29 Great James Street, London, WC1N 3EY (01-242 0362). I would suggest that you order at least ten copies and go out of your way to sell nine to your friends and workmates. You can probably get *Protect and*

\* *Civil Defence—The Cruellest Confidence Trick*, Philip Bolsover, Campaign for Nuclear Disarmament, 24 pp., 40p.

† *Protect and Survive*, Central Office of Information, HMSO, 30 pp., 50p.



fatal casualties might be reducible to *only 25 million*. Leaving aside the fact that this figure is a pure guess, intended to 'reassure' the population; leaving aside the fact that nowhere in *Protect and Survive* is there any statement about the number, size, type (air-burst or ground-burst) and geographical distribution of nuclear explosions we are supposed to survive (by crawling under our dining-room tables!); leaving aside the fact that no attempt is made (in *this* publication, aimed at the general public) to estimate how many more millions of these 'survivors' would die later from radiation sickness, burns, disease and starvation; leaving all this aside, to suggest that we should be reassured, and accept with relief the prospect of 'surviving' a nuclear war with *only 25 million* fatal casualties is an obscenity of such monstrous proportions as to be almost past comprehension.

The authors of this booklet should be prosecuted under the Obscene Publication laws. They have probably protected themselves from prosecution under the Trade Descriptions Act by prudently inserting three words into the cover page subtitle. It says:

This book tells you how to make your home and your family *as safe as possible* under nuclear attack [emphasis added].

Take away those three key words and it would be wide open to charges of false pretences. Little matter that in reality 'as safe as possible' differs in no significant manner from 'not safe at all'. It is a most skilfully contrived crime, most professionally executed: 'No part of the United Kingdom can be considered safe from both the direct effects of the weapons and the resultant fall out' (note this cunning use of the little word 'both'!). But, continues the Foreword, 'the dangers which you and your family will face in this situation can be reduced if you do as the booklet describes.' By how much? For how long? On what assumptions? Not a word. Of course!

Enough of this: it must be obvious to the reader that the publication of this booklet is nothing other than a cynical move in the war game of Carter and his female political poodle. As Mr Leon Brittan, Minister of State, Home Office, said in the House of Commons: 'Civil preparedness should be adequate if the credibility of the military deterrent strategy was to be maintained.' In other words this brainwashing exercise has more to do with preparing for war than with saving life.

I would only add, as a passing comment on Mr Brittan, that 'the military deterrent strategy' he refers to has been in the rubbish bin

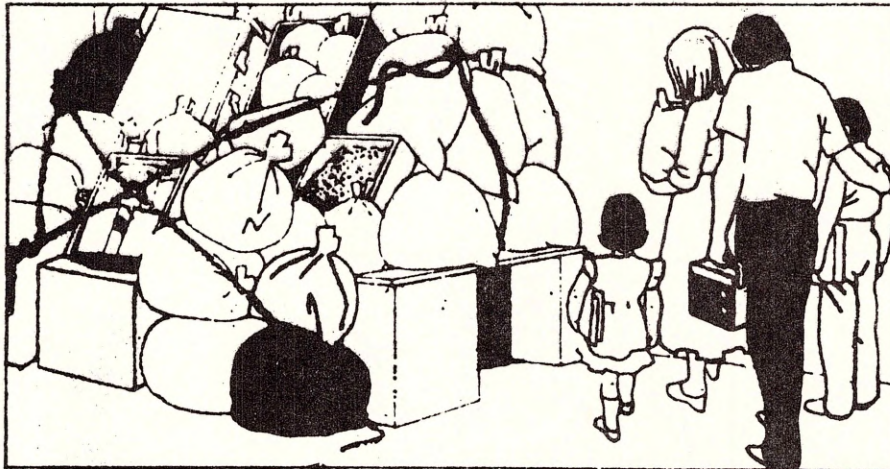
of serious military thinking (as distinct from the codswallop passed on to the public by ignorant politicians) for the best part of a decade. Since the early 1970s the goal has no longer been deterrence but 'counterforce capability', that is the possibility of launching an overwhelming 'first strike' and thereby 'winning' a nuclear war. For the evidence behind this assertion may I refer you to my own pamphlet, *Towards the Final Abyss? The State of the Nuclear Arms Race*.\*

Combined as it is with the increasing cold war propaganda and with the most serious escalation of the nuclear arms race ever (again see my pamphlet for the relevant facts), this 'civil defence' nonsense is extremely dangerous. So what can be done about it? We can do three things:

1. Through every possible political channel—and especially through the trade unions and the Labour Party—step up the pressure for world disarmament and, as a vital contribution to that essential goal, for partial and 'unilateral' measures by Britain, including, at the very least:
  - refusal to permit the deployment of US cruise missiles in this country;
  - no further development of British nuclear weaponry, such as the Trident nuclear submarine system;
  - support, as a step towards world nuclear disarmament, for the proposal for a nuclear-free zone in Europe, including Britain, and for negotiations on this and on balanced reduction of all armed forces in Europe;
  - negotiations between the Nato and Warsaw Pact countries aimed at phasing out of existence both these military alliances.
2. Through the national conferences of all labour movement organisations, through parliamentary questions, through the national and local press, through every local county or borough council insistently expose the fraudulent nature of *Protect and Survive*. Every local council should be asked, for instance, to publish the measures it proposes in the event of a nuclear attack, including a clear statement of the assumed nature of that attack.
3. Last, but by no means least, make sure that we are, each and every one of us, *properly informed*, both about the present state of the nuclear arms race and about the fallacies of government 'civil defence' propaganda. I have already indicated how you can set about doing this.

\* Published by the J. D. Bernal Peace Library at 25p, and available directly from M. J. Pentz, 21 Marshworth, Tinkers Bridge, Milton Keynes, MK6 3DA.





● Families following government civil defence advice, and building shelters like the one above would be "fried to a crisp" according to a London civil defence chief. As local council elections near, the civil defence con-trick is becoming a major issue (picture: *Protect and Survive*, HMSO).

THE DISTRICT COUNCIL elections in May present every CND group with an opportunity to focus public attention on government preparations for nuclear war – particularly the Civil Defence con-trick. In the last issue of *Sanity* we published a series of questions about Cruise missiles that might form the basis of a questionnaire to local politicians.

In some parts of the country CND groups have already managed to secure the support of local councils for a campaign against nuclear weapons.

\*In Lewisham, South London, the council referred back Home Office circulars on civil defence and decided to have a week of public showing of *The War Game* instead.

\*In Knowsley, Liverpool the council affiliated to CND.

\*In Strathclyde, Scotland, the council has a long standing policy of co-operation with CND – particularly important as the Faslane and Holy Loch nuclear submarine bases are sited in the council's territory.

Many more councils are showing signs that they want to get involved in the campaign, others are bending to pressure from local CND groups.

The following resolution was passed by the London Borough of Haringey at a meeting in December.

"This council believes that it is important for the people of Haringey to know that it will be impossible to provide adequate protection for them in the event of a nuclear attack, and declares that it will not be party to civil defence exercise designed to mislead the public into believing that adequate protection is available and therefore that 'limited' nuclear war and increased military spending are acceptable."

The council debate followed a vigorous campaign by a local CND group including demonstrations at the sites of bunkers and letters requesting more information about shelter provision for people living at the top of council high-rise flats. (In *Protect and Survive* persons living in high-rise blocks are told to ask their landlords where to shelter.) This line of questioning led to the frank admission by the council emergency planning officer that most of the people in Haringey would be "fried to a crisp", shelters or no shelters.

Hackney Borough Council, also in London, agreed a seven-point plan with Hackney CND which could act as a model for similar agreements with councils all over the country. At a council meeting just before Christmas the council agreed to:

\*Give free showing of *The War Game* throughout the borough.

\*Allow CND to stage exhibitions in libraries.

\*Publish a special issue of the council newspaper devoted to peace and disarmament.

\*Provide a venue – free of charge – for a spring CND festival in Hackney.

\*Grant a free market stall licence to the local group for its Saturday morning literature sales.

\*Put up CND posters on council notice boards.

\*Bring pressure on the education authorities to allow Hackney CND access to schools to make contact with teachers and older students as well as staging lectures, film showings and discussions on the nuclear issue.

In October 1980 South Yorkshire County Council passed a motion declaring the area a "nuclear free zone" – recognising that the emergency services at its disposal were worse than useless and resolving not to co-operate with civil defence exercises. If we are to have a "European Nuclear Free Zone" what better way than to build it from councils upwards.

Sheffield City Council went further on 31st October, calling on the Government to "close all nuclear bases on British soil and in British waters and to refuse to participate in the defence strategy based on nuclear weapons."

Sheffield's local paper *The Star* joined in the campaign with a series of articles exposing the location of local government bunkers in Sheffield, Rotherham, Barnsley and Doncaster.

Most of the councils supporting CND so far are controlled by the Labour Party. But on Huntingdon District Council the Conservatives are taking an interest.

Huntingdon District Council has the Molesworth proposed Cruise missile base within its territory.

Independent councillor David Spreckley put a "non co-operation" motion in August 1980 calling for the council to hold a seminar on the subject of civil defence. As he said:

"Then the surprise came with my motion. Up popped a young Tory committee chairman to second it and it went through with hardly any opposition."

In January more surprises were in store as Tory councillors put their own motion telling the Government that present civil defence provision was "absurd" and calling for vast sums to provide shelter provision. What, we might ask, are the councillors going to do when the Government tells them, as is likely, that no further funds are available?



# When 'controlling' the sick will mean shooting them



Imperial College  
Health Centre  
held a conference  
on civil defence  
for the Health  
Service, called  
'Apres La Bombe.'  
Its assumptions  
blamed  
John Gleisner

AM NOT averse to planning, but planning not based on reality is both useless and dangerous. The overriding error of the aftermath of nuclear war not surprisingly evokes fear, anxiety, and revulsion in any sane person trying to imagine in detail and realistic way the possible range and nature of circumstances and events.

But at this conference, participants typified by feminine attendants in tight T-shirts wearing the slogan "Don't panic," it was as if we were being seduced away from realistic analysis into something called "planning" based on a reality or irrelevant events. With examples of disaster totally out of scale and unrelated in impact to a

nuclear strike — such as the medical emergencies of the Everest Expedition or the King's Head bomb explosion — it had something of the comfortable reassurance of a long episode of "Dad's Army."

Maybe in our multi-megaton age the devastation of Hiroshima and Nagasaki is out of date. But it is the only real and useful information we possess. Paradoxically, and sadly for those wishing to deal in realities, the extensive documentation of these tragedies was scarcely mentioned, let alone used as the basis from which to build realistic scenarios.

The BBC's production, *The War Game*, one of the few imaginative and realistic attempts to depict the aftermath of a nuclear strike (and still banned) was described as "a nonsense which we should get out of our minds." The nonsense we must get from our minds is that created by self-delusion. True, grappling with the realities of devastation likely to be produced by nuclear war is phenomenally difficult. The known variables are highly complex and many effects are either unknown or unpredictable.

Consider some of the known variables: the number and location of survivors; their degree of injury or radiation sickness; the amount and location of food and medical supplies; the attitudes of those in posses-

sion; the type and degree of control exercised by the police, the army, or by the emergency survivor control squads; the extent of structural damage, of communication disruption, of supplies of energy, water, or other basic resources.

There are many more and each can be analysed separately. But the effect of a major change in any variable disrupts the whole equation and can produce havoc. Even more disturbing, the addition of an unconsidered and unlikely variable renders the whole structure of analysis invalid.

Suppose, for example, the attacker followed a nuclear strike with biological weapons. There would be a kind of logic in doing this. Since we do not know the minds behind the buttons, it is difficult to determine the boundaries of their sensibility. But since they are prepared, on account of expedience, fear, ambition, or political incompetence, to destroy entire cities, millions of people, and the basis of civilization, it is not irrational to accept the possibility that a nuclear strike would be followed by a biological strike.

The military logic would be that this would end the conflict quickly. (After all the US and her allies justified the first use of nuclear weapons on those grounds.) By a perversity of nature, nuclear weapons create "ideal" conditions for the

use of biological weapons. Radiation reduces both the effectiveness of the immune response and the rate of tissue healing. Insects and microbes are far more resistant to irradiation than man, and animals which can serve as carriers of disease, such as rats, will have a high survival rate because they are resistant and also have the protection of living underground. Rats, plus fleas plus plague minus medical services is a horrifying, unconsidered, yet real variable. But it is only one of several which so complicate the complex set of possible outcomes that planning in any conventional sense tends to be meaningless.

One hint of reality at this conference, which medical people will find worrying, was the underlying theme which stressed the need for pretraining in order to get "hardened". The argument runs something like this: Let us suppose there are 30 million survivors in Britain. Of those accessible to residual medical services some will be dying, some seriously ill, some will appear to have minor injuries and others will appear well. Because of the very serious shortage of medical personnel and facilities it will make public health sense to ignore the dying and the injured and focus all available aid and protection on the well. What will happen to the sick and injured survivors?

Many will be left to their

own devices and fate. We in the medical profession ought now to be asking ourselves whether — as we are opting out of the providing care for the sick and dying — we should not encourage people to have by them a cyanide pill. We must also ask ourselves whether we can professionally adopt the "hardened" role being assigned to us. Survivors left to their own devices may panic. Home Office speakers made it clear that these people will be controlled and that training programmes in "local control" are to be stepped up. They did not enlarge on "control" but, like looters, it seems that they may be shot.

Doctors face a terrible dilemma. Do we accept the "hardening" process and, if so, to what extent can it be achieved? Soldiers trained to kill but who find that they are unable to do so tend to suffer nervous breakdown. The reverse is true. Doctors and nurses faced with letting their patients, family or friends die in pain, distress and fear, and also knowing that these patients, friends or family are to be shot as a matter of public health, will themselves face a serious risk of breakdown.

Perhaps doctors can be "hardened" as others can be hardened. Some doctors survived working in the concentration camps. Psychopathy lurks in all of us. If, in the end, in this terrible context of nuclear aftermath "sur-

vival of the fittest" becomes "survival of the most psychopathic" even in the caring professions, then it seems unlikely that those professions will ever be trusted again.

It was one of the saccharin sicknesses of this conference that it kept giving participants doses of "reassurance, telling us that "things aren't as bad as they are made out to be" without producing any evidence for assessment. Yet the opening paragraph in one of the most recent authoritative publications (*The Effects of Nuclear War*, US Office of Technology Assessment 1980) says that "the effects of a nuclear war which cannot be calculated are at least as important as those for which calculations are attempted." This assessment, itself very limited, makes it clear that things are likely to be far worse than we imagine.

Civil Defence in Britain has recently been given new blood. Conferences of this kind are springing up all the time. The most sinister thing about them is that they imply the assumption that nuclear war may now happen. After trying to persuade us that nuclear deterrence was our only chance of survival the authorities are now trying to persuade us this was an expensive miscalculation.

"Sorry, nuclear war will happen, but you'll perhaps survive if we have the right plans." Do you wonder that I am frightened?



## MANUFACTURE AND DEPLOYMENT OF NUCLEAR WEAPONS

### Resolution passed by Manchester City Council

'This Council, in the light of its pre-determined policy concerning the dangers of nuclear weapons, calls upon Her Majesty's Government to refrain from the manufacture or positioning of any nuclear weapons of any kind within the boundaries of our city.

Conscious of the magnitude of the destructive capacity of modern nuclear weapons, we recognise that our proposals would have little meaning on their own. We therefore directly appeal to our neighbouring authorities in the North West of England and to all local authorities throughout Great Britain to make similar statements on behalf of the citizens they represent.

We believe that it is not in the interests of our people to be either the initiators or the magnet of a nuclear holocaust, and firmly believe that such unequivocal statements would clearly indicate the overwhelming desires of the people we represent and could lay the ground-work for the creation and development of a nuclear-free zone in Europe'

### AUTHORITIES SUPPORTING THE RESOLUTION OF THE CITY OF MANCHESTER

Afan	Haringey London BC
Barrow in Furness BC	Leicester City
Blackburn BC	Liverpool City
London Borough of Brent	Blaenau Gwent
Blyth Vally BC	Malvern Hills DC
Brecknock BC	Merham London BC
Brent BC	N.W. Leicestershire DC
Bristol City	Oxford City
Burnley BC	Sandwell MBC
Bury BC	Sedgefield DC
Carlisle City	Wrexham Maelor
Chester-le-Street DC	South Tyneside
Corby DC	St. Helens MBC
Darlington BC	Stoke on Trent City
Derby City,	Torfaen BC
Derwentside DC	Tyne and Wear County
Dinefwr BC	Watford BC
Durham County	Wear Valley DC
Forest of Dean DC	Wrekin DC
Gateshead MBC	Preston BC.
Newcastle under Lyme	

The above authorities have expressed support for the Resolution of the City of Manchester.



AUTHORITIES THAT HAVE ALREADY TAKEN ACTION AND/OR  
MADE COMMENTS SUPPORTIVE OF THE CITY OF MANCHESTER

Cambridge City  
Cyngor Dosbarth DC  
Harlow BC  
Hereford City  
Hyndburn BC  
Kingston-upon-Hull City  
Kirklees MBC  
Knowsley BC  
London Borough of Hackney  
Newport BC  
N.W. Derbyshire DC

Rochdale MBC  
Sheffield City  
South Bucks DC  
Tyne and Wear County  
Walsall MBC  
Dyfed  
Gwynedd  
Newport  
London Borough of Tower Hamlets  
London Borough of Islington



CND Group Mailing on Civil Defence and Nuclear-free Zones

Information to help with arguing the case

The Civil Defence programme of this country since the last war has been directed away from measures to protect the civilian population to provision of protected quarters for a tiny military and governmental elite. Civilian protection is now almost entirely restricted to the provision of questionable advice on the preparation of pitiful and makeshift measures for personal survival. The belief that these can protect us against the most fearful weapons ever devised is tragically false.

It is admitted on all hands that the possession of nuclear armaments by Britain makes this country a target for nuclear attack on an enormous scale. The Home Office has estimated that such an attack would typically consist of some 200 warheads with an average yield of about 1 megaton. This is equivalent to the yield of about 13,000 bombs of the type used against Hiroshima in 1945. It may well be that Home Office estimates err on the side of caution. In the event that Cruise Missiles are deployed in this country (and 'dispersed up to 100 miles from their bases in an emergency'), the nuclear attack could be four or five times heavier.

Even the relatively modest attack envisaged by the Home Office (200 megatons) would be sufficient to destroy by blast and fire all the major cities and many of the large towns in the U.K.. There would be heavy additional casualties from the effects of radioactive fallout. The effects of starvation, lack of shelter in Winter, disease and civil strife are likely to be as serious as the immediate effects of the attack. There may well be other catastrophic effects that cannot be predicted. Who knows what could happen when an explosive energy 40 times that used in the whole of the Second World War is released all at once on a small island - and perhaps a hundred times as much again elsewhere?

Yet in the face of all this, it is repeatedly and publicly claimed that with very modest civil defence precautions some 50 percent of our population could survive a nuclear attack. We know of no foundation whatsoever for this assumption. This commonly quoted figure is in any case extremely misleading, as it does not take into account the deaths that would be caused by indirect and delayed effects of the attack.

The fact is that to provide adequate protection for the population in the event of a nuclear war, i.e. properly equipped, purpose-built shelters for everybody and sufficient emergency services to cope with the aftermath of a nuclear attack would cost thousands of millions of pounds - such a scale of expenditure is completely out of reach of local or central government. The only effective civil defence is for Britain to cease to be a nuclear target

Edited by M.J.P







## THE MYTH OF CIVIL DEFENCE

Civil defence against nuclear attack means dealing with three problems: protection against the immediate effects; protection against fallout; providing and restoring essential services after the attack.

Protection against immediate effects

Protection against heat and blast (see Exeter CNP fact sheet no. 3) means either providing shelters or moving the population out of likely target areas, i.e. evacuation. Current planning in this country is to do neither of these things. There will be no publicly provided shelters; and not only does the Government have no plan for evacuation, it intends to seal off main roads and railways. if war looks imminent, to stop people evacuating themselves.

What could be done?

Shelters could give quite a lot of protection if properly constructed. But they would have to have food, water and sanitation, since people within range of the immediate effects of a nuclear explosion would have to stay in shelters at least for several days. There would have to be a lot of public shelters, since the warning-time, if any, would be short, and it is not possible to get large numbers of people through a door quickly. The only way large numbers of shelters could be provided would be to insist on including shelters in all new housing: this would have little effect in the next few years, and would add substantially to the cost of building houses, especially for flats. Purpose-built private shelters are a possibility only for the rich if they are to protect against blast; the makeshift shelters described in the Government's booklet Domestic Nuclear Shelters offer no protection worth speaking of against blast, as they will, on the Government's own figures, collapse at distances from an explosion where ordinary houses would be comparatively undamaged.

Evacuation could only be partial, even if there were enough warning-time, as many people would have to stay in their jobs if the evacuation were to be workable. Because of the dangers from fallout evacuees would need shelters with food water and sanitation. These could themselves become targets, whether they were set up in open countryside or in towns and cities not expected to be targets. Evacuation would also be impossible to conceal, and might itself be taken as a sign that this country intended to begin a war.

Rescue measures for those within a fire and blast zone could only be very limited. After a groundburst, fallout would stop anything being done except self-help. After an airburst rescue might be possible for a few hours; but no planning could cope with the likely problems: at Hiroshima nearly 80% of the city's fire-brigade was put out of action. Fire and ambulance stations and hospitals are as likely to be destroyed, damaged or contaminated as anywhere else; a recent study by Cambridge County Council estimated that medical supplies would be exhausted within a few hours of a nuclear attack.

CONCLUSION: Even if there is some warning that a war is near, and some warning of the actual attack, little can be done for those within the zone of fire and blast.

Protection against fallout

This can be given to some extent by sheltering. Radiation can be shielded against, and even an intact ordinary house will give some protection against radiation compared with the effects which would be experienced outside it. With some precautions a house can provide enough protection to reduce the level of radiation inside to about one-tenth of that outside; a makeshift



shelter can reduce the level to a fortieth; and even higher levels of protection can be given by purpose-built shelters. Current planning in this country is not to provide public fallout shelters, but to encourage individual households to be prepared to build makeshift shelters. Provided there is a period of build-up to war (current civil defence planning allows for 36 hours warning), programmes will be broadcast giving advice on protective measures against radiation. A national warning system exists to give warning of fallout, which may work in areas not heavily damaged, and there is a programme to train volunteers in the use of radiation meters.

#### What could be done?

Not a great deal more. It would not be practicable to provide public fallout shelters on the scale required, especially as they would need to be stocked with fuel, water, food and sanitary facilities. Nor would it be easy for most households to build even the makeshift shelters described in Domestic Nuclear Shelters. If half the households in Exeter built such makeshift wood/earth shelters in their back gardens this would require 122 miles of 2" x 4" timber, 2 million nails, and about 900 thousand square yards of heavy-duty polythene. The cost, including stocks of food, water and other essential supplies, would be of the order of £2-300 for a family of four, assuming that prices stayed stable. If there really were only 36 hours' warning, it would often be impossible to erect such shelters in time, even if the household had bought in all its supplies in advance; and the position would be little better if the period of warning were longer. Not only do most shops and warehouses not carry more than a week or two of stocks for normal requirements, which would be quite insufficient to meet the demand, there would certainly be panic buying. In any case, the Government intends to seal off roads and railways for all except 'essential' traffic; supplies of the things needed to build and stock even makeshift shelters would run out quickly in the period before war began and could not be made good.

Even those who were able by sheltering to protect themselves against receiving a lethal dose of radiation would not necessarily be able to avoid a sublethal dose - one which might have effects on their health ranging from mild to severe (for the effects of fallout see Exeter CND fact sheet no. 3). Moreover, sooner or later they would have to emerge from their shelters, and, if they had been in an area where shelters were needed, would still be exposed to significant levels of radiation for two or three months at least. The total dose they received, in and out of shelter, during the first three months after a nuclear attack, might not be enough to kill them; but it would certainly reduce their chances of survival.

CONCLUSION: Some protection against fallout can be achieved. But whether or not there were a substantial period of warning before the outbreak of a nuclear war there would be no possibility of providing such protection for a very large part of the population. Even those who did manage to find effective shelters could not escape the effects of radiation completely.

#### The survival of society

The society we live in is a very complex one; it is vulnerable to the breakdown even of small parts of it, as has been shown by natural disasters and strikes affecting essential services in recent years. We all specialize. Few of us grow our own food; most of us live in towns or cities, where supplies of the things we need are brought to us. All of us depend heavily on essentials such as housing, transport, electricity, water, sewerage, gas. We are also protected against disease by very high standards of sanitation and health care. Most of us have no natural immunity against a number of diseases, especially the water-borne ones: cholera, typhoid and dysentery.



All these things, which we now take for granted, would cease to be available following a nuclear attack, and could not be restored for years, if ever. This is not alarmism - it is assumed in government planning for 'civil defence' (see the section 'Effects on property' in Exeter CND fact sheet no. 3). The likely effects can be summarized as follows:

**HEALTH** - there will be little provision for those directly affected by the attack. Current planning is for survivors to be divided into three groups: those too badly injured to recover with the available medical treatment; those who will survive without medical attention; and those who can be helped by available simple treatment. Only the third group will receive any treatment. Those who are too badly injured will be allowed to die, without even pain-killers, as there will not be enough of these to go round. Those who are 'only' suffering from radiation sickness will not receive treatment, as there is no known cure. Troops and police will guard surviving hospitals and medical centres against attacks by those refused treatment.

Even those still alive after the first three months will find survival a risky business. The main killers are likely to be cholera, typhoid and dysentery; influenza; tuberculosis; and poliomyelitis. There are no large stocks of vaccines against these diseases, and it is unlikely that it will be possible to manufacture them in the post-attack world. Not only will the survivors have little natural immunity, their resistance will also be weakened by sublethal doses of radiation and shortage of food, water and fuel.

Government plans do not offer any protection; there are some stockpiles of basic drugs (morphine, aspirin and penicillin), but even these may not be accessible after an attack. Trained medical staff are as likely to be killed in an attack as anyone else.

**FOOD** - this will be scarce at best. There are some stockpiles, but they are held in ordinary warehouses and many of them will have been destroyed or contaminated by the attack. Much would depend on the time of year - growing crops might be fit for consumption, but distributing them would be difficult, and it would be still more difficult to keep back sufficient stocks for growing next year's crops.

**WATER** - in most parts of the country, supplies of water depend on electricity, which is unlikely to be available (see Exeter CND fact sheet no. 3). The Department of the Environment does keep some emergency pumps and purifying plants, but not on a scale to cope with a breakdown of supplies over most of the country. Most survivors will have to drink water contaminated by radioactivity and disease.

**FUEL** - any likely pattern of nuclear attack would destroy refineries and stockpiles of oil products, as these are supplies of military importance. Coal mines might survive intact - but they too depend on electricity to work them, to say nothing of the skilled manpower. It is pretty certain that most households would be cut off from supplies of fuel for transport and heating. This would prevent their going far to get supplies. It would also mean that many survivors would die of exposure - most parts of this country are uninhabitable in the winter months without heating.

The social consequences of these and other effects of nuclear attack are not hard to predict. There would be a breakdown not just of 'law and order' but of all our social values and behaviour. This is borne out by experience of other crises and disasters - earthquakes, floods, past wars. Survival might be possible for a few, but they would not survive in a social sense but as individuals, and the ones who did survive would be those prepared to be completely ruthless about getting their way.



## What does Government civil defence planning really mean?

What has been said so far has suggested that no real planning for the effects of a nuclear attack or reconstructing a workable or worthwhile society after a nuclear attack can be done. Government circulars and civil defence exercises in effect admit this. Within three days of the start of one civil defence exercise in 1978, troops and police were supposed to have been issued with CS gas 'to keep order'. After a week the 'situation' was described like this:

'The overall situation within UK is one of vast destruction, enormous casualties and widespread chaos, as must be expected...complete obliteration and no sign of life in the main target areas...Over most of the country normal services and public utilities are nonexistent...'Stay put' policy breaking down...Evidence of widespread disorder: looting murder rape and other lawlessness...Food suppliers quickly overrun and emptied.' (Source: New Statesman, 19 September 1980)

Journalists visiting civil defence control bunkers during the 'Operation Square Leg' exercise in September 1980 found them in a state of disrepair; this fits with the evidence given above (and in Exeter CND fact sheet no. 3) that no serious attempt is being made - or can be made - to prepare to administer the surviving civilian population. Civil defence measures - County Emergency Officers, booklets like Protect and Survive, Parish War Emergency Plans - might have some value in the event of a 'limited' nuclear war - but if the Government is serious about preparing to fight a 'limited' nuclear war, that is itself frightening (see Exeter CND fact sheet no. 1)! It is more likely that these preparations are meant to reassure the public, worried by increased preparations for nuclear war, that something is being done to protect it.

What these preparations also do is to disguise an area of civil defence which has not been given much publicity - civil defence as defence against civilians. Restricted plans leaked after 'Operation Square Leg' showed that troops were to be used in the following ways: maintenance of law and order; control of selfish and disgruntled minorities; support and protection for special courts and execution of sentences; guards for convoys, key points, bunkers and VIPs; guards on internment areas. The 'scenario' for Square Leg included the use of troops before the outbreak of war to control crowds and round up 'subversives' (meaning, apparently, anyone who might not want to die in a nuclear war and said so). These preparations are intended to protect the government in the period leading up to a nuclear war and during the war itself; to enable it to go to war insulated from any pressures its voters and citizens might want to bring against it. They are meant to give 'credibility' to our 'deterrent' by showing the world that our government can use it without anyone in Britain being able to do anything about it. This is the main purpose of Government plans for civil defence - any protection for the civilian population is purely incidental.