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Trends. Fantasies, Death, and Violence

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Abstract: This Trends article examines violence and death in the context of the goals of international health organizations.

The World Health Organization (WHO) has released figures suggesting that the ratio of suicide to homicide to war-related deaths per year is about 8 to 5 to 1. The figures also suggest that the ratio of suicide/homicide/war-related deaths to malaria is 1.5 to 1, to tuberculosis 1 to 1, and to AIDS 0.6 to 1. At Issue is the purpose and implicit values of such comparisons.

Health organizations strive to prevent death. This striving is seemingly an uncontested goal, uncontested without contesting what life would be like if no one ever died. What sort of world would this be?

Comparisons of violence- to non-violence-related deaths often are based on the supposition that violence-related deaths are somehow more tragic by their very occurrence. This supposition often is based on the supposition that violence just should not be. That one can just say no to violence more easily than to disease, even if there are many intentional behaviors associated with disease as well as violence.

For example, the director general of the WHO has stated, "violence is not an inevitable part of the human condition, nor is it an intractable problem of modern life that cannot be overcome by human determination and ingenuity." This quote additionally connotes that violence does not have to be, even if one could more easily make the case that human determination and ingenuity have been superlatively applied to violence not its prevention throughout history.

It seems that an anti-death and anti-violence Utopian perspective, like all Utopian schemes, would sow the seeds of the unfortunate, the unwanted, and the unexpected. Staying alive is deemed to be more important than living well. Not engaging in violence negates the possibility that something is worth intentionally causing death, one's own or others. One might ask if the quest for eternal safety is truly the same as the quest for eternal life. (See Author. (October 3, 2002). World report on violence and health. World Health Organization. <http://www.who.int/mediacentre/releases/pr73/en>; Bowman, K. W., & Singer, P. A. (2001). Chinese seniors' perspectives on end-of-life decisions. *Social Science & Medicine*, 53, 455-464; Serwint, J. R., Rutherford, L. E., Hutton, N., Rowe, P. C., Barker, S., & Adamo, G. (2002). "I learned that no death is routine": Description of a death and bereavement seminar for pediatrics residents. *Academic Medicine*, 77, 278-284; Sheets-Johnstone, M. (2002). Size, power, death: Constituents in the making of human morality. *Journal of Consciousness Studies*, 9, 49-67; Stolberg, S.G. (October 3, 2002). War, murder and suicide: A year's toll is 1.6 million. *The New York Times*, p. A12.) (Keywords: Disease, Health Statistics, Homicide, Suicide, Utopia, World Health Organization, War.)