Letter from the President

Greetings WPSR Members, Volunteers, and Supporters. Thank you so much for all that you do to make our work possible. I am often asked why WPSR isn’t working on or supporting a particular issue or cause that many of us would find in line with our values. The simple answer is that we are too small to make an effective difference in every worthy issue that poses a serious threat to human health.

In choosing nuclear weapons, the climate crisis, and economic inequity, we focus on areas that pose grave threats to human health and survival that cannot be addressed by pharmaceutical or surgical means, nor by individual lifestyle choices. (continued on page 2)

Translating public mobilization to nuclear weapons policy changes: WPSR’s experience

by Dr. Bruce Amundson, WPSR Vice President

From the outset of WPSR’s revitalized program to address the continuing scourge of nuclear weapons, our strategy has been two-fold: rebuild a statewide anti-nuclear movement and focus these forces on Washington members of Congress to change our Cold War-era nuclear weapons policies. Our approach to building the movement has centered on enlisting organizations, not just individuals, to form a broad-based coalition. This has had the obvious advantage of the multiplier effect when organizations rather than individuals sign-on. It also expands opportunities for commitment and engagement. What has emerged is the Washington Against Nuclear Weapons Coalition (WANW), now with over 45 organizations. (continued on page 4)
They are major societal threats, but they are not the only major threats. We have a dedicated core of volunteers supported by a very small but talented staff. We will take on what we can with the resources we have with the firm resolve to make this world a more peaceful, just and equitable place suitable for continued health and happiness of the human species.

Since its founding, Physicians for Social Responsibility has worked tirelessly on the threat of nuclear weapons. The extinction of the human species could occur in a matter of days or weeks, resulting from the whims of supposed "leaders" with sole authority to launch a nuclear attack. Even a limited nuclear conflict would cause immediate and widespread death, injury and destruction that would overwhelm our emergency response capacity. We, therefore, remain committed to preventing that which we cannot treat or cure. The current haphazard and thoughtless US foreign policy - backing out of nuclear treaties, sowing discord, and promoting conflict - means that the risk of a nuclear attack is rising. Backing out of the Iran agreement, ending the INF treaty, and playing games on the Korean Peninsula threaten us all. At this moment, we cannot back down. Fortunately, WPSR is taking a lead in resisting this lunacy.

Our nuclear weapons program continues to work to rebuild the anti-nuclear movement in Washington, leading the way in establishing a broad-based coalition of organizations. The Washington Against Nuclear Weapons Coalition includes over 45 peace advocacy, faith-based, social justice, labor, health, and educational organizations, and is now the largest state-level anti-nuclear coalition in the country. We will continue to successfully mobilize and focus this movement to educate and pressure our members of Congress to support nuclear weapons policies that reduce both the risks of their use and the size of US arsenals, with the goal of elimination. Our persistent and consistent messaging to our elected officials is beginning to pay off. We are particularly pleased with Congressman Adam Smith, as chair of the House Armed Services Committee, stepping up to sponsor a bill prohibiting the first use of nuclear weapons and calling for a reduction in the number of warheads in our ridiculously redundant nuclear triad. The No First Use Bill has three co-sponsors from our state, Representatives Heck, Larsen, and Jayapal. We will continue to work with the rest of our delegation to win their support for sane nuclear policies.

It is from a position of a growing, strong and healthy program that I announce a transition in our Nuclear Weapons task force leadership. After many years at the helm of our nuclear weapons program, Dr. Bruce Amundson has decided to step down as task force co-chair. We are very grateful for everything he has done to make our organization as a whole successful, respected and well-positioned for the future. At one point he was serving as chapter president and co-chair of both the climate and nuclear weapons task forces. It is a testament to the depth and strength of our current volunteers that Bruce no longer has to do everything. He continues to serve on the board as Vice President and remains highly active both in our program and organizational work. I’m personally very grateful for Bruce’s mentorship in my role as your chapter President. I am very happy to announce that Dr. Joe Berkson has agreed to take on the role of Nuclear Weapons Task Force Co-Chair. Joe has been an anti-nuclear activist since he was in high school and a member of WPSR since 1985. He practiced family medicine at Group Health for many years and served as Chief of Staff at the Eastside and Bellevue Clinics. Recently retired from practice, Joe has now directed his energies toward nuclear weapons abolition with boundless enthusiasm. We are lucky to have him stepping up to lead.

We continue to face serious challenges. The status quo that maintains a dangerous and outdated defense policy, a dependence on dirty, dangerous and unhealthy fossil fuels, and propagates economic injustice will not be changed easily or quickly. The respected voice of health professionals on these issues is necessary to win the hearts and minds of both our elected officials and the general public.

What can you do to help? First and foremost, stay engaged by renewing your membership and supporting our work. If you have the time and the passion to take it to the next level, consider joining one of our three task forces.

With Gratitude and in Peace,
Mark Vossler, MD President
Please Support Us!

Being a member of WPSR means you are supporting one of the most effective organizations working to combat the gravest threats to human health.

Our work on Nuclear Weapons abolition, the climate crisis, and economic inequity is making Washington a healthier, safer, and more sustainable place for all.

Please join us by becoming a member or renewing your membership. It’s easy!

**FIVE FACTS ABOUT WPSR MEMBERSHIP**

- Anyone can be a WPSR member!
- Current students join for FREE!
- Membership starts as low as $35/year!
- It’s easy to become a monthly or quarterly donor!
- Your donation is 100% tax deductible!
- And (not yet proven) donors to WPSR sleep better at night.

To donate or renew your membership visit wpsr.org/support or call 206.547.2630
However, grassroots organizing to build a “movement” isn’t an end in and of itself. To effect any social or policy change, it’s critical to recognize that any efforts at advocacy, activism, letter writing, demonstrations, education, etc. only have real relevance if they are strategically linked to impacting policies. This is especially a truism for the issue of nuclear weapons and arsenals since they are controlled by federal policymakers.

U.S. nuclear policies continue to be frozen in the Cold War straight jacket and most members of Congress, including Washington members, have done too little to address this sclerosis. This is changing, and WPSR and WANW are an active part of these changes. **Over the last five year period, we have established a sustained and organized campaign to meet with, educate and nudge our Washington delegation to step up their games. And the results are clearly encouraging. Here is what we’re seeing.**

Rep. Adam Smith has had a considerable history advocating for reducing both the size of the U.S. arsenal and spending on nuclear weapons, well before we began meeting with him. But he has taken further steps, since assuming the chairmanship of the House Armed Services Committee, to introduce a **No First Use bill** that would establish as policy that we would never initiate a nuclear attack. Aided by considerable pressure on our delegation, three other House members, Reps. Heck, Larsen and Jayapal, have signed on as co-sponsors of the NFU bill. Rep. Smith has repeatedly acknowledged in public his appreciation for our informed and sustained support for his efforts.

Legislation introduced to stop the development of new, so-called **low-yield nuclear weapons** for the Trident submarines homeported in Washington, the LYNE Act, has been co-sponsored by Reps. Jayapal, Heck, and Larsen.

In her key leadership position as co-chair of the House Progressive Caucus, we have asked Rep. Jayapal to work to introduce nuclear weapons policies into the Caucus policy workbook. Rep. Jayapal has quickly emerged as a strong champion of all of WPSR’s nuclear policy priorities.

Most recently, when the House was considering the 2020 National Defense Authorization Act (the primary military spending bill), **all seven Democrats from Washington supported amendments** to (1) eliminate funding for new low-yield nuclear weapons, (2) prohibit the unauthorized use of military force against Iran, (3) withhold funding for new missiles that would violate the Intermediate-Range Nuclear Forces Treaty, and, (4) express Congressional support for extending the New START Treaty.

While successfully passing this legislation in Congress remains a challenge, two observations are important. **What is demonstrated by the above actions by WA members of Congress is a level of engagement in nuclear policy issues we simply have not seen for decades.** And - the stage is being set for potentially implementing these policies if leadership changes occur in the Senate and Presidency in 2020.

WPSR is playing an important role in transitioning public pressure to policy change. Our members and partners are absolutely empowered by successes to date, and we have really just begun this campaign. The long view is always called for when addressing polices as enshrined and complex as nuclear weapons policies. But in spite of the regressiveness and dangers that characterize the current administration’s nuclear policies, we definitely see the opportunity for a changing tide in the next few years, building on these recent developments in Congress, often led by members of our Washington delegation.
The new members of WPSR's staff & board: welcome!

ANITA PEÑUELAS, MD, MPH | BOARD OF DIRECTORS

Anita Peñuelas is a Family Medicine Physician currently working as a Locums Physician for The Polyclinic. She grew up in Seattle on unceded Duwamish land so has deep ties to the Pacific Northwest. After a formative 2 years living and working on the Diné (Navaho) Reservation she returned to the University of Washington to obtain a Masters in Public Health in Maternal and Child Health. She worked for several years in public health programs before completing Medical School and Family Medicine Residency at the University of Washington. Most of her medical career has involved direct patient care but she has always remained interested and engaged in broader public health issues. More recently she joined the WPSR Climate and Health Task Force in order to help influence the deep policy changes which are needed.

MAX SAVISHINSKY, PHD | EXECUTIVE DIRECTOR

Max brings two decades of leadership experience in the nonprofit, philanthropic, education, social services and development sectors, including directorial roles with Refugees Northwest, the Seattle International Foundation, the University of Washington, and the Council on International Educational Exchange. He holds Master of Public Administration, Master of Arts in International Studies, and Doctor of Higher Education degrees from the University of Washington. Max speaks Spanish and Portuguese, and has lived, worked, studied and traveled in over 40 countries on 6 continents. A native of New York, Max has called the Pacific Northwest home for over 20 years.

AI MAHONEY | OPERATIONS COORDINATOR

Ai oversees office administration and supports programmatic operations. Her responsibilities include donor relations, event management, and communications. She is committed to work that helps vulnerable populations and that addresses social determinants of health. She holds a Master of Public Administration and certificates in Fundraising Management, International Development, and Global Health of Women, Adolescents, and Children from the University of Washington.

YOU CAN BE A PART OF THE WPSR TEAM TOO!

WPSR works for the health and peace of all Washingtonians. When you become a WPSR member, you invest in your own health and well-being, and the well-being of your family, neighbors and community. Join us, and become a member or renew today by visiting www.wpsr.org/support
Most people are concerned with their health. We are bombarded with what to do to keep ourselves healthy as individuals. What if that is not sufficient? What if the society in which we live matters more for our health than what we do to keep ourselves healthy?

The health of people in a country can be measured by how long they live, life expectancy. Calculating this requires only that you know when someone is born and when they die. All rich countries and many not-so-rich calculate this yearly. Many mortality rates can similarly be calculated from this information.

This century, the United States stands with Syria as the countries where mortality is going up and life expectancy is going down. Last century this happened suddenly in Russia after the breakup of the Soviet Union, and in high AIDS-prevalent countries in Africa.

Since 2015 life expectancy has declined here every year instead of continuing to increase. If health had continued to improve as expected, the excess deaths we’ve experienced is equivalent to eradicating deaths from motor vehicle crashes, other accidents, and homicide. Our health decline is huge and yet Americans are mostly unaware of this carnage.

Maternal mortality, deaths of women from childbirth-related causes, has risen 50% in the last 15 years. Back in 1951-53 we had the lowest rates of such deaths in the world. Now almost 60 nations surpass us. Adult mortality, ages 25 to 64, is similarly rising for all racial-ethnic groups in this country.

Why is this happening? We are not at war. There is an opioid death epidemic but it explains only a small part of this seeming slaughter. Much evidence suggests our increasing income and wealth inequality is a major part of this process, similar to what happened in Russia after the breakup only here the increase has been gradual over decades rather than happening suddenly there. Our income inequality continues to increase despite many people saying this is not good for us.

The other finger points to lack of support for early life. Only two countries in the world do not grant a working pregnant woman paid time off after she has her baby. One is of course the United States, and the other is Papua New Guinea. We have the most child poverty of all rich nations. Our government spends for remedial action on failing students, rather than putting resources towards early life. For example, Sweden, one of the world’s longest lived countries, spends more government money on the first year of life than on any subsequent year. Early life expenditures have a great return on investment compared to those repairing broken men and women.

While access to good medical care is important, it is not the driver of these fatalities. We spend more on health care than the rest of the world combined. Similarly for many health-related behaviors. We have among the lowest rates of cigarette smoking of all rich nations. Japan, the longest lived has more than twice as many men smoking per capita than we do.

Our health decline is not on the list of presidential issues that are being discussed and debated. This was also the case after the 2013 Institute of Medicine report with the title that said it all before our health decline. “U.S. Health in International Perspective: Shorter Lives, Poorer Health.” Things are considerably worse now. This needs to become a national issue. It is much more important than Medicare for All or other such discussed programs. Yes, universal health care needs to be enacted but it won’t treat our health decline.

WPSR, through it’s Economic Inequity Program, is taking on the responsibility of bringing these ideas to light, to eradicate shortevity and get us back on the road to a longer healthier life. Creating awareness of a problem is always the first step. Then we need to change the economic structure of our society so there is more economic justice, and in turn, better health.
WPSR Supports Health Needs of Marshallese Community

By Holly Barker

The WPSR Nuclear Weapons Abolition task force has been working closely with government and community leaders from the Marshall Islands to address healthcare needs related to U.S. nuclear weapons testing in the islands. From 1946-1958, the U.S. tested 67 atmospheric nuclear weapons, including the largest nuclear weapon ever tested by the United States, Bravo, the equivalent of more than 1,000 Hiroshima-sized bombs. Bravo blanketed the entire Marshall Islands with radiation, and the two downwind communities of Rongelap and Utrik received particularly high doses of radiation. For decades after the Bravo detonation, a U.S. Government medical research program studied the health impacts of radiation exposure on human beings by tracking the health outcomes of the Rongelap and Utirikese, as well as a control population matched by age and gender. Physicians contracted by Brookhaven National Laboratory, a U.S. weapons laboratory, collected information from their medical missions that enabled U.S. weapons designers to advance their instruments of mass destruction.

Most people in the United States know little about this history, or the continued health impacts experienced by communities today. Currently, there is no oncologist or cancer center in the Marshall Islands. Marshallese public health infrastructure and resources are overwhelmed by the burden of providing for the healthcare needs of patients exposed either during the testing, or by residing on islands with residual radiation.

According to U.S. Congressional mandate, the United States provides healthcare only to the less than 100 patients exposed to radiation from Bravo. The U.S.-provided healthcare is limited to cancer care, and only for cancers considered radiogenic by the United States. There is no U.S.-provided healthcare for the Marshallese exposed to radiation from the other 66 tests during the Cold War, those born and raised on islands with residual radiation levels, communities prematurely resettled on highly contaminated islands, communities resettled adjacent to a U.S.-constructed nuclear waste facility, Marshallese workers who constructed the nuclear waste facility without protective clothing or masks, a community exposed to higher levels of radiation than one of Utirikese (the Ailuk community was deemed too large and cumbersome to evacuate).

WPSR is working closely with the local Marshallese in the Seattle area as well as the Ministry of Health & Human Services, and the National Nuclear Commission of the Republic of the Marshall Islands. WPSR is using its network and contacts to introduce Marshallese leaders to cancer care providers and to consider whether opportunities exist to provide care of Marshallese residing in Washington, or in the islands. Recently, WPSR collaborated with Marshallese leaders to write a statement encouraging WPSR members and contacts to support the health justice efforts of the Marshallese people through a focused effort to create cancer care options.

Washington Against Nuclear Weapons is a statewide coalition of over 45 organizations that aims to prevent nuclear war and abolish nuclear weapons. To learn more or join, visit: www.wanwcoalition.org
WPSR Speaks Out on Russian Nuclear Missile Explosion & the New Nuclear Arms Race

by Joe Berkson M.D., Patricia Ronald Leckenby LMHC, Mary Hanson

On August 8, 2019, a nuclear-powered missile (the 9M730 Burevestnik) exploded above the Arctic circle in Northern Russia. Five nuclear scientists and two workers were killed and several others injured as a result of the explosion. Neighboring countries noted radiation levels were elevated in the area.

Russia has declined to release information about the explosion, and Russian nuclear stations that monitor radioactivity have been mysteriously silent since the explosion. Intelligence sources report that the explosion occurred during the test of a new type of nuclear-propelled cruise missile, which has been hailed by President Putin as the centerpiece of Russia’s new nuclear arms race with the United States.

President Putin spoke of this new weapon in his State of the Nation address in 2018. Putin stated, “Russia has a nuclear-powered cruise missile that can fly anywhere and not be detected”. Defense experts say this arms escalation was initiated by several factors that undermined the status quo of deterrence, including 1) the United States withdrawal from the Anti-Ballistic Missile (ABM) Treaty in 2002 under the George W. Bush administration, and 2) the Pentagon’s subsequent development of a strategic missile defense system. We are beginning to see the same antiquated tactics of mutually assured deterrence that we saw during our activism against nuclear weapons during the Cold War.

The United States withdrew from the INF (Intermediate-Range Nuclear Forces) Treaty on August 2, 2019 citing Russia as out of compliance with the treaty. Russia denies this claim. On August 20, just 2 1/2 weeks after the US withdrawal from the INF Treaty, the United States tested a medium-range cruise missile off the California coast. The United States claims that the test was successful. President Putin responded to the US test by ordering the Russian Military to prepare a symmetrical response to the missile tested by the US.

The increase in nuclear weapons testing immediately following the break-down of arms control treaties makes clear the reality of the ‘New Nuclear Arms Race’. All nuclear weapon systems are extremely dangerous and prone to accidents. Experts have expressed great concern that Russia would proceed with development of the 9M730 Burevestnik nuclear-powered cruise missile. The nuclear material used to power the missile propulsion system works by superheating air which is then forced out of the rocket to give it thrust with a ramjet. This is a "dirty" system because it spews radioactive nuclear isotopes in the air as it travels, in addition to the radiation produced by the nuclear explosion that occurs when the missile comes down after the nuclear warhead is sent to its target.

The ‘New Nuclear Arms Race’ between Russia and the United States must be stopped. The budget proposed for modernization of the United States nuclear arsenal, which would include new nuclear weapons and delivery systems, is slated to cost 1.5 trillion dollars over the next 30 years. That means every American man, woman, and child would pay approximately $106.00 per year for the next 30 years toward nuclear weapons and infrastructure.

Is that what we want to achieve with our dollars? The Washington Against Nuclear Weapons (WANW) Coalition is a coalition of health, faith and community organizations in Washington state. WANW urges the United States to resume anti-nuclear diplomatic efforts and to promote multilateral treaties, including a ‘No First Use’ Treaty that is widely recognized as a critical first step to halting the ‘New Nuclear Arms Race’ that threatens the existence of Earth and all of its inhabitants.

Save the Date!

March 7, 2020 | WPSR Annual Dinner
WPSR Upcoming Events

Global Climate Strike
20-27 Sept

September 21 3-5pm - Potluck (Madrona Playfield) 5-8 Panel (Madrona Grace Church)
On International Day for Just Peace, join us for a community event and educational panel, featuring experts from impacted and oppressed communities to speak on the issue of militarism at home and abroad. Speakers include: Aaron Dixon, Seattle Black Panther Party; Casierra Cruz, Independent Guahan Movement; Donna Denina, International Women’s Alliance; Jiji Jallay, Pacific Islander Health Board of WA; Marie Artap, Who is Boeing Bombing campaign.

September 23 at 1:00 pm (Cashmere Public Library)
September 29 at 4:00 pm (Village Books in Bellingham)
Come join Betsy for a discussion about her book, “Open Borders: A Personal Story of Love, Loss, and Anti-War Activism.” Betsy will discuss the Anti-nuclear weapons movement (1980’s) which involved WA state citizens, and ways to take action against the proliferation of nuclear weapons today, drawing on the story of our state’s programs back in 1982-1985.

September 29, 2-4pm, Town Hall Seattle
The Washington Against Nuclear Weapons Coalition will host the People’s Town Hall on Nuclear Weapons on. This conversation informs the public and elected officials about the damage and dangers of nuclear war, examining Washington’s nuclear arsenals and the role of our state’s industry in producing them. People from communities that have been directly impacted by the long legacy of the nuclear weapons industry in Washington State will gather together to share their testimonies. Although invited, neither WA Senator decided to attend, even though nearly half the total US nuclear arsenal is in the state of Washington.

October 1, Seattle Federal Building
Join WANW Coalition, Seattle Anti-War Coalition and others as we present the results of the People’s Town Hall to WA Senators Maria Cantwell and Patty Murray. These recommendations for their action on nuclear weapons policy in Congress will highlight the urgency for nuclear justice. We will rally outside the Federal Building, hold a press conference, address the public and share our testimonies, then deliver the People’s Town Hall results to the Senators in their offices.

The Garden
by WPSR
Poet-in-Residence
Sarah Cohen

I am telling the tomatoes about winter.
They are not in the mood.
They have been telling me all about their many plans,
growing lush and prosperous,
starting new schemes.

I speak in violence,
tearing off flowers, my hands staining yellow.

Gather what you can, I say.
Give up what you hoped for.
Now is the time to survive.

They don’t know how little joy I take in it,
how I long beyond longing for the garden to last forever,
for a place we can walk among the twisting vines,
fruits at our hands, earth at our feet.
Health professionals support a Green New Deal for Seattle

by Sarah Cornett, WPSR Climate Program Manager

As conversations about a Green New Deal multiply and gain more prominence nationally, we’re excited to be part of a new effort focused on creating a city-wide Green New Deal for Seattle. This campaign led by 350 Seattle and local environmental justice organization Got Green urges City of Seattle leaders to eliminate climate pollution by 2030, address historic injustice in the city and its policies, and create thousands of living wage jobs.

WPSR is one of nearly 200 organizations to sign-on in support of Seattle’s Green New Deal. Four physician members of our Climate & Health Task Force have represented WPSR’s support for this initiative before City Hall in recent weeks. On August 13th, Dr. Annemarie Dooley, a nephrologist and active member of our Climate & Health Task Force, and Dr. Margaret Kitchell, a retired psychiatrist and longtime Task Force member, testified before City Council in support of the plan.

The Seattle Green New Deal is likely to include policies that will be introduced over time, including one that would prevent new fossil fuels in buildings (following the recent move by the City of Berkeley, CA to ban all new natural gas hookups). Most of our natural gas is derived from fracking, a clear and severe example of how fossil fuel extraction harms communities. Pollution from fracking is linked to low birthweights, neurological disorders, respiratory illness, harm to pregnant mothers, and even certain cancers. The combustion of gas inside our homes produces harmful indoor air pollutants, including nitrogen dioxide, carbon monoxide, formaldehyde, and ultrafine particles. A policy like that just passed in Berkeley that promotes all-electric new construction in homes and buildings can also significantly support human health by improving indoor air quality.

Last month, the American Medical Association, Academy of Family Physicians, the American Lung Association, and dozens more public health and clinician organizations developed a Call to Action on Climate, Health, and Equity. Rapidly transitioning away from natural gas in order to improve human health and reduce contributions to climate change was a key priority in their joint statement.

Climate change is an existential threat to health, but as the medical journal The Lancet reminds us, the climate crisis and efforts to address it pose “the greatest global health opportunity of the 21st century.” A Seattle Green New Deal effort led by communities most impacted by climate pollution and fossil fuel infrastructure is an important step towards realizing climate justice and supporting the health of all people.

Save the Date!

March 7, 2020 | WPSR Annual Dinner
Near and far, Tacoma's natural gas plant is bad for human health

by Maia Syfers (WPSR member and nurse practitioner) and Dr. Melissa Lem (board member of the Canadian Association of Physicians for the Environment). This originally appeared as an opinion piece in the September 5, 2019 issue of Crosscut.

In the summer of 2017, Brian Derfler, a third-generation farmer from Farmington in northeastern British Columbia, couldn’t sleep. In an interview, he spoke of his experiences with fracking near his farm, including deafening midnight flaring and constant drilling noise, poor air quality, intrusive truck traffic and stress over crop losses from soil degradation. He was also keenly aware of the broader implications of expanding the liquefied natural gas (LNG) industry: “What they’re doing here is affecting our health directly, but it’s going to affect your climate,” he said.

Despite research indicating that fugitive methane emissions from fracking are a leading contributor to the climate crisis, Puget Sound Energy (PSE) continues to promote LNG as a cleaner "bridge fuel” and is advancing its plans for an LNG plant on the Tacoma Tidflats. Environmental reviews note that the gas would be sourced from western Canada, where over 85% of LNG is produced by fracking. Yet, as Derfler’s story suggests, this project is not just bad for our climate; it will result in serious health and safety risks to communities across the West Coast.

As health care professionals in British Columbia and Tacoma, two areas inextricably linked by this proposal, we are deeply concerned about its implications for human health. Research on the health impacts of fracking, mostly done in the past decade, is highly concerning. A recent review of nearly 700 studies revealed associations with worse air pollution in 87%, water contamination in 69%, and other public health hazards in 84%. On the ground in Dawson Creek, B.C., family physician Dr. Ulrike Meyer witnessed an unusually elevated incidence of glioblastoma, a deadly brain cancer, and unexplained neurological symptoms in patients who lived near fracking wells.

Though fracking itself is banned in Washington state, the infrastructure required by the Tacoma LNG project will create significant safety hazards, including the threat of explosions and fires. A 2014 Washington state explosion at an LNG project in Plymouth, Benton County, forced hundreds to evacuate and injured first responders. Recently, uncovered safety studies by the city of Tacoma predicted potential impacts up to 12.6 miles beyond the facility should an accident occur. Furthermore, the Northwest Detention Center on the Tacoma Tidflats, where over a thousand migrants are detained, has no evacuation plan.

Despite opposition from the Puyallup Tribe and Gov. Jay Inslee, the Puget Sound Clean Air Agency, a public health agency whose mission is to protect the Puget Sound region from air pollution and climate change, issued preliminary approval in July for the last permit required for this project. Yet the agency’s analysis used inaccurate science to account for the impacts of methane, and relied upon inadequate safety and environmental studies. These flaws have been repeatedly addressed by the Puyallup Tribal Council and over 80 organizations who oppose the project.

In B.C., Hereditary Chief Smogelgem of the Fireweed Clan of the Wet'suwet'en Nation similarly decried the effects of disruptive LNG pipeline development through his traditional territories, saying, “The liquefied fracked gas industry has been a menacing threat to our people since it was first being considered more than 15 years ago.” Health professionals across our region likewise oppose this project. In June, Oregon and Washington Physicians for Social Responsibility released a research report detailing the specific risks to health and safety posed by the Tacoma LNG plant and other major fracked gas infrastructure projects proposed in the Pacific Northwest. The Canadian Association of Physicians for the Environment is also poised to release a policy paper on fracking and its potential health consequences this fall.

Meanwhile, an independent review commissioned by the B.C. government in February pointed out the glaring lack of monitoring and study of fracking’s health risks within the province, including increased seismic activity and groundwater contamination. Of note, the toxicologist who presented to the panel stated that we are “profoundly ignorant about what is going on.” The local risks to human health by the proposed Tacoma LNG facility, and the potential cumulative effects on climate change from expansion of its infrastructure on the West Coast and beyond, are far too great for it to proceed. We must heed the advice of health organizations that are calling for a transition away from fossil fuels — including natural gas — to renewable energy. We urge Puget Sound Clean Air Agency to uphold its mission to protect public health and the environment and put a stop to this project.
Every day, WPSR staff, task force members, volunteers, and board members work to create a healthier, more peaceful, and sustainable Washington. A key piece of this work is maintaining an aggressive agenda of meetings with elected officials to advocate for policies that advance our nuclear abolition, climate health, and economic equality priorities. Here’s a look at just some of our recent work...

WPSR volunteers meet with WA State Representative Mia Gregerson

WPSR volunteers meet with WA State Senator Bob Hasegawa to discuss introduction of a Joint Memorial on Nuclear Weapons

Nuclear Weapons Abolition task force members meet with staff from Rep. Pramila Jayapal’s office on nuclear policy and the NDAA.


Our full-court press in the halls of Congress requires a sustained effort. This effort needs your sustained support!

Become a monthly donor and help make this critical work possible!

www.wpsr.org/support