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Russia's war: Why *The BMJ* opposes an academic boycott

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If truth is the first casualty of war, the second is health and wellbeing. BMJ condemns Russia's war on Ukraine¹; this is not a moment for neutrality or abstention. The identity of the aggressor is clear, as are the consequences of that aggression on mass casualties and destruction in Ukraine; on the lives and livelihoods of civilians; on the refugees now fleeing Ukraine in their millions; on the millions of Ukrainians short of essential drugs and treatments (doi:10.1136/bmj.0610)²; and on the health professionals now struggling to maintain any semblance of basic healthcare in a country already dealing with a poorly controlled covid pandemic and an outbreak of polio (doi:10.1136/bmj.0548; doi:10.1136/bmj.0605).³ ⁴

The impact of Russia's war is not limited to Ukraine. It will be felt across Europe, as refugees place extra demands on health services and possibly trigger further waves of covid. Europe, especially Ukraine's immediate neighbours, have responded admirably, brought closer together in adversity. The UK, meanwhile, is an outsider politically and in its immoral attitude to refugees (doi:10.1136/bmj.0569),⁵ a legacy that this journal, among those opposed to Brexit, feared.

Martin McKee and Adrianna Murphy explain the full extent of the public health catastrophe in Ukraine and what health professionals can do beyond humanitarian work (doi:10.1136/bmj.0548).³ They also explain the centrality of Ukraine to global food supplies. As the world's second biggest exporter of grain, Ukraine supplies other countries in the midst of their own crises, such as Lebanon and Yemen. This is before we calculate the knock-on effects on health of record oil and gas prices.

Besides reminding us of the interconnectedness of our world and the need for international solidarity, Russia's invasion of Ukraine must accelerate the green energy revolution. Superimposed on a climate emergency and a global pandemic, a new war in Europe hammers home the message that our global prioritisation of power and wealth is an existential threat and must be replaced with a better basis for society.

An example of international solidarity is the extensive sanctions regime against Russia. Putin's aggression, whether by calculation or not, will have an effect on the health and wellbeing of people in countries imposing sanctions as well as Ukrainians and Russians. A question for scientific journals is whether they will join those sanctions, to boycott Russian researchers, academics, and institutions (doi:10.1136/bmj.0608).⁶ At least one journal has decided it will no longer accept papers from Russian scientific institutions (https://retraction-watch.com/2022/03/04/journal-editor-explains-banon-manuscripts-from-russian-institutions).⁷ Previous

academic boycotts have affected science and health in Iran (https://www.nature.com/articles/d41586-019-02795-y).8

The BMJ's position is clear: we will continue to consider papers for publication from Russian authors and institutions. Our view—and it is one supported by our editorial team, editorial board, and company—is that science and health have the potential to bring people together in common purpose to improve understanding, cooperation, and relationships. By boycotting Russian research, for example, we risk further marginalising Russian scientists already speaking for peace (doi:10.1136/bmj.0535). We also potentially do harm to Russian civilians, many of whom are protesting against the war. We stand with health professionals, scientists, and civil society, not with dictators.

If our purpose is to improve outcomes related to health and wellbeing then a boycott of Russian science is likely to achieve the exact opposite. Indeed, *The BMJ* has historically opposed academic boycotts (doi:10.1136/bmj.f4349), ^{10 11} and we do not wish to set a counterproductive precedent now. On the contrary, maintaining scientific dialogue is a principle that we will adhere to as one pathway to peace.

This does not mean that we will ignore the potential of state propaganda and manipulation of any potential submissions from Russian researchers and institutions. Our established editorial policies, of peer review and declaration of competing interests, can help avoid publication of such content, and we will apply extra scrutiny to any papers from Russia. We usually receive very few submissions from Russia, and any that we do tend to fall short of our usual standards. Russian science diverged from the mainstream in the decades after Ivan Pavlov won the Nobel prize for physiology or medicine in 1904 (doi:10.1093/ije/dymoo2). We will, however, keep our decision on an academic boycott under review as circumstances change.

The dictator's playbook is to censor unfavourable information. *The BMJ* is now freely available in Ukraine and continues to be accessible in Russia until the authorities choose to block our content. BMJ group products, such as Best Practice and BMJ Learning, are now also freely available in Ukraine, including in the local language. If truth is indeed the first casualty of war, our response is to spread as much of BMJ's reliable information as widely as possible.

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