



Global Operational and Tactical Medicine SIG Newsletter

August 2026

Dear friends, esteemed colleagues and WADEM members,

August has remained a very challenging month for first responders and medical health systems globally.

Climate scientists are predicting that 2026 will remain renowned for the development of the largest El Niño in "living memory" and probably the largest event since the 19th century, with its full implications still waiting to be determined.

A paper published in 2018 called "Climate change and collective violence" by Levy et al. shows the direct link between climate change and the increase in collective violence generally in "combination with other causal factors". Moreover, studying conflicts in the tropics from 1950 to 2004, Hsiang and his colleagues were able to demonstrate that the likelihood of new civil conflicts doubled from 3% to 6% during year of the ENSO (El Niño Southern Oscillation), with notable effects, making the land area in tropics considerably warmer and drier. The same study noted that since 1950, ENSO may have played a big role in the development of 21% of the total number of civil conflicts.

Also, when studying violence in East Africa between 1990 and 2009, O'Loughlin and colleagues were able to find that substantially warmer than normal temperatures significantly increases the risk of violence and that it can be used a reliable predictor of violence.

In another related paper, Scheffran et al. outlined an analytical framework of linkages among the climate system, natural resources, human security and societal stability linking directly environmental vulnerability, human vulnerability with climate sensitivity and conflict sensitivity.

From a global operational and tactical medicine perspective, warmer years mean that more resources are needed to safeguard the general population while some of the

services remained strained, either caught in direct operations or pre-deployed to tackle an increasing number of floods, wildfires and even increased organized crime, regional sporadic conflicts; and this does not account for the humanitarian deployments to countries affected by other natural disasters, conflict and terrorism.

In Europe, the Europol TE-SAT Report outlined the grave implications of the growth of the Com network, a decentralized online ecosystem formed by overlapping digital spaces and groups that promote and “engage in deviant and extremely violent behavior”. The borderless nature of technology facilitated extremism poses serious threats to the societal structures, bringing subgroups and individuals with links to misogyny, elements of jihadist and right-wing terrorism.

In the United States, the FBI has released the 2025 Active Shooter Incidents in the US Report. The findings outlined that active shooter incidents are still claiming lives and devastate communities across many federal states. In 2025, the FBI designated 34 active shooter incidents, representing a 42% increase from 24 incidents in 2024. Active shooter incidents occurred in 21 states and Washington, D.C. and represented five categories, including commerce, open space, government, education, and houses of worship. As a notable change compared to previous years, nearly 68% of incidents involved planning and preparation by the shooter, an increase from 58% in 2024 suggesting a worrying change in tactics.

Another worrying trend is represented by school incidents happening in countries with low prevalence including the most recent one in Thailand, where a teenage boy shot his grandparents and then went on a shooting spree at a local secondary school. In Sweden, a deadly attack shook an entire community after an 18-year-old man armed with a sword attacked the students at a local school. While the events and trends are not always terror-related, the recent events and reports outline that teenagers and young adults are more at risk of being radicalized online or inclined to commit hate crimes or other forms of violence or extreme violence.

From an emergency medicine perspective, it is worth mentioning that the age groups that are at risk of being attacked are changing, with more incidents happening in institutions linked to education. This latter change brings to light a new demographic group at risk, prompting new protocols and approach across all services and public health systems.

Best Regards,

Katie Willet, MD
Co-Chair GoptMed SIG

George Tataru, RN
Co-Chair GoptMed SIG

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