

Physicians for Human Rights Issues of Concern Re: Military Action in Iraq

The population of Iraq is extremely vulnerable:

- Most of Iraq's 26 million people are almost entirely dependent for daily survival on the monthly rations distributed under the Oil-for-Food Program (OFFP). A disruption in the OFFP is likely to have extraordinary health consequences unless a comprehensive and effective food distribution plan is rapidly in place. In addition, war in Iraq is likely to disrupt supplies of other essential goods such as medicine, water and energy. In recent days, the UN has confirmed that OFFP personnel will be evacuated from Iraq should a war commence. In mid-February the UN emergency relief coordinator announced that the UN was ready to feed 250,000 people for 10 weeks. However, the anticipated need may be 40-times greater.
- The combination of a rapidly deteriorating health infrastructure, decline in access to public health and medical services, and a marked decline food availability to the Iraqi population for more than twelve years have contributed to a sustained deterioration of health status. During the past decade, infant mortality more than doubled to 107 deaths per 1000 live births per year, and the under-five mortality rate also more than doubled to 131/1000 live births per year.^[1] War will compound the precarious nature of the health infrastructure and fragile health of the most vulnerable within the population.
- Preventative public health and curative medical services in Iraq are inadequate for the health and medical emergencies that are likely to result in the event of armed conflict. The number of primary health care (PHC) and maternal and child clinics, the principal providers of basic health care in Iraq, have declined by nearly half since the Gulf War in 1991 -- according to UNICEF, there are 929 PHC centers remaining out of a pre-Gulf War network of 1,800. Most of the health facilities are in poor physical condition. They often lack water and electricity and, hence, severely limit the quality of patient care.
- The water, sanitation, and electricity infrastructures in Iraq have not recovered from the previous war. This is in part due to sanctions, which have denied parts for much of the machinery used in these infrastructures as well as denial until recently of chemicals necessary for water treatment such as chlorine and aluminum sulfate. It is also clear that government of Iraq has not invested any significant resources in these sectors.
- Water treatment plants and sanitation facilities such as wastewater treatment and pumping stations operate at anywhere from 25 to 50% of design capacity. Capacity has been sacrificed due to cannibalization as well as steady deterioration that occurs when there is insufficient maintenance and no spare parts. UNICEF and the United Nations Development Program report that 40% of water samples fail tests either for contamination by solids or sufficient disinfection.
- Water treatment, water distribution, sewer treatment, and sewer pumping are all highly dependent upon electricity in the largely urbanized country (70% of the population lives in cities). While these systems have back-up generators, they are designed for short-term power failures, have insufficient capacity to operate for long periods of time, and are themselves slowly becoming dysfunctional. Today 50% of the sewage in Baghdad's largest treatment plant is shunted directly into a river and estimates are that 500,000 tons of raw sewage enter waterways daily in Iraq.
- The electrical generating and distribution system is only marginally functional. Electrical black-outs due to insufficient power availability range from 6 to 14 hours per day in many cities. As observed by the PHR investigators, the electrical system is held together with 'bailing wire' as it has been deemed dual use and spare parts delayed for years or denied.
- According to UNICEF, some water borne diseases such as typhoid are now seen at incidences of 1000% compared to pre-Gulf War levels. Vulnerable sectors such as malnourished children, pregnant women, and the elderly will be immediately susceptible to epidemics of water borne diseases if the electricity system is paralyzed and water/sanitation systems cease to function.
- The current state of humanitarian preparedness is cause for great concern. Very few international agencies with large-scale emergency capacity are currently present in Iraq. Thus, far, the U.S. government's public statements on how it intends to conduct military actions in Iraq have not included sufficient information and/or support for humanitarian relief efforts for Iraqi civilians who are likely to be directly and indirectly affected by such actions. As of February 14, 2003, the U.N. stated that it has fewer than half of the resources it needs to cope with the anticipated humanitarian crisis.
- Internally Displaced Persons (IDPs) and refugees in Iraq and on its borders are at great risk. Turkey and Iran have already threatened to close their borders. Under such circumstances, IDPs will not be able to cross international borders to safety and will remain vulnerable to the effects of military actions, basic life-sustaining supplies and/or possible reprisal attacks by Iraqi forces. Many humanitarian organizations urge that preparations be made to accommodate larger numbers, perhaps as high as several million refugees.
- An attack on Iraq may unleash violent reprisals by the Government of Iraq against internal opponents, including the Kurds in the North and Shiite Muslims in the South, but also against perceived political opponents as well as military deserters.
- Antipersonnel mines may be used by both sides in this conflict and threaten to harm non-combatants. Similarly, cluster bombs in Iraq would, in all likelihood, maim and kill far more innocent civilians than soldiers, especially if they are used against Republican Guard forces, which are municipally based.
- Reports of the torture and ill-treatment of captured combatants in Afghanistan by both the US and its ally, the Northern Alliance, have created cause for serious concern. In the event of a war with Iraq, captured, surrendered, and wounded Iraqi military forces are entitled to Prisoner of War status in accordance with the Geneva Conventions and their rights must be protected.

Recommendations

To Prevent War

In the interest of protecting human life and health, PHR appeals to the U.S. Government the United Nations and the Government of Iraq to exert every effort to resolve the conflict with Iraq without a resort to military force.

To Protect Civilians and Non-Combatants in the Event of War

In the event that war occurs, concerted steps should be taken to assure that human rights and humanitarian law are respected. PHR calls upon the US Government and its allies to comply with their obligations under the Geneva Conventions, which is their duty at a minimum, and to take measures to protect civilians that, in some cases, exceed the strict requirements of international humanitarian law. *Document continues at* <http://www.phrusa.org/research/iraq/021403.html#1b>.