Insecurity, Displacement and Public Health Impacts of the American Invasion of Iraq
Omar Dewachi
PAGES 2 - 17

Overcrowding in Limbo: Iraqi Refugees in Arab States
By Chantal Berman
PAGES 18 - 24
Insecurity, Displacement and Public Health Impacts of the American Invasion of Iraq

Omar Dewachi

The burdens on Iraqi society of the American war do not begin to accumulate with the invasion of 2003. To trace them one must begin with the 1991 Gulf War and the subsequent twelve years of international sanctions. That war and those sanctions have devastated the country’s infrastructure, which was both physically modern as well as socially one of the most developed in the Middle East. It had one of the best education systems in the Arab world, with a 100 percent enrolment rate for elementary schooling and an effective literacy program. Still, one can also trace the burdens back further to the effects of the US unilateral support of the Iraqi regime in the 1980s during the Iran-Iraq war, support which facilitated one of the bloodiest wars of the 20th centuries with around 1.5 million killed and wounded and financial losses exceeding $600 billion dollars for each country. It is safe to affirm, however, that America's response to 9/11 and the subsequent invasion and occupation of Iraq in 2003 have intensified the costs to Iraqi society.

This report reviews several effects of the American invasion and its aftermath on aspects of Iraqi society. These include the effects of occupation and violence on internal and external displacement and the demographic transformations in Iraqi society. It examines the magnitude of numbers and resources mobilized to address the problems arising from the displacement of Iraqis from their homes, and the effects of war and occupation on the Iraq’s public health sector and the health of the Iraqi general population both inside and outside Iraq.

The Burdens of Physical and Structural Violence

The US intervention and promise of “liberating” and “democratizing” Iraq in 2003, as part of America’s “war against terrorism,” have turned Iraqi cities into an international frontier for forces using terrorism as their method, destroyed the country’s infrastructure already affected by years of sanctions, created a new political system in Iraq defined along ethno-sectarian lines,¹ and put the country into a civil war or on its verge. The American military invasion in 2003, the dismantling of the Iraqi military and police under American civil administration, the establishment and support of a vindictive debaathification process, the emerging sectarian violence in many cities in Iraq, and the subsequent security plan for Baghdad after the 2007 military surge, have all brought new political, economic and social realities to the region, which drastically and permanently altered the lives of Iraqis both inside and outside Iraq. The physical and structural violence that ensued, part of or triggered by the invasion and occupation, has left tens of thousands of dead, injured and disabled people, shaped the internal and external displacement of Iraqis, as well as had drastic effects on the country’s public services, local economy, and environment.

¹ It is important here to acknowledge the pre-invasion US support to the Iraqi opposition in exile, which has contributed immensely to the formation of new forms of sectarian politics, which eventually became the building block of the “new Iraq” political system. On an insider account of this history see: Ali Allawi, The Occupation of Iraq: Winning the War Losing the Peace (Yale University, 2007).
Added to this list must be the devastation of one of the historically and culturally most significant cities in the region and one of humanity’s cradles of civilization. Since the American invasion of Iraq, the continuing occupation of a sovereign country by US troops, and the establishment of a sectarian political system, there have been continuing suicide bombings targeting civilians, political assassinations in broad daylight of individuals based on their sectarian and political backgrounds, kidnappings, killings and body mutilation by organized crime and militia members, torture and killings by the American military, Iraqi government and mercenary paramilitary contractors such as Blackwater (now Xe), unlawful imprisonment of tens of thousands of Iraqis in US and Iraqi detention camps and secret prisons, the continuing political failure and corruption that have plagued the country’s institutions, and the utilization of massive numbers of bombs, explosives and weaponry in civilian settings. As documented elsewhere in this report, the death toll as a result has been steep.

In February 1, 2011, the watchdog group Human Rights Watch released a disturbing report revealing the presence of secret jails in Baghdad under the direct control of Iraqi Prime Minister Nouri Al-Maliki. Reports of regular torture and abuse in these secret sites, as well as in other prisons and detention centers all over Iraq, have raised questions not only about an epidemic of human rights abuses by the present Iraqi government but also about the involvement of the US military and advisory groups in training the Iraqi military and police forces.

While physical violence continues to shape post-American invasion Iraq, other forms of violence that can be termed structural are equally important. These include continuing occupation, incompetent economic and social policies, institutional corruption during the process of reconstruction, sectarian and vindictive politics, and religious and cultural violence, all of which have led to the failure to deliver public services and

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2 For a detailed list of the immediate effects of war and its aftermath on Iraq’s archeology and museums see Francis Deblauwe, The Iraq War & Archaeology Archive, (May 2006), http://iwa.univie.ac.at/archaeology1.html.


degraded public health and the environment. Since the 1990s, and particularly since 2003, there has been an overall deterioration in the standard of living of Iraqis. Eight years into the American occupation of Iraq, the country still suffers from chronic shortages of electricity, drinking water, housing and employment opportunities. In 2010, Iraq ranked 175 out of 178 countries—just before Afghanistan, Myanmar and Somalia—as one of the most corrupt countries in the Corruption Perceptions Index released by the Berlin-based group Transparency International. With the failure of the Coalition Provisional Authority in Iraq to implement transparent and sufficient managerial, financial and contractual control, close to $9 billion dollars of Iraq’s reconstruction money coming from revenue of the oil-for-food program is unaccounted for. Since the formation of the first Iraqi government post-CPA, corruption continued to be the modus operandi of many Iraqi ministries. The subsequent formation of a “National Unity Government,” a euphemism for a quota system of power sharing between political parties, has presented major challenges for the implementation of the constitution and the rule of law. This quota system distributes government ministries amongst various political parties without significant oversight or accountability over the way the ministers conduct their daily business. This, in turn, makes it “difficult to prosecute Iraqi officials for corruption due to a provision of law that effectively gives ministries a veto over investigations.” While the mirage of nation-building continues under American occupation, these have become the new realities, defining the everyday life of Iraqis.

Displacement and the Population Shift in Iraq

In September 2007, the United Nations High Commission for Refugees (UNHCR) estimated that well over 4 million Iraqis were uprooted from their homes. This estimate was released a year and a half after the bombing of Al-Askari Mosque in Samara by militant groups, which had triggered a deadly spate of sectarian violence in Iraq. The UNHCR stated that over 2.5 million Iraqis had been internally displaced, and another 2.2 million were externally displaced into Iraq’s neighbouring states of Jordan, Syria,

12 The Al-Askari shrine in Samara is one of the revered religious sites for Shi’a Muslims in Iraq and a site for annual pilgrimage by Shi’a from the region.
Lebanon, Turkey and Egypt. Although this displacement began to occur before 2003, it intensified dramatically between the years 2006-2007 during which 1.5 million Iraqis were displaced. During this time, there were around 60,000 Iraqis leaving their homes every month. Experts have suggested that Iraqis have become the leading nationality seeking asylum in industrialized countries.

With the war and occupation widely believed by the US public to be over, the most recent 2010 UNHCR estimates are that close to 3.5 million individuals out of a population of 31.5 million remain either “internally displaced persons (IDP),” “refugees,” “asylum seekers,” “returned refugees,” “stateless persons” and “returned IDPs” who continue to require support from the UNHCR and other local and international organizations. This means that around 1 in 10 Iraqis are currently on the run. Because this massive displacement of Iraqis has been mostly within or into urban settings, there has been a general absence of refugee camps containing the displaced within well-defined geographical areas. Experts have described the displacement and forced migration of Iraqis as a “silent crisis,” and “the biggest population shift in the Middle East since the displacement of Palestinians following the establishment of the state of Israel in 1948.”

This population shift, linked to the various forms of military, political and structural violence, has had tremendous effects on the social fabric of Iraqi society as well as on the mosaic composition of Iraqi cities and neighbourhoods. While the American and Iraqi government celebrated the “success” of the 2007 military surge, which they claimed contributed to the drop in sectarian violence and insecurity, many international reports and studies published in scientific journals (supported by data and satellite images) showed that it was the major population shift, rather than the surge, that was the

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17 For a bibliography on Urban displacement and forced migration see: Forced Migration Online, Urban Displacement, http://www.forcedmigration.org/browse/thematic/urban-displacement/.

main factor in that decline of violence. Iraqis from various backgrounds, especially minorities, have been victims of this systematic displacement by militias supported by political parties and other militant groups. This has dramatically contributed to the homogenization of mixed neighbourhoods and governorates. For example, one can see the effect of this population shift in redefining neighbourhoods and cities in Iraq, especially in mixed cities like Baghdad and Diyala (see Figure 1). According to the Internal Displacement Monitoring Centre (IDMC), one of the leading international bodies monitoring conflict-induced internal displacement worldwide, governorates and neighbourhoods that were mostly effected by displacement are now “more ethnically and religiously homogeneous than at any time in Iraq’s history.”

This systematic “sectarian and religious cleansing” continued into 2011 with systematic targeting of Christians in the cities of Baghdad and Mosul, forcing many ethnic and religious minorities to flee the country. While there has not been a comprehensive and legal process to identify those who have planned and perpetrated this systematic violence, the effect of these targeted attacks has been to force certain populations and group to leave Iraq, redefining the ethno-religious composition and reinforcing its divides. Thus the decrease in violence in Iraq has not necessarily been a sign of reconciliation, but rather a symptom of the population shift, in which neighbourhoods and cities have been completely redefined. This kind of sectarian and religious violence is a novelty in a country that is diversely constituted and been historically tolerant toward people from all kinds of backgrounds. This mass population shift has left a permanent scar on the Iraqi psyche and social realities, and it represents a major challenge for future reconciliation and durable solutions in the country.

Internal Displacement

For years now the Iraqi government and the international community have been dealing with one of the largest and most difficult internal displacement crises anywhere in the world. The UNHCR estimates that there are 1,720,000 IDPs in Iraq, of whom only

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23 Internally displaced persons are defined as: "persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalised violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognised State border." (OCHA, “Guiding Principles on Internal Displacement,” [2004]).
Figure 1.


Source: Columbia University
More maps are available at www.internal-displacement.org
about a third are receiving assistance from the UNHCR. These IDPs are distributed across Iraq, living in “rented accommodation, informal settlements or public buildings, or occupying private houses which other have fled from.” This internal displacement has occurred over three phases. The first phase, started before 2003, which was a direct effect of the repressive politics of the old regime, included the “arabization” of Kurdish areas, especially in Kirkuk in the North of Iraq by direct orders from the Saddam regime, destruction of marshlands in southern Iraq after quelling of the 1991 popular uprising, and the systematic elimination of political opponents. These were the direct results of the Saddam regime’s brutal policies against populations living in various parts of Iraq and have affected people from various religious and ethnic backgrounds. These policies produced around 1 million individuals displaced within Iraq. Following the American invasion of Iraq in 2003 and up to 2005 around 190,000 people joined this number during the second phase of displacement in the wake of the military operations in Iraq and the deterioration of security after the occupation. The third phase happened after the bombing of the Al-Askari Mosque in Samara in February 2006, when around 1.5 million people fled sectarian and generalized violence including military operations by multinational, Iraqi, Turkish and Iranian forces in northern Iraq. Even though there have been efforts by government and international organizations to aid and assist return of displaced Iraqis, many obstacles and difficulties finding durable solutions still loom over the crisis of IDPs in Iraq.

**The Humanitarian Situation of IDPs in Iraq**

A range of dire issues face IDPs, especially vulnerable groups such as women, children, the elderly and minority groups. Many IDPs live precariously under suboptimal conditions of wellbeing, access to health, electricity and water sanitation. While many international organizations, such as the UNHCR and the International Organization for Migration (IOM) (the two main organizations servicing IDPs in Iraq) have attempted to work with the Iraqi government to address the problems facing IDPs, including providing assistance, resettlement and resolving property claims, “the insecurity and new sectarian make-up of areas of origin, the lack of basic services and livelihoods there, and the destruction or secondary occupation of private and public properties all remained as serious obstacles to their return.”

The issues of shelter, food security, employment, and basic public health services such as water, access to healthcare, and sanitation are considered the leading issues of concern for IDPs and returnees. These issues reflect the deep problems in public services and infrastructure facing the population of the country as a whole, problems which get amplified with displacement. According to a Food Security Assessment conducted in 2006 with 1,188 IDP households in Iraq for the World Food Programme (WFP), “more

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26 Internal Displacement Monitoring Centre, “Internal Displacement.”
27 Ibid.
than half (57 percent) of the surveyed IDPs households reported experiencing shortages in food and reported adopting one or more food consumption strategies to cope.”

Such strategies involved modifying food intake habits, consuming low quality and cheap food, going into debt to buy food, reducing the number of meals eaten per day, and reducing adult food intake to provide more food for children. The survey classified 58 percent of the households as food insecure and consuming only cereals/carbohydrates on a daily basis. Other food items such as meat, beans, milk, and fruits, were rarely, if ever, eaten.

Food insecurity in Iraq is attributed to many factors, including low crop yields, rising food prices, and the deterioration of the Government of Iraq Public Distribution System (PDS), which provides a monthly food ration that many Iraqi families have come to depend on since it was established in 1991. The lingering effects of war and sanctions, including the deterioration of security, devastation of infrastructure, rise of food prices, and widespread corruption in the public sector, have affected the delivery of the PDS, especially to the poorest households in Iraq. According to reports, Iraqi food price increases have been sharper than those on the global market, doubling between 2004 and 2008. The WFP estimates that 9.4 percent of the Iraqi population is extremely dependent upon the PDS food ration (equivalent to 2.8 million individuals).

Close to two-thirds (64 percent) of the heads of households interviewed were not working and were having difficulties finding jobs. Many were living off savings, struggling with other means to provide for their families. The survey showed that in terms of employment, 89 percent of the more vulnerable female-headed households (FHHs) were without a job compared to 57 percent of the male-headed households. These rates reflect the vulnerability of the displaced especially compared with the general population already high unemployment rate of 18 percent in 2008.

With the war’s violence killing so many men (violence is the leading cause of death of men between the ages of 15-59), it is estimated that women head 1 in 10 Iraqi households with an increase of 1 to 8 amongst IDPs. According to a 2010 survey, of female-headed households, around 71 percent of the interviewed women who are able to work could not find employment, while 38 percent of those surveyed were unable to work. Reasons given are often poor health or societal norms regarding female participation in the workforce. These are disturbing findings, as women in Iraq before 1991 enjoyed one of the highest rates of employment and of social and political rights in the Middle East, rights which were protected by law. These transformations and the loss

29 Ibid.
http://www.unicef.org/media/media_33915.html.
31 Global food prices increased by 73 percent over the same period according to Inter-Agency Information and Analysis Unit, October 09 Newsletter, (2009), http://www.iuirac.org/reports/Newsletter-Oct09R.pdf.
32 WFP, “Rapid Food Security Assessment.”
36 Ibid.
of gains in women’s social and political rights and roles in society are directly linked to the effects of the economic sanctions during the 1990s and emerging forms of physical and structural violence since the American invasion and occupation.\textsuperscript{37}

\textit{The Situation of Returnees}

The return of the displaced has been a very slow process and has represented many challenges to the Iraqi officials and international organizations assisting with the process. Many of these families include a significant number of young and elderly members, representing additional burdens on the displaced and returnee head of households. Around 13 percent of returnee head of household are females, and a high number of these women are widows. Whilst 69 percent of all returnees cite food as a priority need, this figure rises to 74 percent when these families are headed by women. Similar to those who are still internally displaced, returnees still suffer issues related to access to shelter, work and health care, which weighs over these families, reflecting the general lack of infrastructure and public services in the whole country.

As mentioned above, internal displacement has occurred predominantly along ethno-sectarian lines. In the provinces of Basrah, Missan and Thi-Qar—predominantly Shi’a provinces—families that left their homes are almost exclusively Arab Sunni Muslims whilst in Samara and Anbar—predominantly Arab Sunni provinces—the majority of those who left were Shi’a Muslim. IDPs have sought areas where the host community shares their ethno-sectarian backgrounds. As a result, there has been a real change in the ethno-religious compositions of many governorates, creating a homogenization of Iraqi cities and neighborhoods.

\textit{External Displacement, Refugees and Forced Migration}

The majority of Iraqis who have left Iraq since 2003 have moved both legally and illegally into urban settings in Jordan, Syria, Lebanon, Turkey, and Egypt.\textsuperscript{38} Even though cities and regional governments in these countries have attempted to absorb this influx of Iraqis assuming it to be temporary, many Iraqis have no employment rights and have difficulties extending and renewing their stays in these countries, facing the possibilities of deportation back to Iraq. Fewer than 400,000 people of the nearly two million refugees are officially registered with the UNHCR.\textsuperscript{39} The following table shows the number of Iraqis in neighbouring countries according to the 2009 estimates provided by regional governments and the UNHCR:


\textsuperscript{38} Julie Petet, “Unsettling the Categories of Displacement,” \textit{MERIP} 244 (2007).

<table>
<thead>
<tr>
<th>Country</th>
<th>Total in Country</th>
<th>Of Whom Assisted by UNHCR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jordan</td>
<td>450000</td>
<td>65000</td>
</tr>
<tr>
<td>Syria</td>
<td>1200000</td>
<td>236000</td>
</tr>
<tr>
<td>Lebanon</td>
<td>50000</td>
<td>12000</td>
</tr>
<tr>
<td>Egypt</td>
<td>40000</td>
<td>15000</td>
</tr>
<tr>
<td>Turkey</td>
<td>7000</td>
<td>7000</td>
</tr>
<tr>
<td>Islamic Republic of Iran</td>
<td>58000</td>
<td>58000</td>
</tr>
<tr>
<td>Gulf States</td>
<td>150000</td>
<td>2700</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,955,000</strong></td>
<td><strong>395,700</strong></td>
</tr>
</tbody>
</table>

*Source: UNHCR 2009*


Internally displaced numbers jumped in 2006 and then leveled off:

Insecurity and Displacement

With much resilience and pride, many Iraqis attempt to negotiate their new lives in exile. Even though many regional governments have attempted to accept large numbers of Iraqis to stay in transition and have allowed the UNHCR to function to assist them, there are many challenges they face in their “transitory” homes.

“Mako amān!” (There is no security) Amal40 desperately announced, as she showed me her application for asylum with the UNHCR.41 Ashes from her half burnt cigarette fell on the floor of her temporary home in the outskirts of Damascus. The two-bedroom apartment felt empty. There were minimal pieces of furniture; a couple of chairs, three mattresses, a coffee table, some cutlery, and a cable TV to follow Iraq’s news, and most importantly for the children, to watch cartoons. “We are waiting for God’s mercy,” she said as we sat down, her children beside her, in front of the TV, sipping Iraqi cardamom tea. She proudly spoke of how they were doing well in school despite their predicament. There was a sense of both resilience and exhaustion in her words. “I just need them to tell me if our papers will go through or not. We have been waiting for so long and they do not give us any hope. They just leave us hanging there. I need to know! We have nothing but time…and time has become our enemy.”

It has been more than four years now since Amal and her extended family moved to Damascus after escaping Baghdad in 2006. A 40 year old single women, she had suddenly found herself taking care of her brother’s three children, after both their father and uncle (her two younger brothers), Hasan and Hussein, were killed by local militias in a middle-class Baghdad neighbourhood that was becoming more and more defined by new sectarian lines and the emerging politics of life and death in the city of Baghdad. The two brothers, whose father was Shi’a and mother Sunni, were at their shop when four men stormed in and attempted to kidnap them. As the two brothers struggled, they were both shot dead. The killing of their father left the three children orphaned, since they had lost their mother to leukemia during the 1990s when the international sanctions imposed on Iraq were in force, devastating the health infrastructure in Iraq and blocking import of the medicine and cancer care she needed to survive.

Devastated by the incident, the brothers’ whole extended family—their eldest brother, their father and mother and their sister Amal—fled to Syria, leaving behind their homes and most of their belongings. They were running out of money, and the financial support and services offered by the UNHCR were not sufficient. Four years in waiting for her case to be examined by the UNHCR and a third country for resettlement has left her with little hope. “We thought of leaving all of this and going back to Iraq. But then what do [you] go back to?” What remains in Iraq cannot be faced easily: continuing violence and insecurity, the loss of trust in people and the state, and the loss of faith in the international community for failing to work substantially to undo all the harm precipitated by the invasion and occupation.

Most difficult for Amal has been being at the mercy of international organizations; being interviewed so many times to verify her story, dealing with a nightmarish bureaucracy entailed in border-crossing, obtaining visas, and acquiring residency papers

40 Most of these narratives are part of my ongoing research on Iraqi refugees in the region. All names used are pseudonyms, changed to protect the identity of the informants.
41 United Nations High Commissioner for Refugees.
to register as a “refugee” with the UNHCR and receive rations and support, being given vague and ambiguous timelines for the processing of her paperwork for resettlement by a third country, etc. For Amal, this is a process of humiliation that she had to deal with every time she spoke about her case to anyone. She told me how she became speechless when the youngest child, Ali, came back home crying after one Syrian child at school asked him, “When are you going back home?” As he told Amal he reposed the same question: “’Ammeh (Auntie), when are we going back home?”

Amal’s story is not an uncommon one. It demonstrates the hardship of becoming an exile from one’s own home. The trauma of losing a family member and losing one’s home, city and memories have become some of the most common characteristics of Iraqis fleeing their homes. The term mako amân (there is no security), that Amal described, is not a mere comment on the situation in Iraq; it is about the unknown that awaits many refugees and forced migrants in regional cities. While escaping insecurity in Iraq, they face other forms of insecurities: living in exile, economic hardship, the wait for the unknown, and the loss of the sense of personal and collective safety and identity.

According to surveys conducted by the UNHCR and other International organizations and local NGOs, a high percentage of Iraqis have experienced trauma, torture, and social problems including prostitution and trafficking, which are on the rise in the host countries, especially among women and young girls. According to the IOM, there have been high levels of psychosocial distress among Iraqi refugees. More than half of those interviewed in Jordan and Lebanon disclosed distress factors including panic attacks, anger, tiredness, sleep problems and fears. Almost 21 percent of those interviewed in Jordan and 34 percent of those interviewed in Lebanon have experienced direct violence including witnessing assassinations of relatives and friends, torture, rape, or kidnapping. In addition, there are reports of higher rates of domestic violence and unemployment. The overwhelming majority of these interviewed expressed no interest in returning to Iraq in the near future and wanted to be resettled in a third country. The study showed resilience, though also many difficulties for children who were trying to adapt to their new schools and curricula in the host countries.

Western states have shown an unfriendly attitude towards Iraqi refugees, through the slow process of resettlement and lack of political will to invest in aid, and in many instances deporting a number of Iraqi refugees back to Iraq. In 2007 there were only 3,500 Iraqis who were resettled in a third country. Even though in 2010 the UNHCR declared that it has reached a milestone, with 100,000 Iraqis accepted for resettlement after 2007, half of those were still in the Middle East undergoing the long and burdensome bureaucratic process.

Iraqi Public Health in Context

Since the formation of the public health infrastructure of the Iraqi state in early 20th century, Iraq has slowly built a modern and centralized system of health care delivery and public health. The formation of the Royal College of Medicine in the late 1920s to train doctors locally, the expansion of public health and health care to rural areas in Iraq, and the creation of a strong post-graduate training opportunities and networks through training of specialist and experts abroad were crucial in the process of the formation of the nation-state and one of the most advanced health care systems in the region. With the expansions of the country’s infrastructure, health care became part of the wide-ranging and expanding network of health facilities linked up by reliable modes of transport and communication, including an expanding roads and railroad system that linked various parts of the country. Iraq witnessed also progress in building and improving human skills by expanding education and advanced training.

During the 1970s and 1980s, Iraq witnessed serious and rapid improvements in critical health outcomes. During the 1980s, Iraq maintained an effective public health system and infrastructure, despite the ongoing war with Iran. In fact, there were major improvements in many health indicators during the 1980s. Infant mortality, for example, was cut in half, decreasing from 80 per 1,000 live births in 1979 to 40 in 1989. In the same period, under-five mortality rates fell from 120 to 60 per 100 births. With a well-developed water sanitation system, it is estimated that 90 percent of the population had access to safe drinking water. According to reports from international organizations and Iraqi government, health care reached approximately 97 percent of the urban population and 79 percent of the rural population. Despite the political turmoil that Iraq witnessed during the 20th century, including the fall of the monarchy and a number of coups d’état, there was steady progress in Iraq’s public health system and the improvement of crucial health indicators.

This picture, however, changes considerably after the imposition of the economic embargo on Iraq after the invasion of Kuwait in 1990. The international sanctions during the 1990s had left a drastic effect on Iraq’s infrastructure and its health system, in particular. It is believed that one effect was the reduction of funds available for health

46 WHO and EMRO, Health System Profile Iraq (2006), http://www.emro.who.int/iraq/.
47 Ibid.
48 Ibid.
by 90 percent, accompanied by the decline of all health indicators in the country.\footnote{50} At the same time, there was a major health and other professional brain drain.

While there are very limited studies available about the functioning of the health system in Iraq pre-1990s, most health indicators and accounts of post-sanctions years, when compared with pre-sanctions years, show drastic decline and deterioration in the years since then. The destruction of the country’s infrastructure, with massive bombardment of water sanitation plants and electricity power grids in 1991, years of government neglect under conditions of political turmoil and repression, and twelve years of brutal international economic sanctions, left the country’s public health system in shambles. While there have been attempts to reform the public health system and health care delivery with help from World Health Organization (WHO) since 2003,\footnote{51} most of these efforts have experienced many challenges and obstacles with the deterioration of general security, exodus of health professionals, complicated and corrupt bureaucratic practices surrounding international and US funding for reconstruction, and the failure of the political process and government in Iraq to show any real investment and results in terms of the rebuilding of the country’s devastated infrastructure.

During the 1990s, Iraq witnessed a serious drop in the per capita gross domestic product (GDP) from $5,510 in 1989 to $866 in 2001. In 2003 there was a negative growth rate (-22%), while the inflation rate was estimated to be around 29 percent and external debt rose to $94 billion.\footnote{52} In 1988, absolute poverty affected only 3 percent of urban population and 8 percent in rural areas. These rates increased sharply to 21 percent in urban and 22 percent in rural populations in 1993. In terms of geographical areas, absolute poverty increased from 25 percent in urban areas and 33 percent in rural areas in 1988 to 72 percent and 66 percent in urban and rural respectively. Almost three quarters of the Iraqi population became poor despite the food rationing system established in 1991. Expenditure on food was about 62 percent of total expenditure in 1993. It declined to 44 percent in 2002. From 1990 to 1996, infant, child and maternal mortality rates doubled, as Iraq health indicators fell to resemble some of the least developed countries in the world.


\footnotetext{WHO and EMRO, \textit{Health System Profile Iraq}.}

\footnotetext{51} Ibid.: See the various health reform reports on the WHO/Iraq website. These include the Iraq public sector modernization programme.

\footnotetext{52} Ibid.
Iraq Health Status Indicators, 1990-2002

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<tr>
<td>Life expectancy at birth</td>
<td>61.28</td>
<td>58.76</td>
<td>61.06</td>
<td>61.62</td>
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<tr>
<td>Infant Mortality Rate (per 1000 live births)</td>
<td>40</td>
<td>100</td>
<td>102</td>
<td>102</td>
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<tr>
<td>Maternal Mortality Rate (per 1000 live Births)</td>
<td>160</td>
<td>-</td>
<td>291</td>
<td>-</td>
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<tr>
<td>Prevalence of</td>
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<td></td>
</tr>
<tr>
<td>- Stunted growth</td>
<td>18.7%</td>
<td>32.0%</td>
<td>30.0%</td>
<td></td>
</tr>
<tr>
<td>- Malnutrition</td>
<td>9%</td>
<td>23.4%</td>
<td>19.5%</td>
<td></td>
</tr>
<tr>
<td>- Wasting</td>
<td>3%</td>
<td>11.0%</td>
<td>7.8%</td>
<td></td>
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</tbody>
</table>


Health Care under Fire

Since 2003, Iraq has faced even more public health challenges, with further worsening of many health indicators. The country has been dealing with a collapsed health system, affected by years of sanctions, in addition to a wide range of structural problems brought in by the American occupation and failure of the political process of state and nation-building. Even though some officials have indicated that there has been some improvement in the health situation in the last couple of years, the health situation in Iraq remains very desperate 8 years into the occupation. In 2008 a WHO report showed shocking figures related to the situation of domestic violence, gender, health and healthcare in Iraq during the years following the American invasion.53

According to the most recent comprehensive Family Health Survey Report published in 2008, violence-related mortality constitutes up to one in eight deaths in Iraq. Women and children are mostly vulnerable under the current conditions in Iraq, with many pregnant women unable to reach hospitals for delivery, routine immunizations severely reduced, medical supplies disrupted, electricity cut at hospitals, and primary care particularly badly affected.

In terms of the cost and burden of health care on Iraqi families, the survey showed that average household expenditure on health was $46, representing 13 percent of monthly household expenses. Thirty percent of households had to borrow money to pay their medical bills, while this proportion approached 50 percent when a member of the household was hospitalized. Amongst households surveyed, one quarter of Iraqi women have no formal education and only 10 percent completed secondary school by contrast with 16 percent of men. Women’s illiteracy rate is now one of the highest in the region, representing more than 50% decline in terms when compared to a couple of decades.

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earlier. Around 38 percent of pregnant women are anaemic and the survey estimated that there has been a serious increase in the maternal mortality rate since 2003, rising from 47 to 84 per 100,000 live births.

A key finding on the effects of war and insecurity on the Iraqi general population was the high rate of mental ill health found, which represented about 11 percent of morbidity among those surveyed. Over one third of the respondents had considerable psychological distress.

Iraq has reported a disturbing 150 percent increase in infant mortality rates between the years 1990 and 2005. This is the world’s worst retrogression in infant mortality, even when compared with trends in sub-Saharan Africa where the AIDS epidemic has taken a heavy toll on infant survival. A study in 2005 reported that the mortality rate for children under 5 years was 125 per 1000 live births. This ratio is higher than all of Iraq’s neighbouring countries, and far higher than before the US-led invasion, when that rate was 102 per 1000 live births. The World Food Programme (WFP) estimated that 22 percent of children under 5 years have stunted growth as the result of chronic malnutrition, while 14 percent of children are born underweight. Diarrhoea and acute respiratory infections further compounded by malnutrition were the causes of about two-thirds of deaths in children younger than 5 years. UNICEF estimates that only 1 in 3 Iraqi children under 5 years have access to safe drinking water. Regional sample surveys indicate rising numbers of working children and of children who live on the streets. Many children are leaving school because of poverty, while substance abuse and violence are on the rise.

Mismanagement of the rehabilitation of the Iraqi health care system both by the American Civil Administration and the consecutive Iraqi governments has also created other problems. Although the U.S. military was warned about the vulnerability and importance of health facilities in the lead-up to the 2003 invasion, 7 percent of medical facilities were damaged in the invasion, 12 percent were left unprotected and so looted, and many health personnel were kidnapped in the few years following the American occupation. Following the 2003 invasion, the Iraqi Medical Association estimated that half the country’s 34,000 doctors have fled and many hundreds have been killed. As a result 16,000 doctors remain to take care of the population. This means that there are only 5 doctors for every 10,000 Iraqis (compared with 23 in the UK). Despite the promises of liberation, only 4 percent of the 18.4 billion reconstruction budget has gone to health care. In Baghdad, the country’s most populous province, 48 percent of the regional

56 WHO and EMRO, “Health System Profile Iraq.”
budget is devoted to security, where as healthcare receives just 1 percent of the provincial budget. Moreover, as mentioned earlier, approximately 9 billion dollars of reconstruction money remains unaccounted for.

During 2006-2007, while the Iraqi Ministry of Health was under the control of the Sadr Shi’a political party and their Mahdi militias as part of the quota system of power sharing in Iraq, hospitals in the city of Baghdad were transformed to “killing fields.” Sick and wounded Sunnis were systematically abducted and later killed by Shi’a militias with support from high-ranked officials in the ministry. This was confirmed with the arrest of the Iraqi deputy health minister, Hakim al-Zalimi, who was involved in the use of the Ministry of Health as an operational body for the Mahdi army involved in the sectarian violence that engulfed Iraq after February 2006. This politicization of the Ministry of Health and health care represented not only challenges to health system delivery in Iraq, but also shows how health care itself has become a destructive tool to manipulate and fuel sectarian tensions and violence in Iraq.

**Conclusion: The Undoing of a Nation**

The burdens of America’s wars on Iraqi society are very heavy and run deep. The US intervention and promise to liberate and democratize Iraq in 2003 have destroyed the country’s infrastructure already affected by years of sanctions, forced a new political system in Iraq defined along ethno-sectarian lines, and thrown the country into civil war. These wars have gone as far as the un-doing of a whole nation. As Julie Petet reminds us, the American military invasion in 2003 produced a dismantling of the Iraqi state, and it had the effect of “re-writ[ing] local and regional geographies, craft[ing] new ethnic-sectarian and national spaces, impos[ing] external dominance and squash[ing] the idea of resistance.” These have all brought new political, economic and social realities to the region, which reflected drastically and permanently on the lives of people both inside and outside Iraq. What the future holds for Iraq is still unknown; it is a political, social and economic debt that is very difficult to calculate. Still, the cost of these wars will continue to be paid with the abuse of scarce and crucial resources in Iraq and in the US, as well as with innocent human lives and dignity.

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62 Peteet, “Unsettling the Categories of Displacement.”
Overcrowding in Limbo: Iraqi Refugees in Arab States

Of the myriad consequences of the Iraq war, few are as large-scale, long-term, and broad in geographic scope as the Iraqi refugee crisis. The flight of one in five Iraqis over eight years has played a large role in the desecration of Iraq’s social fabric, not least by hollowing out Iraq’s moderate middle class.\(^1\) It has also impacted politics and livelihoods in nearby Arab states, which have historically played host to some of the largest refugee populations in the world. While few Arab governments are signatories to the UN Refugee Convention, most have been tolerant of Iraqi influx, and some have integrated an astonishing volume of Iraqis since the onset of the crisis. Others, such as the Gulf monarchies, have consented to resettle only the wealthiest and most well connected Iraqis,\(^2\) and still others have denied them recognition altogether.

The majority of Iraqis displaced from 2003-2005 were professionals and former Ba’ath party operatives with adequate skills and savings to maintain their livelihoods abroad – at least for a few years. The rise in generalized sectarian violence following the Samarra mosque bombing of 2006 produced a massive wave of poorer, less educated migrants whose displacement presents a far greater fiscal and social challenge to host states and societies. Most Arab governments introduced new restrictions on Iraqi migration during this period of greatest violence in Iraq, redirecting much of the subsequent flow into Syria, the last state to effectively shut its borders in late 2007.

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Contrary to Western concerns for the “spillover” of Iraq’s sectarian conflict into neighboring states, Iraqi refugee communities have been overwhelmingly peaceful. Yet high levels of influx compounded by a dearth of sustained international support have overwhelmed provisional infrastructures and undermined the livelihoods of urban working classes in host states, leading in some cases to broad popular resentment of Iraqi refugees. These impacts have been most severe in Jordan and Syria, where the ratios of Iraqi refugees to nationals are highest. With third-country resettlement options limited and the prospect of “return” captive to Iraq’s slow rehabilitation, the status quo is likely to persist or deteriorate in years to come.

Home to more than a million Palestinians since 1948, Jordan has a lengthy and mixed historical record of integrating refugees into its political and economic life. Jordan considers contemporary Iraqi migrants as “asylum seekers,” a legal step down from primo facie refugee status bestowed upon them by UNCHR. Although Jordan announced an open border with Iraq in 2003, an Amman hotel bombing carried out by several Iraqi nationals in 2005 lead the monarchy to begin placing creative restrictions on Iraqi entry, such as a moratorium on single Iraqi males aged 17-35, and a requisite $150,000 deposit per family in a Jordanian bank. The latter policy has attracted a small class of wealthy Iraqi exiles, the so-called “Mercedes refugees” who have invested in property and businesses in Amman.

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6 Patricia Weiss Fagen, p. 9
7 Joseph Sassoon, The Iraqi Refugees: The New Crisis in the Middle East (London;
Among Iraqi refugee host states, Jordan has received perhaps the highest level of international assistance, including more than $500 million in direct bilateral aid from the United States. In 2007, the regime opened schools and certain varieties of medical care to Iraqis regardless of their residency status. Yet drastically rising costs of housing and basic goods, in addition to an exacerbated scarcity of water and menial jobs, have precipitated a steady decline in Jordanian public opinion vis-à-vis the Iraqi refugees. As of 2008, Iraqis hoping to migrate to Jordan must first seek visas in Baghdad. Visa renewal has also become more difficult, resulting in a greater number of Iraqis with irregular status. Out of an estimated 450,000-500,000 total refugees, only 30,800 Iraqis were registered with UNHCR as of January 2011, leaving the vast majority with unclear legal status and likely low levels of social protection.

Influenced by the pan-Arab ideologies of the ruling Ba’ath party, Syria has traditionally proffered open borders and generous state welfare benefits to nationals of other Arab countries. “Open door” policies for Iraqi refugees persisted until 2007, at which point an estimated 2,000 Iraqis entered Syria each day. As in Jordan, public dissatisfaction with the adverse economic effects of refugee hosting ultimately drove the

state to curb Iraqi influx. Unlike Jordan, Syria has received scarce assistance from Western powers – a clear byproduct of Asad’s opposition to American policies in the region – and the regime is highly restrictive of international non-profit work. As a result, Syrian state and society have borne the burden of Iraqi influx with virtually no help. Yet Iraqis in Syria continue to benefit from public primary and secondary education (albeit with very low turnout among Iraqi schoolchildren), from clinics (albeit inadequate in capacity) funded jointly by the state and the Syrian Arab Red Crescent,¹⁵ and from Syrian subsidies on gasoline, food, and other essential goods.¹⁶ These comparatively generous social policies have resulted in the region’s largest population of Iraqis refugees; while no extensive polling of Iraqis in Syria has been carried out to date, most estimates of their numbers fall between 1-1.5 million.

Lebanon, by contrast, holds one of the worst refugee integration records in the Middle East. Since 1948 some 400,000 Palestinian refugees and their descendants have been deprived of rights due to fears that their permanent settlement would upset the country’s contentious sectarian balance. Roughly 50,000 Iraqi refugees are similarly denied all civic and social rights and services; they are instead considered “illegal migrants” and live in constant fear of detainment and deportation. As of August 2010, 36 Iraqi refugees remained in Lebanese prisons for “illegal” status,¹⁷ down from some 500 in the fall of 2007.¹⁸

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¹⁶ Patricia Weiss Fagen, p. 18.
¹⁷ UNHCR, “Lebanon Fact Sheet” (July 2010)
¹⁸ Kelly O’Donnell and Kathleen Newland, p. 17.
Whereas unskilled laborers have “extremely limited” 19 access to work in Syria and in Jordan, Lebanon’s free market economy provides more ample opportunities for work in the informal sector, however insecure and underpaid such positions may be. Lebanon therefore attracts an overwhelming number of single young Iraqi men, who are more likely to be employed as laborers and also more vulnerable to detainment. 20 Furthermore, because the Sunni dictatorships of Jordan and Egypt have been particularly restrictive of Shi’a migration 21 – a tendency that says more about the prejudices of these governments than the security risks posed by Shi’a Iraqis – a disproportionate share of Shi’a refugees have migrated to Lebanon, a country with a large Shi’a population and strong Shi’a political establishment. Lebanon is the only Arab state where the majority of Iraqi refugees are Shi’i. 22

At an estimated 150,000, 23 Iraqi refugees make up just 17% of refugees in Egypt, 24 the vast majority of which are Sudanese. Iraqis seeking refugee status in Egypt must first pass through Amman or Damascus for an interview, making their passage more difficult due to the latter’s current restrictions on Iraqi entry. 25 The recent popular overthrow of former President Mubarak has shed light on the severity of Egypt’s socioeconomic problems, including high unemployment and high inflation coupled with stagnant wage levels. Yet the number of Iraqis relevant to the populations of Cairo and Alexandria is small, and unlike in Syria and Jordan, these refugees have little impact on

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21 Joseph Sassoon, 85-91
22 Danish Refugee Council, p. 29.
25 Lynn Yoshikawa
the overall economy. Egypt has signed the UN Convention on the Rights of Refugees but with numerous reservations, including extreme limitations on formal employment. Access to schooling and healthcare for refugees in major cities is also low.26

Aside from Egypt, Turkey is the only Iraqi host state to have signed the UN Refugee Convention, albeit with bizarre geographical reservations. Turkey does not recognize persons of non-European origin as refugees, resulting in complicated legal status for some 6,600 Iraqis currently registered with UNCHR.27 The actual number of Iraqis residing in Turkey is likely far higher, with many preceding the 2003 invasion; Saddam Hussein’s brutal policies of “Arabization” in the Kurdish north lead to hundreds of thousands of Iraqi nationals displaced to Turkey in the 1980s and 90s.28 Many Iraqis today hope to pass through Turkey en route to claim asylum in Europe, yet Turkish border security has been strict, as Ankara fears further politicization of Turkey’s own large and somewhat embattled Kurdish minority.29 Amnesty International reported in 2008 that Iraqis arriving at Turkey’s borders were regularly denied entry and denied access to UNHCR representatives.

As in Turkey, many persecuted Kurds and Shi’a Iraqis in Iran predate the fall of the Hussein regime,30 and a limited number have migrated since 2003. As of January 2011, UNHCR estimated 47,900 Iraqis in Iran.31 Like Jordan, the Islamic Republic is

29 Julie Peteet, “Unsettling the Categories of Displacement” MERIP No. 244 (Fall 2007)
well accustomed to large-scale refugee hosting, having absorbed some 2.6 million Afghans fleeing the Soviet occupation in the 1980s. Tehran also plays a large role in Iraqi political and economic life, where it competes with the United States for influence over Iraq’s fractured political apparatus. Due to Iran’s isolation from refugee-resettling states such as the US, and due to low international recognition of Iran’s role as a refugee host, aid and resettlement levels for Iraqis living in Iran are pitifully low. A mere 30 refugees from Iran were resettled internationally in 2009.

32 Sassoon 98