

UN agency reports on the humanitarian situation in Iraq

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Abstract

This paper introduces the most reliable and important public sources of information on the humanitarian situation in Iraq. It is hoped that this will allow the reader to better assess claims made about that situation.

Contents

1	Introduction	2
2	UN agency reports	4
2.1	The Ahtisaari report (1991)	4
2.1.1	Consequences	5
2.2	The Aga Khan report (1991)	5
2.2.1	Consequences	7
2.3	FAO (1995)	7
2.3.1	Consequences	10
2.4	Unicef (1998)	10
2.5	Special topics (1999)	11
2.6	Humanitarian panel report (1999)	13
2.6.1	Consequences	14
2.7	FAO drought report (1999)	15
2.8	Unicef (1999) mortality survey	15
2.8.1	The excess deaths estimate	15
2.8.2	Relative performance in the South/Centre and Iraqi Kur- distan	16

*The Campaign Against Sanctions on Iraq (CASI) is a registered society at the University of Cambridge. Its members are all volunteers; its committee members are students. CASI is exclusively concerned with the humanitarian consequences of sanctions on Iraq. It does not support Saddam Hussein's regime and is not opposed to military sanctions on Iraq.

2.8.3	Consequences	16
2.9	Secretary-General's reports (1997 -)	19
3	Important non-UN reports	23
3.1	Harvard Study Team (1991)	23
3.2	International Study Team (1991)	24
3.3	Garfield (1999)	25
3.4	Red Cross/Red Crescent (1999)	26
4	A sense of the humanitarian situation	27
A	Security Council Resolutions	28

1 Introduction

This paper introduces the most reliable and important public sources of information on the humanitarian situation in Iraq.¹

In the context of this paper ‘humanitarian situation’ is taken to mean that measured by indicators of economic or social welfare such as per capita GDP, employment, literacy, malnutrition and mortality rates.² As the development of these variables in the 1990s has been substantially shaped by the Second Gulf War and the ensuing sanctions, this paper introduces the principal UN reports and Security Council Resolutions (SCRs) on this situation. Whenever possible, references are provided to original online versions of these documents. When these do not exist, I provide links to a CASI or other version. In general, one of the most important websites is that of the UN Office of the Iraq Programme at <http://www.un.org/Depts/oip>

Section 2 of this paper introduces UN agency reports, the chief public source of reliable information on Iraq’s humanitarian situation. The backbone of this information is the series of reports filed by the UN Secretary-General every 90 days under “oil for food” (at the mid- and end-points of each phase). Given the volume of UN reports, the presentation here is necessarily selective; I introduce those reports which, in my view, have played the most important role in contributing to our knowledge of the situation.

UN reports are imperfect in a number of ways. It is standard practice for the UN to use the data of the relevant national agency. This is usually more sensible than duplicating efforts. Unfortunately, in this case, Iraqi data are regarded as politically tainted. Thus, although Unicef reported on excess child deaths in 1998 [13], these figures were taken less seriously than its 1999 results [14]. This may reflect in part the use of Iraqi Ministry of Health data in the earlier report.

The UN also has its own data collection mechanisms. UN Observers oversee the “oil for food” programme while UN agencies may be involved in its implementation or projects of their own, such as the conduct of the aforementioned

¹Some of its contents are drawn from previous CASI publications.

²This paper therefore does not address political oppression by the government of Iraq. The UN’s Special Rapporteur on Human Rights in Iraq (<http://www.unhchr.ch/html/menu2/7/a/mirq.htm>), Amnesty International (<http://www.amnestyusa.org/countries/iraq/>) and Human Rights Watch (http://www.hrw.org/hrw/pubweb/Webcat-53.htm#P1033_143818) all provide guides to this topic.

child mortality survey. As the government of Iraq limits the independence of international agencies operating in Iraq there are considerable gaps in what is known to the UN [7, especially pp. 315-]. The government of Iraq is not the only body to do this. Hans von Sponeck, UN Humanitarian Co-ordinator in Iraq until his resignation in February, has explained that:

every attempt that I made with the United Nations in New York to get an agreement to prepare an assessment of the human condition in Iraq was blocked. All I was allowed to do was to carry out an assessment of the oil-for-food programme. There was a bigger picture that needed to be portrayed... and I was not allowed to do that. It was blocked at different levels ... including the Sanctions Committee.³ [11]

Political constraints also prevent the UN reporting what it does know. UN staff attest that the information possessed by the UN in Baghdad is more detailed than that issued in New York's reports. In fact, UN staff in Iraq have written to New York to protest a major UN report released in March [20]. Reliable sources claim that political manoeuvring led by the US prevented proper fieldwork being conducted by the UN's humanitarian panel last year. There are also rumours that there have been deliberate moves to prevent the World Health Organization investigating cancer in Iraq, and its possible linkage to Coalition Forces' use of depleted uranium during the Second Gulf War. I am not in a position to evaluate these rumours.

A final imperfection of UN reports is less technical but perhaps more important if we read them to attempt to understand what is happening in Iraq. A paragraph of declining social indicators or an estimate of child mortality are simply unable to portray the damage done to individual people in Iraq. At CASI's November 1999 conference, journalist Felicity Arbuthnot recounted part of her most recent trip to Iraq:

When we finally got to the hotel a man ran up to me - someone I recognised as part of the security at that hotel. As it turned out, he thought I was a doctor because a delegation of doctors was arriving a couple of days after that. He was just repeating over and over again, 'My wife, my baby! My wife, my baby.' He was making desperate gestures with his face and his body but I couldn't understand the rest of it. It transpired that there has been this spate of burns recently. When the electricity goes off, either people buy (if they can afford it) these very dangerous lamps which routinely explode, or they cook on makeshift stoves. It is easy to go wrong there, and often if somebody bends forward their clothes catch fire. If they're very poor they just put a wick in a bottle of kerosene and often the bottle explodes. So the new, hidden disaster is burns accidents. Five weeks earlier, his wife had been cooking when the lamp had exploded. The three year-old child, his little boy, had been watching. The wife was so badly burnt that she lost her breasts. The little boy's face was burnt, his whole body was burnt, and he asked if I could help... He turned up

³The passage of SCR 1302 (8 June 2000) is therefore promising. It authorises a "comprehensive report and analysis of the humanitarian situation in Iraq".

the next evening in the hotel with this little sort of broken doll in his arms. This child of three years old had no face left, there were no recognisable eyes, there was no recognisable nose, no recognisable mouth, he had lost an ear, his other ear and his face was stuck to his shoulder. [3]

Section 3 introduces some important reports by non-UN agencies. Section 4 then presents my sense of what the above tell us about the humanitarian situation in Iraq. Finally, Appendix A presents the Security Council Resolutions. These are kept in an appendix as they are quite secondary from the point of view of evidence: they tend to respond to the evidence presented in the agency reports.

2 UN agency reports

This section provides a flying guide to a decade of UN reports on living conditions in Iraq. The presentation follows a chronological order.

2.1 The Ahtisaari report (1991)

The first UN report on post-war conditions in Iraq was written by UN Under-Secretary-General Martti Ahtisaari [15].⁴ In March 1991, shortly after the cessation of hostilities, he conducted a weeklong tour of Iraq with five specialist teams. The teams had unimpeded access to the centre of the country but were not permitted to visit locations in the north (including Kirkuk) or the south (including Basrah).

The first paragraph of Ahtisaari's general remarks read:

I and the members of my mission were fully conversant with media reports regarding the situation in Iraq and, of course, with the recent WHO/UNICEF report on water, sanitary and health conditions in the Greater Baghdad area. It should, however, be said at once that nothing that we had seen or read had quite prepared us for the particular form of devastation which has now befallen the country. The recent conflict has wrought near-apocalyptic results upon the economic infrastructure of what had been, until January 1991, a rather highly urbanized and mechanized society. Now, most means of modern life support have been destroyed or rendered tenuous. Iraq has, for some time to come, been relegated to a pre-industrial age, but with all the disabilities of post-industrial dependency on an intensive use of energy and technology.

The report noted that there had been an infrastructural collapse in Iraq, making it very difficult to transmit information on needs about the country, much less to take counter-measures. Its concluding observations recognised the importance of an integrated approach to meeting civilian needs:

⁴Ahtisaari became president of Finland in 1994, a position that he held until earlier this year. Excerpts from this report are available online at <http://www.cam.ac.uk/societies/casi/info/undocs/s22366.html>

I, together with all my colleagues, am convinced that there needs to be a major mobilization and movement of resources to deal with aspects of this deep crisis in the fields of agriculture and food, water, sanitation and health. Yet the situation raises, in acute form, other questions. For it will be difficult, if not impossible, to remedy these immediate humanitarian needs without dealing with the underlying need for energy, on an equally urgent basis. The need for energy means, initially, emergency oil imports and the rapid patching up of a limited refining and electricity production capacity, with essential supplies from other countries. Otherwise, food that is imported cannot be preserved and distributed; water cannot be purified; sewage cannot be pumped away and cleansed; crops cannot be irrigated; medicaments cannot be conveyed where they are required; needs cannot even be effectively assessed.

2.1.1 Consequences

Ahtisaari's use of language like "pre-industrial age", has been criticised by later commentators, such as Graham-Brown [7, pp.156-7], who claims that this "exaggerated the scale of the problem". She does concede his recognition that a county dependent upon imported technology could no longer maintain or restore its infrastructure.

2.2 The Aga Khan report (1991)

In July 1991 a UN delegation led by the Aga Khan was sent to Iraq for two weeks to conduct a further needs assessment [16].⁵ This time 16 of Iraq's 18 governorates were visited.

The mission found

that the scale of damage and decline in Iraq in the past year had indeed been dramatic... It was clear to the mission that the impact of the sanctions had been, and remains, very substantial on the economy and living conditions of its civilian population. The mission was informed that the last reserves of food commodities that are included in the ration basket are in the process of being exhausted.

The national water system had fallen to a quarter of its pre-war capacity, often "of doubtful quality". The incidence of diarrhoeal diseases had increased fourfold, possibly due to this decline in water quality and the presence of raw sewage in the streets.

The health system had been badly damaged and, without a reversal, "[v]ulnerable groups, each day more numerous, will be the first victims." The food supply was no better, with harvests predicted at only one third that of the previous year. Some inflation rates are displayed in Table 1; nominal incomes only increased moderately over this period. The government ration system could only meet one third of the country's needs. Malnutrition was climbing among children and families were engaging in famine coping strategies such as selling possessions to purchase food.

⁵Excerpts from this report are available online at <http://www.cam.ac.uk/societies/casi/info/undocs/s22799.html>

Food	Nominal annual inflation rate (%)
wheat	4800
rice	2200
lentils	1200
sugar	2100
local cheese	700
vegetable oil	2000
fish	300
red meat	200
eggs	400
milk powder	1900
tea	1900
potatoes	400
poultry meat	no longer available

Table 1: Annual inflation rates, August 1991

Electrical generation capacity had been restored from its “negligible level” of late February but was only 25% of pre-war capacity. Actual output was 40%, though, as the equipment was being run constantly. As these gains had been achieved by cannibalisation deterioration would begin to set in unless spare parts were obtained.

Almost half the country’s telephones lines were “damaged beyond repair”; the inter-urban microwave links were mostly damaged and all international telecommunications were down.

The mission advised that

the primary action that is needed to address these needs is the import of material goods. This includes such items as drugs, vaccines, medical equipment, ambulances, spare parts and replacements for water and sewerage equipment, food and agricultural inputs and equipment and parts for power generation plants and the oil sector, as well as for the telecommunications network.

Noting that permission existed for the import of “humanitarian items” to Iraq, the mission believed that, “problems to date with importing the above items had more to do with the financing of such imports than actual prohibitions.”

Table 2 represents the mission’s attempt to calculate the expenses required to provide pre-war levels of service to Iraq’s population over the next year. They total US\$22 billion.

The mission also calculated the 12 month cost of a “greatly reduced services” scenario. These calculations are presented below; they sum to \$6.8 billion. The fixed costs mean that a four month programme would cost \$2.6 billion.

The mission’s report concluded with more personal remarks, talking of watching raw sewage pouring into the Tigris and the Euphrates. It emphasised the pressing need to avert the looming crisis and defended the objectives of its four month reduced services scenario as “modest”. The report appreciated the

Sector	Cost (US\$ 1991)	Comments
power generation	12 billion	
oil	6 billion	
water/sanitation	450 million	
food imports	2.64 billion	per annum
agriculture	500 million	for 91/92 season
health	500 million	based on previous imports

Table 2: Cost of restoring services to pre-war levels

Sector	Cost (US\$ 1991)	Comments
power generation	2.2 billion	50% of pre-war level
oil	2 billion	Consolidation; not repair of southern fields
water/sanitation	180 million	40% of pre-war level
food imports	1.67 billion	Based on WFP disaster ration cost; included supplementary feeding
agriculture	300 million	
health	300 million	pre-war import level

Table 3: Cost of restoring services to “greatly reduced” levels

growing co-operation between the UN and the GoI in meeting humanitarian objectives and observed the importance of continuing to foster this.

2.2.1 Consequences

By making very clear that Iraq’s population was in considerable need, this report put pressure on the Security Council to respond. The first “proto-oil for food” offers of SCR 706 and 712 (q.v. Appendix A) may be seen in this light. The first adopted the recommendation that oil sales be used to fund Iraqi imports. The second fixed a cap on permitted oil sales. This cap would have allowed Iraq to export less oil than was consistent with the Aga Khan’s “greatly reduced services” scenario; in setting it, the Security Council explicitly overrode the Secretary-General’s recommendation that the cap be increased. Furthermore, 30% of the total permitted oil sales was to have been deducted for a compensation fund. The government of Iraq did not accept the resolutions.

2.3 FAO (1995)

From July to September 1995, a UN Food and Agriculture Organization team led by the British nutritionist Peter Pellett assessed “the nutritional status of the population ... and ... the crop and food availability situation which prevails after the imposition of an embargo in 1990” [5].⁶ In spite of this modest mandate, the mission looked at various contributors to public health.

⁶A US advocacy group, the Iraq Action Coalition, has made this report available online at leb.net/IAC/FAO1-10t.html

It reported that the “agricultural sector has been given high priority by the government to ensure food security”. This included privatisation of the food industry. Nevertheless, output had declined under sanctions:

Cereal production for 1994/95 has been estimated at 2.5 million tons, about 10 per cent lower than last year and about 16 per cent lower than the average harvest of the previous 5 years... It was earlier forecast that the cereal output in 1994/95 would increase relative to the previous year; but, in spite of good performance of the rainfall and efforts of the government and international organizations, severe constraints relating to agricultural machinery, in particular nonavailability of essential replacements and spare parts, good seeds, fertilizers, pesticides, and herbicides has resulted in a decline in output. Livestock, poultry and fish subsectors also suffer from severe setbacks because of shortages of machinery, equipment, spare parts and essential drugs.

...catastrophe in the Republic of Iraq has been avoided by the widespread availability of the government food ration. This, however, provides only about one-third of the food energy and protein availability when compared to 1987/89. The ration, moreover, is deficient in a number of minerals and vitamins especially iron and vitamins A and C. Animal protein is also lacking, and hence such a cereal based diet is deficient in lysine... Since 1993 the situation has become much worse for the majority of the population.

The report also investigated public health infrastructure:

The water and sanitation system remains critical throughout the country with the Basrah area (1 million population) being the most serious. The basic reason is the lack of spare parts for a variety of equipment throughout the system which cannot be purchased without foreign exchange. In addition, specific Sanctions Committee approval is also required for most of the items. Overall the situation concerning sewage disposal in Basrah has deteriorated even further since 1993 when it was last seen and described as serious. Within the city there were huge areas of sewage water, sometimes green with algae and sometimes showing visible faecal material. These areas were grossly unhygienic and much of the city smelled badly as a result of these overflows. This of course produces severe hazards to health which can seriously influence nutritional status in children. Under these circumstances it was not surprising that there were many cases of infectious diseases including typhoid fever and infective hepatitis in the hospitals as well as widespread gastroenteritis in the hot summer months and in consequence many cases of nutritional marasmus. What remains surprising, however, is that the city has been able to avoid major epidemics in the presence of these very bad sanitary conditions...

The lack of capital for repair and updating of the water supply and sewage system is a significant factor associated with both malnutrition and excess infant mortality. The parallel problems of waterlogging and salinity of agricultural land with consequent reduction in

the area available for food production should be noted. The causes relating to lack of spare parts for pumps and equipment are identical.

Finally, the report discussed a nutrition and mortality survey that it undertook in Baghdad with the Nutrition Research Institute of the Ministry of Health. The results of measuring 594 children under five years of age are presented in Table 4. Malnutrition's severity is judged by comparison to World Health Organisation statistical data: a child measuring less than two standard deviations below the mean in the fitted normal distribution is malnourished; those measuring less than one below the mean are mildly malnourished while those less than three are severely malnourished. The forms of malnutrition are:

Chronic malnutrition results in poor physical child growth, often accompanied by sub-standard capacity for development and education. It reflects the cumulated detrimental effect on child growth by adverse economic conditions, poor health, feeding and care. Chronic malnutrition is difficult to reverse after the child reaches 2-3 years of age. Often stunted children grow up to be stunted adults, with a continuation of the same detrimental process on their children. [Stunting is the preferred indicator for longer-term changes as it is the most stable.]

Acute malnutrition reflects more recent onset adversities, such as diarrhoea and acute respiratory infections compounded by inadequate feeding. It is most easily reversed, but often recurs due to repetition of this cycle. This type of malnutrition is the most readily recognized by mothers, due to a child appearing thin.

General malnutrition implies a composite of chronic and acute malnutrition - either or both of these can result in underweight. It is the most widely understood indicator for nutritional status and is used in UNICEF's Progress of Nations report to monitor nutrition. [13, pp. 59,64]

Form of malnutrition	$i - 1$ SD (mild)	$i - 2$ SD	$i - 3$ SD (severe)
stunted (low height for age, chronic malnutrition)	56%	28%	10%
underweight (low weight for age, general malnutrition)	65%	29%	7%
wasted (low weight for height, acute malnutrition)	39%	12%	3%
(normal distribution)	(16%)	(2.3%)	(.1%)

Table 4: Child malnutrition in Baghdad, 1995

The mortality survey (in which 768 mothers were interviewed) found that mortality rates for children under five years of age had "risen nearly fivefold since 1990." The report expected that "the nutritional status of children in southern and northern Iraq is likely to be even worse than reported in Baghdad." Under five mortality rates (U5MR) and infant mortality rates (IMR), for children under

one year of age, are the two standard measures of child mortality. They are measured in deaths before attainment of the cut off age per thousand live births.

2.3.1 Consequences

Two FAO mission members published a letter in the British medical journal, *The Lancet*, containing some further calculations [21]. By converting the mortality rates to deaths and extrapolating the Baghdad figures to the rest of Iraq, they estimated that “since August, 1990, 567 000 children [under the age of five] in Iraq have died as a consequence” of maintaining the economic sanctions.

While this estimate is now not felt to be a good one (at least two of the clusters sampled in Baghdad returned unusually high results; no attempt was made to explain these outliers before extrapolating), it did prompt a famous response. On 12 May 1996 television host Lesley Stahl asked Madeleine Albright, then US ambassador to the UN, on the US news programme *60 Minutes* about it:

Stahl: “We have heard that a half a million children have died. I mean, that’s more children than died in Hiroshima. Is the price worth it?”

Albright: “I think this is a very hard choice, but the price – we think the price is worth it.”

2.4 Unicef (1998)

In April 1998 Unicef undertook to provide comprehensive data on the humanitarian situation in Iraq immediately following the onset of “oil for food”.⁷ Therefore, although its title suggests a focus on women and children, the report examined a broad range of factors influencing the humanitarian situation. It provided a good survey of the existing literature on Iraq’s socio-economic development, both prior to and since 1990.

When the report was written oil sales were restricted to \$2 billion per 180 phase, 53% of that being made available to meeting humanitarian needs in South/Centre Iraq. SCR 1153 (“enhanced oil for food”) passed just before publication of the report, increasing the oil sales cap:

On an annual basis, the \$2 billion for all humanitarian supplies in the South/Centre governorate [sic] does not even reach FAO’s estimate of the \$2.7 billion needed to make up for the shortage in the food supply for the year 1996-97. It also represents only half of the UN Secretariat and UN agencies’ estimated \$4 billion needed annually for food and medicine alone, without taking into account upgrading and repair of the most crucial public works, notably water and sewage plants.⁸ For comparison, 1989 [sic] Iraq’s civilian imports cost \$5 billion. [13, p. 17]

In discussing the situation of children in Iraq the report noted that

⁷This report is available online from <http://www.cam.ac.uk/societies/casi/info/unicef.html>

⁸According to the 1991 estimates of the UN Secretary-General attention to all needs would cost \$22 billion.

Malnutrition was not a public health problem in Iraq prior to the embargo. Its extent became apparent during 1991 and the prevalence has increased greatly since then (18% in 1991 to 31% in 1996 of under fives with chronic malnutrition). By 1997, it was estimated that about one million children under five were malnourished... [13, p. 23]

There is no single cause for malnutrition. Nor can attention limited mainly to one cause solve the problem. Thus food acquisition by the household (such as with food rations, perhaps complemented by the current limited means from other sources) does not necessarily insure that the child receives an adequate diet. Further, even if the child was adequately fed, this alone does not insure protection from malnutrition and death. Illness such as diarrhoeal episodes, acute respiratory infections, and others such as malaria and kala-azar are also potentially lethal, especially when untreated. [13, p. 25]

Discussing food availability, the report commented on the continued decline in cereal production in Iraq since 1990. While some of this could be attributed to increased production costs and harsh weather (1994 - 1995) that of 1996 was felt to be “the result of a conscious decision on the part of farmers not to cultivate wheat. With publicity about Oil-for-Food plan [sic], a price reduction of locally produced wheat was expected” [13, p. 28].

The report’s most quoted section is that on child health and mortality. It repeated Iraqi Ministry of Health figures:

The increase in mortality reported in public hospitals for children under five years of age (an excess of some 40,000 deaths yearly compared with 1989) is mainly due to diarrhea, pneumonia and malnutrition. In those over five years of age, the increase (an excess of some 50,000 deaths yearly compared with 1989) is associated with heart disease, hypertension, diabetes, cancer, liver or kidney diseases

With the substantial increase in mortality, under-registration of deaths is a growing problem. For infants, reporting a death would entail cancellation of the due ration for that child. [13, p. 42]

A survey jointly conducted by Unicef and Iraq’s Central Statistic Organization produced the figures in Table 5. Unicef interpreted the relatively poorer figures for South/Centre Iraq as indicating that “there was still a progressive deterioration in nutritional status in the South/Centre.” In contrast, the stunting figures (which reflect long term deprivation) in Iraqi Kurdistan had declined from about 30% in 1991.

The report concluded by noting a perverse effect of “oil for food”: donors may actually have reduced contributions to Iraq in favour of a “wait and see” approach to the evolution of “oil for food”.

2.5 Special topics (1999)

The bombing of Iraq by the US and the UK in December 1998 made obvious the rifts among the permanent five members, spawning active debate within the Security Council. One of the early outcomes of this was the establishment

Form of malnutrition	South/Centre	North	Total
stunted (low height for age, chronic malnutrition)	23.4%	19.3%	22.9%
underweight (low weight for age, general malnutrition)	32.0%	26.3%	31.3%
wasted (low weight for height, acute malnutrition)	11.0%	3.8%	10.1%
(normal distribution)	(2.3%)		

Table 5: Child malnutrition, Multiple Indicator Cluster Survey 1996

of three panels to investigate various aspects of the dispute with Iraq: disarmament and monitoring, humanitarian issues, and Kuwaiti claims (people and property). The UN agencies operating in Iraq saw the second panel as presenting “a unique and invaluable opportunity to assess the overall humanitarian situation of the Iraqi people”. They therefore prepared a collection of reports to the humanitarian panel [19]:⁹

The issues presented in the submission are not always substantiated with comparative data because data are not collected in a comprehensive manner. What we have put together at best illustrates trends and draws attention to immediate and deepening concerns. Nevertheless we are convinced that the issues need to be given serious attention if there is a determination to address the crisis in view of the deteriorating social conditions. The lack of adequate data should not detract from the importance and significance of the issues themselves.

The subsequent sections reported on a broad range of social issues including mental health, work safety, the role of women, child mortality, the situation of the disabled and the elderly, education, electricity, and poverty. While much of the quantitative data presented are quoted in the panel’s final report [17], this 51 page report presented a more thorough picture.

Some of the anecdotes presented illustrated some of the practical consequences of living in Iraq. The UN Department of Economic and Social Affairs reported that “UN Observers personally witnessed one incident in Mosul City, where some technical staff working on a 33 kV feeder, sustained serious burn injuries, when the substation operator unintentionally switched on power to the feeder” due to a lack of communications equipment.

The UN Development Programme recounted that Iraq’s 1980 Social Welfare Law made Iraq the first Arab country to recognise the medical, educational and economic rights of the disabled. This law became the model for the UAE’s and Iraqi experts helped build the UAE’s rehabilitation capacity. After 1991, some of the provisions of the law were cancelled and the capacity of the special needs educational sector has fallen to a third of its 1990 level.

The country representative of CARE International, one of the few NGOs working in South/Centre Iraq, reported buying ice cream from a medical doctor.

⁹q.v. <http://www.cam.ac.uk/societies/casi/info/undocs/spec-top.html>

The review of the situation of the elderly noted that their increased vulnerability has won them the label “old children”. It also contained figures that suggest a trauma that has avoided headlines so far: “despite the reduced birth rate, there has been a decline in the percentage of the aged population, from 3.8% to 2.9% for males and 3.8% to 3.6% for females, between 1990 and 1995.”

2.6 Humanitarian panel report (1999)

The panel report [17] assembled the information presented by the UN agencies [19], adding to it information from other sources.¹⁰ It addressed the question of data reliability at the outset:

10. Data made available to the panel were considered generally reliable, as they were undersigned either by UN agencies or other credible sources. It was noted that the distribution of humanitarian supplies was being observed by hundreds of foreign humanitarian workers, with UN agencies and others having become increasingly apt at detecting distortions and exaggerations. Broadly speaking, the panel considered that the information it was provided with converged and formed a coherent picture.

It later added that:

49. The gravity of the humanitarian situation of the Iraqi people is indisputable and cannot be overstated. Irrespective of alleged attempts by the Iraqi authorities to exaggerate the significance of certain facts for political propaganda purposes, the data from different sources as well as qualitative assessments of bona fide observers and sheer common sense analysis of economic variables converge and corroborate this evaluation.

The report then contrasted Iraq’s social indicators prior to the Second Gulf War with those afterwards. Noting the Economist Intelligence Unit’s estimate that Iraqi GDP may have fallen by nearly 67% in 1991, it reported that Iraq had “experienced a shift from relative affluence to massive poverty” and now had infant mortality rates that were “among the highest in the world”.

The report did not believe that it was possible to

exempt the Government of Iraq from its own responsibilities in providing relief to its citizens, given its unsatisfactory performance in certain areas ... nor can Iraq’s original responsibility for the current situation be ignored. At the same time, it is the panel’s view that, under current conditions the humanitarian outlook will remain bleak and become more serious with time. Even if not all suffering in Iraq can be imputed to external factors, especially sanctions, the Iraqi

¹⁰q.v. <http://www.un.org/Depts/oip/panelrep.html> The story of the numerous formatting errors in that version is somewhat humorous: the Brazilian mission to the UN provided the administrative support for the three panels. Somehow they did not make available electronic versions of the panel reports in English. The Office of the Iraq Programme therefore scanned in the humanitarian panel report using optical character recognition software and has not properly corrected it.

people would not be undergoing such deprivations in the absence of the prolonged measures imposed by the Security Council and the effects of war.

It did not feel that “oil for food” was sufficient to offset those needs: even if the programme worked perfectly, “the magnitude of the humanitarian needs is such that they cannot be met within the context of the parameters set forth in [the “oil for food” resolutions]”:

the humanitarian situation in Iraq will continue to be a dire one in the absence of a sustained revival of the Iraqi economy, which in turn cannot be achieved solely through remedial humanitarian efforts.

The report also criticised the “hand-out” nature of the programme as failing to stimulate the Iraqi economy, undermining Iraqi agriculture (which cannot compete with foreign imports purchased under “oil for food”) and increasing state control over the population.

The report provided three reasons for the relatively superior performance of Northern Iraq to the South/Centre: “The per capita allocation of funds under the [“oil for food”] programme is higher, distribution of food and medicine through UN agencies is comparatively more efficient than distribution by the Government, and the Northern border is more permeable to embargoed commodities than the rest of the country”. The report does not explain to what extent the greater efficiency of distribution in the North is due to the provision of an adequate logistical network there. Permeability of embargoed commodities refers to smuggling. Agriculture in the North is rainfed; without a reliable electrical system to drive irrigation southern agriculture has therefore been more badly damaged.

Turning to recommendations, the panel noted that its mandate was too restricted to recommend substantial alterations to the sanctions regime. It did present some recommendations that, it believed, “may lead to incremental improvements.” First it echoed the Aga Khan report by noting that “securing additional funding to finance humanitarian efforts is of paramount importance”. It then presented suggestions as to how the Security Council might do this. These included removing the oil sales cap, providing spare parts for the oil industry quickly, allowing foreign and private investment in Iraq’s oil industry and reducing, perhaps temporarily, the 30% share of revenues currently paid into the compensation fund for victims of Iraq’s 1990 invasion. It also put forward suggestions for an eased import approval process. The panel made a few recommendations to the Iraqi government as well, mostly aimed at improving the efficiency of their operations.

2.6.1 Consequences

Many of the recommendations of the panel report were adopted by SCR 1284, passed in December 1999. The two principal recommendations not adopted were the permission for foreign investment and the temporary reduction in the Compensation Fund levy. The latter of these had been in the British draft resolution. The government of Iraq has not accepted SCR 1284.

2.7 FAO drought report (1999)

A May 1999 UN Food and Agriculture Organization report estimated that low rainfall in Iraq had “caused complete failure in germination of about 70% in the rainfed areas [South/Centre Iraq], and very low yields (expected) in the remaining 30%” [4].¹¹ In the North, the drought was more severe than any seen in the 120 years of recorded data. The report noted that “the intervention required to cope with the massive needs of the agricultural sector in general, and the consequences of the prevailing drought is of a large scale and therefore can not be [sic] possibly be met from the [“oil for food”] programme. Consequently possibilities of additional funding should be addressed.”

In addition to having consequences for agriculture, the drought reduced hydro-electrical generation and interfered with water treatment.

The drought persists and is commented upon in subsequent Secretary-General’s reports (q.v. Section 2.9).

2.8 Unicef (1999) mortality survey

In 1999 Unicef conducted a child and maternal mortality survey with women in 40,000 randomly selected households across Iraq [14].¹² 24,000 households surveyed were in South/Centre Iraq and 16,000 were in Iraqi Kurdistan. The result of their interviews is the first independent national survey of child mortality since 1991 [10]. The preliminary report did not analyse “cause of death” information; as these questions were asked it is possible that subsequent analyses will do so. The report described the extensive precautions taken by Unicef to prevent manipulation by the Iraqi government.

In South/Centre Iraq, it was found that under five child mortality had more than doubled since the imposition of sanctions. Infant mortality rates followed a similar pattern. In Iraqi Kurdistan, mortality rates had declined slightly since the imposition of sanctions, although from a higher baseline. In both regions, standard results were found: rural mortality rates were higher than urban; boys were at more risk than were girls; maternal education decreased mortality rates.

2.8.1 The excess deaths estimate

A note accompanying the preliminary reports entitled, “Iraq - under-five mortality” explained that:

if the substantial reduction in under-five mortality during the 1980s had continued through the 1990s, there would have been half a million fewer deaths of children under-five in the country as a whole during the eight year period 1991 to 1998.

Three assumptions underpin this estimate. The following discussion of them is drawn from conversations in August and September 1999 with Professor Richard Garfield, an epidemiologist at Columbia University and one of the foremost analysts of Iraq’s mortality data.

¹¹q.v. http://www.cam.ac.uk/societies/casi/info/fao_dr.html or http://www.cam.ac.uk/societies/casi/info/fao_dr.doc

¹²This document is available online by following the link from its accompanying press release, <http://www.unicef.org/newsline/99pr29.htm>

The first assumption is that the counterfactual child mortality rate would have continued its 1980s average decline linearly over the 1990s. This assumption may be “non-conservative”, but is reasonable for two reasons. First, Iraq’s child mortality rate was still high enough in 1990 to allow a continued linear decline. Second, Iraq’s mortality rate began to decline more quickly after the First Gulf War’s end in 1988. As the decade’s average gives more weight to the war years, it might make the linear decline assumption more reasonable as a peace time counterfactual.

The second assumption is that Iraqi fertility has not declined. The fertility rate allows estimation of the total number of under five year olds; if their mortality rate is known, total deaths can be estimated. This is also a non-conservative assumption as evidence suggests that Iraqi women under sanctions are marrying later and having fewer children, dropping the fertility rate.

The third assumption is that the national under five mortality rate was 50/1000 in 1990. The IST estimates of 43.2/1000 for 1985-89 and 27.8/1000 for early 1990 [10] , which Garfield uses in his own work, may be more accurate. Their use would increase considerably the excess deaths estimate.

2.8.2 Relative performance in the South/Centre and Iraqi Kurdistan

Following the report’s release, a Unicef briefing document on the report appeared [12].¹³ It addressed questions on the survey’s methodology and credibility, Unicef’s role in Iraq, the sanctions generally and the impact of “oil for food”. Its answer to, “How does UNICEF explain the differences in the current levels of child mortality between the autonomous northern governorates and the rest of Iraq?” is that

the difference in the current rate cannot be attributed to the differing ways the Oil-for-Food Program is implemented in the two parts of Iraq. The Oil-for-Food Program is two and a half years old. Therefore it is too soon to measure any significant impact of the Oil-for-Food Program on child mortality over the five year period of 1994 - 1999 as is reported in these surveys.

We need to look at longer-term trends and factors including the fact that since 1991 the north has received far more support per capita from the international community than the south and center of Iraq. Another factor maybe that the sanctions themselves have not been able to be so rigorously enforced in the north as the border is more “porous” than in the south and center of Iraq.

This answer suggests that the factors mentioned in the panel report [17] to explain regional differences, while true, are unlikely to explain more persistent differences.

2.8.3 Consequences

The public response from US and British officials has been to deny or dispute Unicef’s estimate of an additional half million child deaths. At the same time,

¹³Available online at <http://www.cam.ac.uk/societies/casi/info/unicef/000816qa.html>

they affirm that Iraqi Kurdistan results. Apart from these apparently politically motivated (and generally unsubstantiated) equivocations, Unicef’s methodology and data have not been challenged. The leaders of the Unicef study have now published their results in *the Lancet* [1].¹⁴ As they present a longer time series than did the Unicef’s preliminary report [14], I reproduce their results in Table 6 and Figure 1.

	South/Centre		North	
	IMR	U5MR	IMR	U5MR
1994-1999	105	118	53	59
1989-1994	83	100	71	87
1984-1989	46	56	64	80
1979-1984	51	63	73	96
1974-1979	54	67	105	147

Table 6: Infant and child mortality rates

It seems an interesting thought experiment to fit lines to the four series, allowing for a break at 1989. Obviously, as there are only two data points in the second subsample, a line can be fitted without error. For the first subsample I fit a least squares line. The results in presented in Table 7; the numbers indicate the slope per five year observation period. While my analysis is not sensitive enough to know whether the slopes change significantly over the break, the estimated slopes do increase even in Iraqi Kurdistan. This suggests that, while the health situation there may have improved relative to 1989, it could be much better had the first subsample continued: the second subsample brings both an upward jump and then a reduced rate of mortality decrease.

	South/Centre		North	
	IMR	U5MR	IMR	U5MR
1989-1999	+22	+18	-18	-28
1974-1989	-4	-5.5	-20.5	-33.5

Table 7: Changes in infant and child mortality rates

The Unicef excess deaths estimate also allows some evaluation of Iraqi figures. In January 1999, the Iraqi Minister of Health reported that an additional 428,920 children under five “died in view of the armed conflict, the embargo and the military strikes against Iraq.”¹⁵ While this number is clearly too precise to be correct, it is quite close to the Unicef estimate. Furthermore, the estimation period is made is similar to Unicef’s. As this estimate was produced before Unicef even collected its data, it cannot be claimed that the Ministry of Health figure was altered to agree with the Unicef estimate. The Minister of Health reported that the total number of excess deaths for Iraqis of all ages was 1,873,464.

I do not know whether the similarity between Unicef’s and MoH’s under five figures means that the MoH can generally be regarded as a reliable source.

¹⁴q.v. <http://thelancet.com>

¹⁵q.v. <http://www.ArabicNews.com/ansub/Daily/Day/990118/1999011856.html>

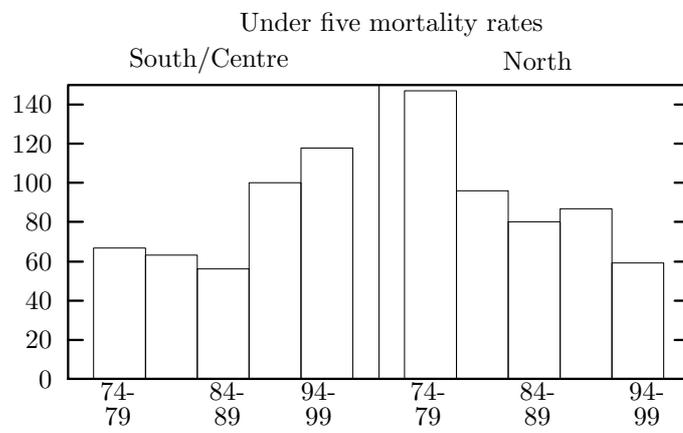
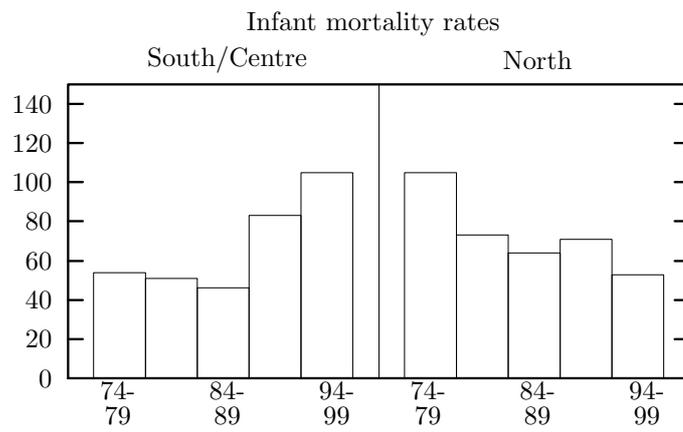


Figure 1: Mortality rates according to Unicef's 1999 survey

2.9 Secretary-General's reports (1997 -)

The UN Secretary-General provides reports every ninety days on the functioning of “oil for food”.¹⁶ These often include updates from UN agencies on, for example, nutritional surveys conducted, mines cleared, etc. They can be rather opaque but they are both the most regular source of reporting on the situation in Iraq and an important political weather vane: issues raised in these reports often become the subject of Security Council debate. They also make recommendations to the Security Council and the government of Iraq on improving the programme’s effectiveness.

Recent verbal introductions of the reports to the Security Council by Benon Sevan, the Executive Director of the Iraq Programme in New York, are found on the website of the Office of the Iraq Programme. These occasionally contain details not present in the reports themselves. For example, when introducing the Phase VI 180 day report on 17 November 1999, Sevan mentioned the UN Development Programme’s estimate that, “Iraq could potentially achieve a 50 per cent increase in electricity supply if these holds were released.”

The OIP website also contains more frequent updates about the functioning of “oil for food”.

Table 8: Secretary-General’s reports on “oil for food”

Phase	type	date	number	highlights
I	90	10/3/97	S/1997/206	As no supplies have reached Iraq this report concentrates on preparations. It explains the roles of the UN observers and agencies.
	180	2/6/97	S/1997/419	Further explanation of UN work. Food distribution is efficient with fewer irregularities reported in South/Centre than in North. Food basket inadequate but improving it might have “little real impact on nutritional status until there were significant improvements in health services, sanitation and access to clean water” (§ 48). Mentions needs for targeted nutrition programmes for the first time (§ 51).

¹⁶q.v. <http://www.un.org/Docs/sc/reports/> to search or <http://www.un.org/Docs/sc/reports/XXXX/sgrepXX.htm> (where XXXX and XX indicate the year). The Secretary-General occasionally reports outside of this 90 day grid. The two-year programme review in April 1999 (S/1999/481) is one example of this.

Phase	type	date	number	highlights
II	90	4/9/97	S/1997/685	§ 14 mentions child ration v. adult ration issue. § 17 explains medical supplies' distribution. Turkish invasion of North slows shipments. Description of monitoring of imports such as chlorine gas. § 41 reports some parents selling infant formula if the ration contains formula inappropriate to their infant's age. Distribution improving in North. Erratic arrival of medical supplies makes planning difficult. Conclusion suggests that GoI decided not to target "vulnerable groups" because Phase II had authorised no additional resources.
	180	28/11/97	S/1997/935	§ 28: long delivery times lead to 60agricultural supplies arriving too late for the summer season. North: hostilities interrupt distribution; UN convoys fired upon. More description of UN observation mechanism. § 72: medical imports "will remain of limited impact if other related areas, such as proper treatment of water supply and sewage, electricity, improved quality of food rations and critical environmental problems, are not adequately addressed." Concludes that "there is an urgent need to contain the risk of a further deterioration" and recommends considering increases in oil sales cap.

Phase	type	date	number	highlights
III	90	4/3/98	S/1998/194	Visit by oil experts to determine Iraq's pumping capacity discussed. Discussions on implementation of SCR 1153 promised.
	180	5/6/98	S/1998/477	Low oil prices and erratic arrivals continues to plague "oil for food". Nutritional status survey in South/Centre finds no improvement over previous year in child malnutrition. GoI implementing a targeted nutrition programme.
IV	90	1/9/98	S/1998/823	Oil sales cap raised but drop in oil price leaves only $\frac{1}{2}$ of the estimated revenue necessary for the enhanced distribution plan. Further explanation of UN observation mechanism. Concerns about 13% account not reimbursing 53% account.
	180	19/11/98	S/1998/1100	Oil prices and planning problems continue to prevent much improvement. Wheat and barley yields increase. Open market food prices increase in South/Centre but decline in North.
V	90	22/2/99	S/1999/187	Sparks "warehousing debate": § 30 reported ; 50% of medical supplies distributed. § 31 attributed this to lack of management tools, poor working conditions, lack of transport, a rigid administrative hierarchy and stockpiling in anticipation of bombing; the UK government used the 50% estimate but ignored the explanations provided, claiming that GoI was intentionally withholding supplies for propaganda reasons.

Phase	type	date	number	highlights
	180	18/5/99	S/1999/573	Continues “warehousing debate”: §§ 33, 34 emphasise “multiple and complex” reasons for distribution bottlenecks, linking them to technical rather than administrative reasons. Reports on the drought.
VI	90	19/8/99	S/1999/896	Begins “holds debate”: §§ 15 - 18 holds concentrated in telecomms, electricity, water & sanitation sectors. §§ 36 - 38 continues “warehousing debate”. Reports on the drought and foot-and-mouth disease epidemic. Concludes that few “policy and operational difficulties” in a complex programme “are the sole responsibility of any one party to resolve.”
	180	12/11/99	S/1999/1162	Starts “dual-use dredger debate”: § 24 mentions the hold on it. § believes that targeted nutrition programme would “require a cash component”. More drought, disease and holds.
VII	90	10/3/00	S/2000/208	Extensive report. §§ 9,10 remind that OFF “should not ... be confused with a development programme ... [as it] was never intended to meet all the humanitarian needs”. Reports on oil industry and needs. § 72 returns to “dual-use dredger” and continues “holds debate”. § 121 notes that humanitarian improvement under OFF has been below expectations. § 205 concludes with belief that SCR 1284’s measures “will not suffice” without “a determined effort ... by all parties concerned to collaborate effectively”

Phase	type	date	number	highlights
	180	1/6/00	S/2000/520	In South/Centre: Unicef nutrition survey of under two year olds “showed little if any change in malnutrition rates” compared to 1997 and 1998. Continues “holds battle”: § 58 reports that holds have: prevented irrigation of a half million previously irrigated hectares and reduced water supply by 40 million cubic meters. § 64: “power generation capacity has further declined”, “undermining efforts in all the other sectors of the humanitarian programme.” In the North: November 1999 nutritional survey indicates decline in malnutrition relative to June 1999 [seasonal effects?] Drought harming agriculture. Continued GoI interference with Northern electrical infrastructure projects.

3 Important non-UN reports

Some credible and important reports by non-UN bodies are presented in chronological order here.

3.1 Harvard Study Team (1991)

In April and May 1991, the Harvard Study Team¹⁷, an independent organisation of ten public health specialists, physicians and lawyers, travelled to Iraq to, “report on the effect of the Gulf crisis on the health and health care of Iraqi civilians”. Part of their report was published in the *New England Journal of Medicine* [8]. The following excerpts are taken from this article.

The team found that thirteen of Iraq’s 20 power stations had been damaged or destroyed during the first days of allied bombing. The two still in operation by the end of the bombing only managed to produce 4% of Iraq’s pre-war output. By May, repairs undertaken by cannibalising spare parts from other plants had brought generation back up to about a quarter of pre-war levels.

The loss of electricity had badly damaged Iraq’s water purification and distribution infrastructure. Iraqis were observed, “collecting water from broken pipes surrounded by pools of murky water or even directly from drainage ditches”. Loss of electricity had also caused Baghdad’s two sewage treatment plants to stop working; one was later destroyed by bombs, spilling raw sewage into the

¹⁷The HST later became the non-governmental organisation, the Center for Economic and Social Rights; q.v. <http://www.cesr.org/>

Tigris River. Blockages in the system meant that, even when electricity was restored, raw sewage

leaked into drainage ditches, formed open pools in residential neighbourhoods, and contaminated water supplies. In neighborhoods in both Basra and Baghdad, whole streets were blocked by pools of foul-smelling water.

Water-borne diseases like cholera, typhoid and gastro-enteritis climbed to epidemic levels. The exact scale of the problem was unknown then as the equipment required to make clinical diagnoses was often lacking and overloaded physicians had to decide between treating patients and keeping proper records. Functioning at a fraction of pre-crisis levels, most hospitals lacked, “even basic medical supplies such as vaccines, antibiotics, anaesthetics and syringes”. Without power, Iraqi physicians performed caesarean section deliveries by lamplight. Fecal contamination was found in 30% of hospital water supplies; the absence of detergent worsened matters. Loss of refrigeration left them without vaccines, leading to a resurgence of preventable childhood diseases such as measles and polio. Children began to suffer from severe forms of malnutrition, such as marasmus and kwashiorkor, unknown to younger Iraqi physicians.

At hospitals where records were available comparisons between 1990 and 1991 revealed a consistent pattern:

a reduction in admissions, an increase in the total number of deaths, and a two- or threefold rise in the hospital mortality rate. The decline in admissions was thought to be due to extreme transportation difficulties caused by lack of fuel ... Iraqi physicians reported that death rates among children in the community were as high or higher than those seen in hospitals.

3.2 International Study Team (1991)

An International Study Team of 87 researchers in agriculture, electrical engineering, environmental science, medicine, economics, child psychology, sociology and public health visited Iraq’s thirty largest cities in all 18 governorates and rural areas throughout the country in August 1991 [10].¹⁸ They were supported by Unicef, the US MacArthur Foundation, the John Merck Foundation and Oxfam-UK. Their study is cited as a source by later UN documents; its medical sections were published in the *New England Journal of Medicine* [2]. The following is taken from both of their reports.

By August 1991, Iraq’s electrical system was back to two thirds of its 1990 peak output but, without the imported supplies required for proper repairs, these were expected to be temporary and to pose increased safety risks.

Only one of the 18 water plants inspected was working at full capacity. This was the result, not so much of the bombing and subsequent civil uprisings, of “lack of spare parts and chlorine”. Raw sewage flowed through streets, where garbage was also accumulating. An estimated half of the public drinking water supply suffered fecal contamination.

¹⁸A summary of this is available at <http://www.pgs.ca/pages/war/iraq/chpgulf91.html>

By late 1991 hepatitis was on the rise, increasing up to 100 times in some areas; southern Iraq suffered from widespread meningitis. Typhoid, cholera and gastro-enteritis were also working their way through Iraq. Older patients faced an increased risk of heart attack as the supply of anti-angina medication had stopped; teenage diabetics lacked insulin; for children with treatable leukaemia, “anti-cancer drugs are largely non-existent”.

The “most significant problem” in the 29 hospitals and 17 community health centres visited was child and infant mortality. The IST public health team interviewed all women between 15 and 49 years old in 9,034 randomly selected households throughout Iraq. Less than 50 women declined to participate in the interviews, producing a sample of 16,076 children. As a large proportion of the Iraqi population had been displaced as a result of the civil uprisings they used information on these groups provided by the United Nations High Commissioner for Refugees to ensure that their sample was representative. These sampling clusters have been used by subsequent UN teams.

2,902 children under five were randomly drawn from this household sample and measured. The IST found 25% stunted, 3.6% wasted and 14% underweight. On the basis of this, they inferred that 900,000 children under five were mal-nourished and 118,000 at increased risk of death. One and two year olds were at greatest risk.

As mortality surveys were conducted with the mothers in these households, child mortality rates could also be calculated. These are presented in Table 9. The IST consequently estimated that an additional 47,000 children under five had died in the year since sanctions’ imposition.

Date	IMR	U5MR
Jan-Aug 1990	22.7	27.8
Jan-Aug 1991	80.0	104.4

Table 9: International Study Team child mortality estimates, 1991

They attribute the increase in mortality to

a complex interaction of factors. There are acute shortages of food and essential medicines throughout Iraq. Lack of clean drinking water and poor sanitation have greatly increased water-borne diseases, such as cholera, typhoid, dysentery, and gastroenteritis.

3.3 Garfield (1999)

In March 1999, Richard Garfield published a report in which he tried to indirectly estimate under five mortality rates in Iraq [6].¹⁹ Some months later, with the publication of Unicef’s results, this would no longer be necessary. At the time that he was writing, though, there had been no independent assessment of child mortality since 1991 [10]. Garfield’s approach was to attempt to infer child mortality from other social indicators upon which it is known to be highly dependent (i.e. adult literacy rates, percentage of children stunted, and percentage of population with access to clean water). These data had been collected throughout Iraq since 1991.

¹⁹q.v. <http://www.cam.ac.uk/societies/casi/info/garfield/dr-garfield.html>

By fitting statistical models under a variety of assumptions, he concluded that the rise in mortality under sanctions:

accounted for between a minimum of 100,000 and a more likely estimate of 227,000 excess deaths among young children from August 1991 through March 1998. About one-quarter of these deaths were mainly associated with the [Second] Gulf war; most were primarily associated with sanctions. Mortality was highest in the southern governorates of the country and lowest in Baghdad. Mortality was higher in rural areas, among the poor, and among those families with lower educational achievement. The increase in mortality was caused mainly by diarrhea and respiratory illnesses. The underlying causes of these excess deaths include contaminated water, lack of high quality foods, inadequate breast feeding, poor weaning practices, and inadequate supplies in the curative health care system. This was the product of both a lack of some essential goods, and inadequate or inefficient use of existing essential goods.

In the light of Unicef's subsequent direct measurement, Garfield believes that his estimates are "extremely, extremely conservative."²⁰ While his numbers have been superseded somewhat by Unicef's, he presented a more thorough analysis as to what lies behind the excess deaths.

3.4 Red Cross/Red Crescent (1999)

In December 1999 the International Committee of the Red Cross and Red Crescent released a special report on Iraq [9]. This made clear its belief that "[as] in war, it is civilians who are the prime victims of sanctions". There was little new information to those familiar with the situation beyond a description of the ICRC's work in Iraq. The report did raise a worrying prospect:

The "oil-for-food" programme, introduced by UN Resolution 986 in 1995, has not halted the collapse of the health system and the deterioration of water supplies, which together pose one of the gravest threats to the health and well-being of the Iraqi civilian population.

While it did not elaborate, the "oil for food" programme is well named: in the South/Centre it has aimed to feed people, not to rebuild infrastructure.

The ICRC also mentioned the drought, noting that 1999 had been the driest year since 1932, with only two inches of rain falling to date, 5% of the annual average. It felt that the:

potential consequences for agriculture and drinking water supplies are devastating... The Iraqi water board has no solution to this alarming situation, and UN Resolution 986 ["oil for food"], which at the best of times provides slow and incomplete solutions to the serious water and sanitation problems in Iraq, does not make provision for such exceptional situations.

²⁰August 1999 telephone conversation.

4 A sense of the humanitarian situation

This section attempts to summarise some of the outlines of the humanitarian situation in Iraq. Much of this impression is based on the documents presented above.

First, it is clear that, although extremely politically repressive, the Iraqi government seems to have been fairly socially generous until the Second Gulf War. There were regional variations in this generosity: Iraqi Kurdistan was not as well off as the rest of the country for a variety of reasons including the First Gulf War, the subsequent Anfal campaign and its historical marginalisation.

The Second Gulf War badly damaged Iraq's civilian infrastructure, perhaps more so than eight years of war with Iran. The 1991 civil war inflicted further damage on Iraq's infrastructure. The combination of this damage, Iraq's dependence on modern technology, and the tight sanctions were particularly harmful.

The onset of "oil for food" seems to have stabilised some indicators in South/Centre Iraq. The more generous treatment of the North, its superior agricultural land, and its UN administration have combined to actually improve some aspects of the situation there, to the point where it is better off than parts of South/Centre Iraq. Baghdad seems to enjoy better treatment than other parts of the country within GoI administration.

In spite of claims by some anglophone politicians, there are no UN reports of resources imported into Iraq under "oil for food" being diverted or exported. Furthermore, there is no UN evidence of Iraqi farmers exporting their produce. This sort of behaviour is to be expected, though, as "oil for food" does not allow produce from South/Centre Iraq to be purchased. Iraqi farmers must therefore compete with essentially free imports if they wish to sell domestically. One UN employee thinks it more likely that Iraqi farmers will simply take their land out of production; he admits that, as the UN does not monitor abandoned farms, he has no evidence of this. When there are problems in the implementation of "oil for food" within Iraq administrative and logistical limitations seem to play a larger role than political constraints.²¹ Indeed, it is initially surprising to read of the efficiency and equity with which "oil for food" resources are distributed by the GoI.

While commodities such as food and medicine are more abundant now in Iraq than earlier in the decade there serious concern about further deterioration in infrastructure seems to persist. The recent oil experts' report describes in chilling detail the collapse of that industry under a decade without investment [18]. Other sectors are unlikely to be different.

One that has concerned Hans von Sponeck particularly is education. In a farewell UN press conference in New York on 1 March, he explained that, "Education is the key concern that I have." Displaying photographs of children sitting on the ground in bare classrooms, he declared, "Here is the new generation of Iraqis prepared for leadership." The sanctions had led, he said, to "an intellectual embargo". He told of how some "parents sent their children out in the morning and refused to allow them to return home until they had earned

²¹There is certainly a long list of political constraints, though. For example, the Iraqi government refuses to allow NGOs working in Iraqi Kurdistan to work in South/Centre Iraq as well. It is also suspected of attempting to order supplies from sympathetic companies at inflated rates, in order to launder some of the price back to the regime.

one and a half dollars for the day.”

There is growing concern of the effects of a decade of deprivation and isolation on Iraq’s previously cosmopolitan society. Iraq’s middle class has crumbled and the political clout of its tribes has increased substantially.

One potentially important area about which I know nothing is that of the possible increase in cancer rates, which some feel to be linked to Coalition Forces’ use of depleted uranium. The US Army’s former Depleted Uranium Project Director, Dr Doug Rokke, believes the link to be well substantiated [3, pp. 121-144].

High oil prices do offer some hope of improvement but there is a consensus in the UN documents on the ultimate adequacy of “oil for food”. The most recent Secretary-General’s report concludes by reminding us that the programme “was never intended as a substitute for the resumption of normal economic activity, and cannot be expected to address the whole range of needs of the Iraqi population”. The Security Council has also endorsed the view that continued sanctions on Iraq would lead to continued civilian deprivation when it passed SCR 1284 in December. Paragraph 33 of that resolution promises to consider a suspension of the sanctions “with the fundamental objective of improving the humanitarian situation in Iraq”.

A Security Council Resolutions

The past decade has seen 57 resolutions passed on Iraq, the majority relating to its invasion of Kuwait and sequelae.²² These are listed below.²³ Until April 1991 they primarily address Iraq’s invasion of Kuwait and counter-measures to this. SCR 687 (3 April 1991) marks a turning point, shaping the post-war sequence of resolutions.

One category of post-war resolutions are those governing Iraq’s oil sales, originally offered under SCR 706 and 712, succeeding under SCR 986 and enhanced under SCR 1153. Another category of post-war resolutions comments on the progress of the disarmament tasks identified in SCR 687. While some of them are technical (e.g. SCR 1051, which outlines the “dual use” mechanism) the bulk of these resolutions highlight the government of Iraq’s refusals to co-operate with weapons inspectors. There is one such resolution in each of 1991 and 1996, then three in each of 1997 and 1998. Other resolutions express concern about internal repression in the wake of the civil war (e.g. SCR 688), comment on border demarcation with Kuwait (ending with SCR 833 in 1993) or military build-ups along that border (e.g. SCR 949).

Table 10: Security Council Resolutions on Iraq since 1990

SCR	Date	Description
651	29/3/90	Iran
660	2/8/90	Condemns Iraqi invasion of Kuwait and demands Iraq’s immediate and unconditional withdrawal.
661	6/8/90	Imposes comprehensive sanctions on Iraq and establishes sanctions committee to monitor them.

²²A 58th was passed on 8 June 2000 (SCR 1302).

²³q.v. <http://www.cam.ac.uk/societies/casi/info/scriraq.html>

SCR	Date	Description
662	9/8/90	Decides that Iraq's annexation of Kuwait is "null and void".
664	18/8/90	Demands that Iraq release "third state nationals".
665	25/8/90	Imposes shipping blockade by calling for the use of "such measures ... as may be necessary" to enforce the maritime embargo.
666	13/9/90	"Decides [to] ... keep the situation regarding foodstuffs ... under constant review", giving the Security Council responsibility for determining when "humanitarian circumstances" had arisen.
667	16/9/90	Protests "the closure of diplomatic and consular missions in Kuwait".
669	24/9/90	Asks the Sanctions Committee to consider requests for economic assistance from countries harmed by the sanctions on Iraq.
670	25/9/90	Strengthens and clarifies the embargo; confirms that it applies to aircraft.
671	27/9/90	Iran
674	29/10/90	"Reminds Iraq that ... it is liable for any loss ... as a result of the invasion ... of Kuwait".
676	28/11/90	Iran
677	28/11/90	Concerned by Iraq's attempts to "alter the demographic composition of ... Kuwait and to destroy the civil records".
678	29/11/90	"Authorizes Member States ... to use all necessary means" to bring Iraq into compliance with previous Security Council resolutions if it did not do so by 15/1/91.
685	31/1/91	Iran
686	2/3/91	Affirms the "independence, sovereignty and territorial integrity of Iraq" and sets out terms for a cease-fire.
687	3/4/91	Begins cease-fire, establishes Unscm, extends sanctions and, in paragraphs 21 and 22, provides ambiguous conditions for lifting or easing them. Described as a "Christmas tree", because "so much was hung on it".
688	5/4/91	"Condemns the repression of the Iraqi civilian population" in the post-war civil war and "[d]emands that Iraq ... immediately end this repression".
689	9/4/91	Iraq-Kuwait . Approves the Secretary-General's report on the United Nations Iraq-Kuwait Observation Mission.
692	20/5/91	Establishes the UN Compensation Commission and asks the Secretary-General to indicate the maximum possible level of Iraq's contribution to the Compensation Fund.

SCR	Date	Description
699	17/6/91	Approves the Secretary-General's plan for Unscom and the IAEA and asks for support from Member States.
700	17/6/91	Approves the Secretary-General's guidelines on an arms and dual-use embargo on Iraq and calls upon states to act consistently with them.
705	15/8/91	"Decides that ... compensation to be paid by Iraq ... shall not exceed 30 per cent of the annual value of the exports".
706	15/8/91	Decides to allow emergency oil sale by Iraq to fund compensation claims, weapons inspection and humanitarian needs in Iraq.
707	15/8/91	Condemns Iraq's non-compliance on weapons inspections and demands that Iraq move into compliance.
712	19/9/91	Rejects the Secretary-General's suggestion that at least \$2 billion in oil revenue be made available for humanitarian needs; instead allows total sale of \$1.6 billion. Eventually rejected by Government of Iraq.
715	11/10/91	Approves the plans of Unscom and the IAEA (including long term monitoring) and calls for cooperation with them.
773	26/8/92	Responds to a report on progress by the UN Iraq-Kuwait Boundary Demarcation Commission and notes that the Commission "is not reallocating territory between Kuwait and Iraq".
778	2/10/92	Deplores Iraq's refusal to implement SCRs 706 and 712 and recalls Iraq's liabilities. Takes steps to transfer funds (including Iraqi assets overseas) into the UN account established to pay for compensation and humanitarian expenses.
806	5/2/93	Arms UNIKOM to prevent border incursions by Iraq.
833	27/5/93	"Welcomes ... the successful conclusion of the work of the [Boundary Demarcation] Commission".
899	4/3/94	Allows compensation to private Iraqi citizens who lost assets to the boundary demarcation process.
949	15/10/94	"Condemns recent military deployments by Iraq in the direction of ... Kuwait", demands an immediate withdrawal and full co-operation with Unscom.
986	14/4/95	New "oil for food" resolution, allowing \$1 billion in oil sales every 90 days. Eventually accepted by the Government of Iraq and Phase I begins on 10/12/96.
1051	27/3/96	Establishes mechanism for long-term monitoring of potentially "dual use" Iraqi imports and exports, as called for by SCR 715.

SCR	Date	Description
1060	12/6/96	On Iraq's refusal to allow access to sites designated by the Special Commission.
1111	4/6/97	Begins Phase II of "oil for food", to start on 8/6/97.
1115	21/6/97	"Condemns the repeated refusal of the Iraqi authorities to allow access to sites" and "[d]emands that [they] cooperate fully" with Unscm. Suspends the sanctions and arms embargo reviews (paragraphs 21 and 28 of SCR 687) until the next Unscm report and threatens to "impose additional measures on those categories of Iraqi officials responsible for the non-compliance".
1129	12/9/97	Alters timing of permitted Phase II oil sales in response to Iraqi government's refusal to sell oil until its Distribution Plan was approved by the UN.
1134	23/10/97	Echoes SCR 1115 but now threatens travel ban on Iraqi officials if non-cooperation continues. Sanctions reviews again delayed.
1137	12/11/97	Rejects Iraqi government's attempt to impose conditions on its cooperation with Unscm, imposes travel ban on officials to be lifted when full cooperation resumes. Sanctions review to be in 4/98 if cooperation has been restored.
1143	4/12/97	Begins Phase III of "oil for food", to start on 5/12/97 and welcomes the Secretary-General's intention to submit a supplementary report on possible improvements in the "oil for food" programme.
1153	20/2/98	Agrees to increase the cap on permitted Iraqi oil sales to \$5.256 billion per Phase once the Secretary-General has approved an "enhanced distribution plan" for the new revenue. Recognises the importance of infrastructure and project-based purchases. Phase IV eventually begins on 30/5/98.
1154	2/3/98	Thanks the Secretary-General for his successful mission to Baghdad, which secured increased Iraqi government cooperation on weapons inspections and put off US and British bombing threats.
1158	25/3/98	Continues Phase III but under the enhanced provisions of SCR 1153.
1175	19/6/98	Gives Iraq permission to apply to import up to \$300 million of oil industry spare parts this Phase to allow it to increase its oil production to the cap set in SCR 1153.

SCR	Date	Description
1194	9/9/98	“Condemns the decision by Iraq ... to suspend cooperation with [Unscm] and the IAEA”, demands that the decisions be reversed and cancels/10/98 scheduled sanctions review.
1205	5/11/98	Echoes SCR 1194 and alludes to the threat to “international peace and security” posed by the Government of Iraq’s non-cooperation.
1210	24/11/98	Begins Phase V of “oil for food”, to start on 26/11/98.
1242	21/5/99	Begins Phase VI of “oil for food”, to start on 25/5/99.
1266	4/10/99	Allows an additional \$3.04 billion in oil sales to offset deficits during previous Phases and (possibly) to slow the rise in oil prices.
1275	19/11/99	Extends Phase VI to 4/12/99 due to wrangling over SCR 1284.
1280	3/12/99	Extends Phase VI to 11/12/99 due to wrangling over SCR 1284.
1281	10/12/99	Begins Phase VII of “oil for food”, to start on 12/12/99. The report requested in paragraph 9 is S/2000/26 .
1284	17/12/99	Replaces Unscm with Unmovic, demands Iraqi cooperation on prisoners of war, alters the “oil for food” programme, and discusses the possible suspension of sanctions in ambiguous terms.
1293	31/3/00	Doubles permitted oil spare part imports.

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