

By Eleanor Bader

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It's said that wars never end for those whose lives they touch, and it's true. Take Iraq—a place that surely proves the maxim that war is not healthy for children or other living things.

To wit: Despite the fact that the U.S. war with Iraq came to a close on December 18, 2011, families in numerous Iraqi cities are now living with a dramatic rise in birth defects and cancer from chemical weapons that were detonated near homes, schools, and playgrounds during the nearly seven-year conflict.

The cities of Babil, Basra, Falluja, Haweeja, and Najaf are cases in point. Let's start with Haweeja, which is 30 miles south of Kirkuk and was home to Forward Operating Base (FOB) McHenry throughout the war. Yifat Susskind is executive director of [MADRE](#), a New York-based international women's human rights organization. Susskind says that Haweeja's skyrocketing health problems came to the group's attention when members of Organization of Women's Freedom in Iraq (OWFI)—MADRE's partner organization in that country—began going house to house to talk about the need to establish a shelter for rape survivors.

"When they arrived, they noticed that almost every family they visited had a child under the age of 10 with stunted or paralyzed limbs, or who had been born without fingers or toes," Susskind says. "And they found teens who had been toddlers at the time of the U.S. invasion and were now sick with cancer. The OWFI activists were shocked and wanted to know what was going on, why this was happening."

What they uncovered points directly to U.S. culpability. Peace Alliance Winnipeg, for one, [reports](#) that beginning in 2004, the United States "tested all types of explosive devices on Iraqis—thermobaric weapons, white phosphorus, depleted uranium."

The upshot, discussed in *The International Journal of Environmental Research and Public Health*, has been a monumental increase in cancer, leukemia, malignant brain tumors, and infant mortality. In Falluja alone, *The Journal* [concludes](#) that the rate of life-threatening illnesses and birth defects is “significantly greater than those reported for survivors of Hiroshima and Nagasaki in 1945.”

Yes, you read that correctly—greater than the damage of an atomic bomb, a fact corroborated by a 2009 article in *The Guardian* newspaper. The article [described](#) a 38-fold increase in the number of cases of leukemia and a 15-fold increase in the number of newborns born with deformities during the first five years of the war, including limb malformations, neural tube defects, heart and vision anomalies, and a baby born with two heads.

Not surprisingly, the miscarriage rate throughout the country has mushroomed, and tumor clusters have been recognized in Basra and Najaf, intense battle zones where so-called modern munitions were heavily used.

In cities like Haweeja, where U.S. soldiers at FOB McHenry routinely detonated explosive devices, it was not uncommon for children to play, and for shepherds and sheep to walk, in grass-covered fields that were adjacent to the base. As they did so, they often tracked a fine dust containing the residue of depleted uranium (DU) from place to place. Microscopic particles from the blasts were spread by wind, and subsequently inhaled. These particles found their way into groundwater and soil, polluting the air and contaminating virtually everything they touched.

DU is, of course, lethal—scientists estimate that it can remain radioactive for 4.5 billion years—but it remains in use because it increases the penetration capacity of projectiles. DU is blamed for the cancer spike in the city of Babil, south of Baghdad, where [the number of diagnosed cases](#) went from 500 in 2004 to 9,082 in 2009.

These facts point to a crisis of enormous proportions. At the same time, MADRE’s Susskind

makes clear that Iraq's problems are compounded by poverty and lack of access to affordable health care—as well as by pervasive superstitions about the causes of illness. Widely held fallacies feed bias against the disabled, she says, making the task of organizing especially grueling.

"Iraq is a place where none of the work that has been done in other countries to promote disability rights has occurred, so there is still a lot of discrimination against the disabled," Susskind says.

"This gives us the tragic opportunity to organize to upset the stigma, to break down negative attitudes that exist, and to do community-based peer counseling to help parents overcome the fear, guilt, anger, and resentment they feel. The needs in the aftermath of this war are so huge."

Susskind says that MADRE is working with OWFI on the three-pronged strategy that for now is exclusively focused on Haweeja: To raise \$50,000 for direct services to begin meeting the immediate and long-term needs of the population that has been affected; to do a comprehensive public-health survey to give us hard data on the extent and range of the problems; and to explore a legal challenge to demand U.S. accountability for the crisis."

The challenge, Susskind continues, is made even more daunting by the fact that there is only one health clinic in Haweeja, a city of approximately 100,000 people. "We are studying models that have been used in other places with limited access to mental and physical health services," she says. "With OWFI we're trying to find community-based models that can train moms to help their kids, get medical aid to people, and enhance the population's awareness of the correlation between illness and the fact that their city was used as a munitions dumping ground. We want the people of the United States to understand that this crisis is a direct result of the U.S. military's disregard for the health of the people in Iraq."