# Mental Health and Human Rights under war conditions: Lessons from Iraq

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# <u>IRAQ</u>

- The surface area of Iraq is 435 000 km2.
- The population is estimated at 25 million, 71% live in urban areas.
- Baghdad (The Capital) with an estimated population of 6 million accounted for 24 % of the population.
- The majority of Iraqis are Muslims (95%) with a small minority of Christians and others.
- The percentage populations below 15 years of age and above 65 were 42.6% and 3.3%, respectively.

# Map of Iraq



# The Multiple Wounds of Iraq

Iraq is one of the multiply wounded countries as it has been through three major wars:

- 1- Iraqi Iranian war from 1980 1988 resulting in severe blood shed on both sides in addition to the enormous financial cost of war.
- 2 Gulf war in 1991 after the Iraqi invasion of Kuwait resulting in another round of sufferings of Iraqi people and severe destruction to the infrastructure.
- 3 The occupation of Iraq war 2003 to topple down Saddam Hussein and search for weapons of mass destruction which were never found.

Economic sanctions were imposed on the country by the UN in 1990, after the Iraqi invasion of Kuwait, these sanctions have affected the lives of Iraqi people severely, due to shortage of medicines and food.

### The Cost of War

### The War in Iraq Costs the United States

\$449,537,293,338

the amount of money spent by the US Government to finance the war, based on estimates from the Congressional Budget Office.

### **Instead**

- The US could have fully funded global anti-hunger efforts for 10 years
- or could have ensured that every child in the world was given basic immunizations for **one century**.
- or could have fully funded world-wide AID programs for 40 years.
- or could have hired 7,778,972 additional public school teachers for one year.
- or could have insured 269,297,419 children for one year.
- or could have provided 21,172,328 students four-year scholarships at public universities.
- or could have built Three million additional housing units.



94% of soldiers in Iraq reported receiving small-arms fire. In addition, 86% of soldiers in Iraq reported knowing someone who was seriously injured or killed, 68% reported seeing dead or seriously injured Americans, and 51% reported handling or uncovering human remains.

77%, of soldiers deployed to Iraq reported shooting or directing fire at the enemy, 48% reported being responsible for the death of an enemy combatant, and 28% reported being responsible for the death of a noncombatant.

# Costs to Iraq

# A. HUMAN COSTS Death and injury among civilians Effects of Depleted Uranium Psychological impact B. ECONOMIC COSTS Unemployment Iraq's Oil Economy C. HUMAN RIGHTS COSTS D. SOCIAL COSTS Forced Migration Health Infrastructure

Rise in Crime

Education

## The Death Toll Among Iraqi Civilians

- The impact of war on health is usually assessed primarily in terms of its most direct and visible effects – death and injury through conflict.
- The death toll among civilians in Iraq from April 2003 till now is estimated to be more than 350 thousand but accurate statistics are lacking.
- The recent study of the John Hopkins Bloomberg School of Public Health group published in the Lancet in October 2006 indicated that as of July 2006, there have been 654 965 (392 979 – 942 636) excess Iraqi deaths as a consequence of the war, which corresponds to 2.5% of the population in the study area.
- of post-invasion deaths, 601 027 were due to violence, the most common cause being Gunfire.

# Identifying bodies of executed people



# Identifying bodies of executed People



# Effects of Depleted Uranium

- U.S. and British forces used about 2,000 tons of weaponry made from the toxic and radioactive metal during the March 2003 bombing campaign.
- Many scientists blame the far smaller amount of DU weapons used in the 1991 Gulf War for illnesses among U.S. soldiers, as well as a sevenfold increase in child birth defects and cancer in southern Iraq.
- So the consequences of that huge amount of Depleted Uranium will definitely appear later in various forms from increase in the rate of cancer among adults and children to some ill-defined ailments among population living very close to the polluted areas.

# <u>MENTAL HEALTH</u>

### Mental health facilities

- There are two psychiatric hospitals in Baghdad ( AI - Rashad Mental Hospital & Ibn Rushd Psychiatric Hospital ) in addition to three psychiatric units in general hospitals
- There are psychiatric units in general hospitals in other governorates in Iraq and each is staffed with one or two psychiatrists.
- The total number of psychiatric beds in the country 1500 bed.

# Mental health human resources

- There are 45 psychiatrists still practicing in Iraq serving 25 million population (more than 60 psychiatrists left the country because of the deteriorating situation).
- There are few clinical psychologists working in psychiatric hospitals as most of them are based at university departments of Psychology.
- Specalised psychiatric services for children and for elderly are lacking in Iraq.

The number of people who are in need for assistance due to mental health issues is very high, but the helping capacity is limited and can cover only a small proportion of the needs.

# The Collapse of Mental Health Services

The history of mental health in Iraq has been checkered by starts and stops, often the result of political instability. General medical and mental health care continue to deteriorate rapidly, and many services are on the brink of collapse while others are now nonexistent.

Iraq, once known as an intellectual leader in the region in providing neighboring countries with financial support and educational resources, has sadly been reduced to a desperate recipient of aid.

# The Collapse of Mental Health Services

- In anticipation of the war early in 2003, mental health services were reduced to the minimum, as the focus was mainly on preparing the health services to receive and deal with mass casualties, so practically all hospitals were evacuated and only emergency cases were admitted.
- Mental health services collapsed completely on the day of the fall of the ex-regime most hospitals in the country were looted including Al-Rashad Mental Hospital, and all patients were forced to leave the hospital, unfortunately some of them died on the streets and others are still missing, but the majority were returned to hospital about six months later.
- The immediate phase after the liberation of Iraq was very chaotic, there was no government, and no functioning Ministry of Health, we had to rely on donations of food, medicines and safe water for drinking from relief agencies to our hospitals to keep them running and for about two months mental health professionals had to work without salaries and had to defend their hospitals against looters.

### Post Traumatic Stress Disorder (PTSD)

- There is no such thing as a universal response to war and highly stressful events, as not everybody who is exposed to severe trauma will develop symptoms of stress reaction, and the majority of those who develop the acute stress reaction will get better in few months while a minority will continue to suffer.
- Sufferers with PTSD are not just passive victims but are active citizens.
- Some NGO's opened centers to treat PTSD in Baghdad, but they failed to attract more than a hundred person a year, because most people relied on helping themselves, helping each other and getting support from their religion and the society, at the same time avoiding to be stigmatized or labeled as mentally ill.

The rate of PTSD in Iraq among populations studied was between 32 - 50 %, and that around 40% of the population have suffered from more than four trauma events in the past five years.

 PTSD is associated with long-term physical health problems. In terms of research on civilians exposed to war, there is evidence from epidemiological studies that exposure to war events is associated with higher mortality rates.

# Other Psychiatric Disorders

- Depression and anxiety were more prevalent than PTSD in most population samples studied in Iraq in the postwar period, because Iraqi people are living under continuous stress and fears about their own safety; fear of being shot at by the Americans any minute, fear of being killed in crossfire between the resistance and the Americans and fears of car-bombs that spare no place or time.
- Disruption in public services ( electricity, safe water for drinking and health services ) is another source of stress to the population.

Patients with major mental illnesses (Schizophrenia & Bipolar illness) have suffered more relapses than usual over the past 10 years due to shortage of essential drugs for treatment and maintenance treatment of these disorders like Depot injections and Lithium, lack of rehabilitation programs for those patients and shortage of beds.

One important clinical observation is the increase in the rate of suicide in the postwar period and the use of violent methods to commit suicide ( pistols and guns ) because these weapons are available to most people and sold out at low prices .

# Postwar Psychosocial Phenomena

- There are some psychosocial phenomena that appeared after the war, these included:
  - 1 increased drug and alcohol misuse.
  - 2 high rates of organized crimes (armed robberies, kidnapping and murder)
    - 3 Forced Migration.

# **Drug & Alcohol Misuse**

- Drug misuse was confined to anxiolytics & sedatives, which were mainly abused by adolescents.
- Soon after the end of the war in April 2003 there was an epidemic of drug and alcohol misuse, which were sold out on the streets day and night to anybody who could afford to buy them.
- The main reasons for this epidemic was loss of law and order, looting of drug depots of the MOH and of most hospitals.
- Few months later another wave of misuse appeared, this time it was mainly Cannabis and Opiates which were nearly new to local people, as the law was very strict on trafficking of these drugs and capital punishment was the rule for drug dealers.

# Drug & Alcohol Misuse cont'd

- The number of patients with drug or alcohol dependence problems attending the drug dependence centre in Baghdad is increasing.
- Their number in 2005 was nearly double than that in the year before the war.

### organized crimes in the postwar period

- These include armed robberies, kidnapping and murders which increased to significant level and endangered the lives of millions of people in Iraq, the main reasons were the loss of law and order in the first few months after the (liberation) of Iraq, the inability of the interim governments to deal with these issues and lack of interest among the Americans to help securing safety for people.
- Kidnapping of adults or even for children is mainly for the sake of ransom, but paying the ransom is not a guarantee that the person is going to be released or remain alive.
- Doctors ranked first on the list of targets for kidnapping, that is why great numbers are now leaving the country to a safer place in neighboring countries.

# organized crimes in the postwar period

This saddening violence extends to professionals and

academics as well, who are as vulnerable to attacks as patients. There have been numerous cases of psychiatrists who have been killed, kidnapped, or threatened with their lives unless they left the country

 These vicious and terrifying Incidents continue to increase and qualified professionals are fleeing the country in large numbers. As a consequence, the university psychiatric departments and the psychiatric postgraduate training program are suffering from a lack of teachers and leaders

# Forced Migration

Since 2003, an estimated Four million people have fled Iraq for neighbouring countries, mainly Jordan and Syria, but also Egypt, Lebanon, Iran, Turkey, and the Gulf countries.

Nearly all of them are seeking refuge from the deteriorating security situation and living conditions in many areas of Iraq.

Following the Samarra Holy Shrines bombing on February 22, 2006, there has seen an increase in sectarian violence in Iraq, and a resultant surge in the numbers of internally displaced people, as well as refugees seeking asylum in the region.

Even though neighbouring countries, such as Jordan and Syria, have taken in the lion's share of refugees and have participated in recent UN-sponsored dialogue in Geneva and Cairo on the plight of the Iraqi refugees, both governments remain constrained in their responses and the support they feel able to extend.

A much larger country than Jordan, Syria is better equipped to provide access to basic services. Neither country is a signatory to the 1951 UN Refugee Convention or its subsequent protocols. Therefore, neither is under any legal obligation to recognise or confer refugee status.

In Jordan the population of Iraqis is estimated to be around 700,000. This figure is however contested and, at the time of writing, a study commissioned by the GoJ and implemented by a Norwegian Agency FAFO in partnership with the Office of Statistics, is hoped give greater clarity in the next month or so.

The GoJ and the Jordanian population at large have, over the last three years, extended enormous generosity to people arriving from Iraq.

Since the conflict in Iraq, and more recently since the influx of refugees to Jordan, the humanitarian community's efforts have focused on providing assistance to the most needy and vulnerable refugees.

Most INGOs currently operating in Jordan have set criteria for the targeted population, which focus on women & children as the 'vulnerable' and the most targeted for service provision and material assistance. Much of this assistance is delivered in new or pre-existing centres, including those that provide health care or psycho-social services.

### The impact on children and young people

• The impact on children and young people is severe, but before going into the details, let us have a look at more serious effects in terms of severe injuries and deaths of innocent children in the postwar period ......

There are more than 300 child prisoners, some as young as 9, are being held by U.S. forces in Iraqi jails on the suspicion of being involved in terrorist activities.

Among those there are many who were physically and sexually abused in prisons, some of their stories were publicized by international news agencies.















- The impact on children and adolescents can be summarized in the following consequences:
- increase in rate of behavioral disturbances like regressive behavior e.g. bedwetting in a child who was previously dry, stammering & thumb sucking
- school refusal which in most cases is fear of the real danger of explosions.
- multiple fears ( fear of arms and fear of darkness ) .
- enhanced startle reactions.
- conduct disorders.

## Reaction of People to Occupation

- Occupation is intimidating to the whole nation, it is degrading to local people, that is why the majority of Iraqis want the Americans out of the country.
- Most American soldiers are not trained or educated enough on how to deal with Iraqi people, to understand their culture and religion and to avoid touching very sensitive issues.
- This lack of experience has led to angry and aggressive reactions among local people who felt that their dignity and values were violated.













In 2004, the entire world heard the stories and saw pictures of the abuse of detainees in Abu Ghraib prison, but these stories were a tip of an iceberg of widespread practice in all Iraqi prisons and not in Abu Ghraib only.

## Human Rights Violations: Abu Ghraib















## Abuse of Detainees in Abu Ghraib Prison

US army physicians assisted in the design of interrogation strategies, including sleep deprivation, sensory deprivation, stress positions, presence of working dogs....etc.

These measures are designed to increase fear and distress among detainees as a means to obtaining intelligence.

Such practices are in clear violation of the Third Geneva Convention, which states that NO physical or mental torture, nor any other forms of coercion may be inflicted on prisoners of war to secure from them information of any kind whatever.

## THANK YOU