The Secret Behind the Sanctions
How the U.S. Intentionally Destroyed Iraq’s Water Supply
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Over the last two years, I’ve discovered documents of the Defense Intelligence Agency proving beyond a doubt that, contrary to the Geneva Convention, the U.S. government intentionally used sanctions against Iraq to degrade the country’s water supply after the Gulf War. The United States knew the cost that civilian Iraqis, mostly children, would pay, and it went ahead anyway.

The primary document, "Iraq Water Treatment Vulnerabilities,"[1] is dated January 22, 1991. It spells out how sanctions will prevent Iraq from supplying clean water to its citizens.

"Iraq depends on importing specialized equipment and some chemicals to purify its water supply, most of which is heavily mineralized and frequently brackish to saline," the document states.

"With no domestic sources of both water treatment replacement parts and some essential chemicals, Iraq will continue attempts to circumvent United Nations Sanctions to import these vital commodities. Failing to secure supplies will result in a shortage of pure drinking water for much of the population. This could lead to increased incidences, if not epidemics, of disease."

The document goes into great technical detail about the sources and quality of Iraq’s water supply. The quality of untreated water "generally is poor," and drinking such water "could result in diarrhea," the document says. It notes that Iraq’s rivers "contain biological materials, pollutants, and are laden with bacteria. Unless the water is purified with chlorine, epidemics of such diseases as cholera, hepatitis, and typhoid could occur."

The document notes that the importation of chlorine "has been embargoed" by sanctions. "Recent reports indicate the chlorine supply is critically low."

Food and medicine will also be affected, the document states. "Food processing, electronic, and, particularly, pharmaceutical plants require extremely pure water that is free from biological contaminants," it says.

The document addresses possible Iraqi countermeasures to obtain drinkable water despite sanctions.

"Iraq conceivably could truck water from the mountain reservoirs to urban areas. But the capability to gain significant quantities is extremely limited," the document states.

"The amount of pipe on hand and the lack of pumping stations would limit laying pipelines to these reservoirs. Moreover, without chlorine purification, the water still would contain biological pollutants. Some affluent Iraqis could obtain their own minimally adequate supply of good
quality water from Northern Iraqi sources. If boiled, the water could be safely consumed. Poorer Iraqis and industries requiring large quantities of pure water would not be able to meet their needs."

The document also discounted the possibility of Iraqis using rainwater. "Precipitation occurs in Iraq during the winter and spring, but it falls primarily in the northern mountains," it says. "Sporadic rains, sometimes heavy, fall over the lower plains. But Iraq could not rely on rain to provide adequate pure water."

As an alternative, "Iraq could try convincing the United Nations or individual countries to exempt water treatment supplies from sanctions for humanitarian reasons," the document says. "It probably also is attempting to purchase supplies by using some sympathetic countries as fronts. If such attempts fail, Iraqi alternatives are not adequate for their national requirements."

In cold language, the document spells out what is in store:

"Iraq will suffer increasing shortages of purified water because of the lack of required chemicals and desalination membranes. Incidences of disease, including possible epidemics, will become probable unless the population were careful to boil water."

The document gives a timetable for the destruction of Iraq’s water supplies.

"Iraq’s overall water treatment capability will suffer a slow decline, rather than a precipitous halt," it says. "Although Iraq is already experiencing a loss of water treatment capability, it probably will take at least six months (to June 1991) before the system is fully degraded."

This document, which was partially declassified but unpublicized in 1995, can be found on the Pentagon’s web site at www.gulflink.osd.mil. (I disclosed this document last fall. But the news media showed little interest in it. The only reporters I know of who wrote lengthy stories on it were Felicity Arbuthnot in the Sunday Herald of Scotland, who broke the story, and Charlie Reese of the Orlando Sentinel, who did a follow-up.)

Recently, I have come across other DIA documents that confirm the Pentagon’s monitoring of the degradation of Iraq’s water supply. These documents have not been publicized until now.

The first one in this batch is called "Disease Information," and is also dated January 22, 1991. [2] At the top, it says, "Subject: Effects of Bombing on Disease Occurrence in Baghdad." The analysis is blunt:

"Increased incidence of diseases will be attributable to degradation of normal preventive medicine, waste disposal, water purification/distribution, electricity, and decreased ability to control disease outbreaks. Any urban area in Iraq that has received infrastructure damage will have similar problems."

The document proceeds to itemize the likely outbreaks. It mentions "acute diarrhea" brought on by bacteria such as E. coli, shigella, and salmonella, or by protozoa such as giardia, which will affect "particularly children," or by rotavirus, which will also affect "particularly children," a phrase it puts in parentheses. And it cites the possibilities of typhoid and cholera outbreaks.
The document warns that the Iraqi government may "blame the United States for public health problems created by the military conflict."

The second DIA document, "Disease Outbreaks in Iraq," is dated February 21, 1990, but the year is clearly a typo and should be 1991. It states: "Conditions are favorable for communicable disease outbreaks, particularly in major urban areas affected by coalition bombing." It adds:

"Infectious disease prevalence in major Iraqi urban areas targeted by coalition bombing (Baghdad, Basrah) undoubtedly has increased since the beginning of Desert Storm... Current public health problems are attributable to the reduction of normal preventive medicine, waste disposal, water purification and distribution, electricity, and the decreased ability to control disease outbreaks."

This document lists the

"most likely diseases during next sixty-ninety days (descending order): diarrheal diseases (particularly children); acute respiratory illnesses (colds and influenza); typhoid; hepatitis A (particularly children); measles, diphtheria, and pertussis (particularly children); meningitis, including meningococcal (particularly children); cholera (possible, but less likely)."

Like the previous document, this one warns that the Iraqi government might "propagandize increases of endemic diseases."

The third document in this series, "Medical Problems in Iraq," is dated March 15, 1991. It says:

"Communicable diseases in Baghdad are more widespread than usually observed during this time of the year and are linked to the poor sanitary conditions (contaminated water supplies and improper sewage disposal) resulting from the war. According to a United Nations Children’s Fund (UNICEF)/World Health Organization report, the quantity of potable water is less than 5 percent of the original supply, there are no operational water and sewage treatment plants, and the reported incidence of diarrhea is four times above normal levels. Additionally, respiratory infections are on the rise. Children particularly have been affected by these diseases."

Perhaps to put a gloss on things, the document states, "There are indications that the situation is improving and that the population is coping with the degraded conditions." But it adds: "Conditions in Baghdad remain favorable for communicable disease outbreaks."

The fourth document, "Status of Disease at Refugee Camps," is dated May 1991. The summary says, "Cholera and measles have emerged at refugee camps. Further infectious diseases will spread due to inadequate water treatment and poor sanitation."

The reason for this outbreak is clearly stated again.

"The main causes of infectious diseases, particularly diarrhea, dysentery, and upper respiratory problems, are poor sanitation and unclean water. These diseases primarily afflict the old and young children."

The fifth document, "Health Conditions in Iraq, June 1991," is still heavily censored. All I can make out is that the DIA sent a source
"to assess health conditions and determine the most critical medical needs of Iraq. Source observed that Iraqi medical system was in considerable disarray, medical facilities had been extensively looted, and almost all medicines were in critically short supply."

In one refugee camp, the document says, "at least 80 percent of the population" has diarrhea. At this same camp, named Cukurca, "cholera, hepatitis type B, and measles have broken out."

The protein deficiency disease kwashiorkor was observed in Iraq "for the first time," the document adds. "Gastroenteritis was killing children. . . . In the south, 80 percent of the deaths were children (with the exception of Al Amarah, where 60 percent of deaths were children)."

The final document is "Iraq: Assessment of Current Health Threats and Capabilities," and it is dated November 15, 1991.[7] This one has a distinct damage-control feel to it. Here is how it begins:

"Restoration of Iraq’s public health services and shortages of major medical materiel remain dominant international concerns. Both issues apparently are being exploited by Saddam Hussein in an effort to keep public opinion firmly against the U.S. and its Coalition allies and to direct blame away from the Iraqi government."

It minimizes the extent of the damage.

"Although current countrywide infectious disease incidence in Iraq is higher than it was before the Gulf War, it is not at the catastrophic levels that some groups predicted. The Iraqi regime will continue to exploit disease incidence data for its own political purposes."

And it places the blame squarely on Saddam Hussein. "Iraq’s medical supply shortages are the result of the central government’s stockpiling, selective distribution, and exploitation of domestic and international relief medical resources." It adds: "Resumption of public health programs . . . depends completely on the Iraqi government."

As these documents illustrate, the United States knew sanctions had the capacity to devastate the water treatment system of Iraq. It knew what the consequences would be: increased outbreaks of disease and high rates of child mortality. And it was more concerned about the public relations nightmare for Washington than the actual nightmare that the sanctions created for innocent Iraqis.

The Geneva Convention is absolutely clear. In a 1979 protocol relating to the "protection of victims of international armed conflicts," Article 54, it states:

"It is prohibited to attack, destroy, remove, or render useless objects indispensable to the survival of the civilian population, such as foodstuffs, crops, livestock, drinking water installations and supplies, and irrigation works, for the specific purpose of denying them for their sustenance value to the civilian population or to the adverse Party, whatever the motive, whether in order to starve out civilians, to cause them to move away, or for any other motive."

But that is precisely what the U.S. government did, with malice aforethought. It "destroyed, removed, or rendered useless" Iraq’s "drinking water installations and supplies." The sanctions, imposed for a decade largely at the insistence of the United States, constitute a violation of the Geneva Convention. They amount to a systematic effort to, in the DIA’s own
words, "fully degrade" Iraq’s water sources.

At a House hearing on June 6, Representative Cynthia McKinney, Democrat of Georgia, referred to the document "Iraq Water Treatment Vulnerabilities" and said: "Attacking the Iraqi public drinking water supply flagrantly targets civilians and is a violation of the Geneva Convention and of the fundamental laws of civilized nations."[8]

Over the last decade, Washington extended the toll by continuing to withhold approval for Iraq to import the few chemicals and items of equipment it needed in order to clean up its water supply.

Last summer, Representative Tony Hall, Democrat of Ohio, wrote to then-Secretary of State Madeleine Albright "about the profound effects of the increasing deterioration of Iraq’s water supply and sanitation systems on its children’s health." Hall wrote,

"The prime killer of children under five years of age -- diarrheal diseases -- has reached epidemic proportions, and they now strike four times more often than they did in 1990. . . . Holds on contracts for the water and sanitation sector are a prime reason for the increases in sickness and death. Of the eighteen contracts, all but one hold was placed by the U.S. government. The contracts are for purification chemicals, chlorinators, chemical dosing pumps, water tankers, and other equipment. . . . I urge you to weigh your decision against the disease and death that are the unavoidable result of not having safe drinking water and minimum levels of sanitation."

For more than ten years, the United States has deliberately pursued a policy of destroying the water treatment system of Iraq, knowing full well the cost in Iraqi lives. The United Nations has estimated that more than 500,000 Iraqi children have died as a result of sanctions, and that 5,000 Iraqi children continue to die every month for this reason.

No one can say that the United States didn’t know what it was doing.

See for Yourself
All the DIA documents mentioned in this article were found at the Department of Defense’s Gulflink site.

To read or print documents:

1. go to www.gulflink.osd.mil
2. click on "Declassified Documents" on the left side of the front page
3. the next page is entitled "Browse Recently Declassified Documents"
4. click on "search" under "Declassified Documents" on the left side of that page
5. the next page is entitled "Search Recently Declassified Documents"
6. enter search terms such as "disease information effects of bombing"
7. click on the search button
8. the next page is entitled "Data Sources"
9. click on DIA
10. click on one of the titles

It’s not the easiest, best-organized site on the Internet, but I have found the folks at Gulflink
to be helpful and responsive.

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   **FM:** DIA WASHINGTON DC  
   **TO:** CENTCOM  
   **INFO:** CENTAF; UK STRIKE COMMAND; MARCENT; 18 ABC; NAVCENT; SOCCENT; 7TH CORPS; ANKARA  
   **SUBJECT:** IRAQ WATER TREATMENT VULNERABILITIES (U)  
   **AS OF 18 JAN 91 KEY JUDGMENTS.**  
   1. IRAQ DEPENDS ON IMPORTING-SPECIALIZED EQUIPMENT-AND SOME CHEMICALS TO PURIFY ITS WATER SUPPLY, MOST OF WHICH IS HEAVILY MINERALIZED AND FREQUENTLY BRACKISH TO SALINE.  
   2. WITH NO DOMESTIC SOURCES OF BOTH WATER TREATMENT REPLACEMENT PARTS AND SOME ESSENTIAL CHEMICALS, IRAQ WILL CONTINUE ATTEMPTS TO CIRCUIT THE UNITED NATIONS SANCTIONS TO IMPORT THESE VITAL COMMODITIES.  
   3. FAILING TO SECURE SUPPLIES WILL RESULT IN A SHORTAGE OF PURE DRINKING WATER FOR MUCH OF THE POPULATION. THIS COULD LEAD TO INCREASED INCIDENCES, IF NOT EPIDEMICS, OF DISEASE....  
   ...  
   28. THE ENTIRE IRAQI WATER TREATMENT SYSTEM WILL NOT COLLAPSE PRECIPITOUSLY.... FULL DEGRADATION OF THE WATER TREATMENT SYSTEM PROBABLY WILL TAKE AT LEAST ANOTHER 6 MONTHS.


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