

Breakdown of support system

Disability Now March 2007

Zafar Khan, chair of the Limbless Association, looks at the effect of Iraq's mayhem on disabled people

In Iraq, the breakdown of the community support system and limited access to health and rehabilitation services has had a devastating effect on disabled people.

The government's difficulties in providing basic health services have had a negative impact on recent victims of acts of violence and war. Complications from injuries are common and can result in severe additional disabilities, due to the lack of appropriate treatment.

The government of Iraq has the double burden of providing adequate care to recent victims of violence and war, as well as maintaining care of those whose disabilities are unrelated to war.

Persons with disabilities in Iraq face discrimination in a variety of forms, including social stigma, physical barriers to access to buildings and transport, and lack of access to health services, education, and employment, though it is difficult to get an exact picture because of the ongoing war.

But people with disabilities in Iraq are present in every ethnic group and in every community. The deaf population alone is about five per cent of the Iraqi population. While disabled people in developed countries are about 10 per cent of the total, about 15 per cent of Iraqis are disabled.

There are many reasons: physical and mental injuries due to military operations; the oppressive practices and physical and psychological torture carried out by the former regime; mental health issues caused by the country's long-term problems; an increase in crime; violent and terrorist acts; the negative effect of UN sanctions under Saddam Hussein; the lack of effective medical rehabilitation and the lack of social services that facilitate the participation of disabled people in society.

There is no accurate data showing the level of current disabilities. Estimates carried out in 2002 were reported by the deputy health minister of Iraq at a conference held in Jordan in 2005, at which I was present.

It revealed that of the million disabled people in Iraq, 43,600 were on welfare support, there were 80 to 100,000 amputees (75-85 per cent had below-knee amputation, of which four fifths were caused by landmine injuries). There were 7,000 to 8,000 with spinal cord injuries, 75,000 to 100,000 with total blindness and 220,000 to 250,000 with potential blindness.

The recent Iraqi war has also been the cause of 3,000 deaths of American soldiers up to New Year's Day 2007, with 16 injuries for every death. In the Vietnamese and Korean wars, there were fewer than three people wounded for each fatality. In the first and second world wars, there were less than two. Fatal casualties in other coalition forces in Iraq have been estimated to be about 260.

Based on information obtained towards the middle of 2004 from Dr Al-Chalabi – the head of the largest rehabilitation centre in Iraq, based in Baghdad – and from other sources, a proposal was submitted to the World Bank and discussed by myself in Washington. We identified 11 rehabilitation centres which were needed to be made functional again to meet prosthetics and orthotics needs.

The World Bank subsequently organised a conference on 22-23 July 2005 in Jordan, in collaboration with the Iraqi ministry of health, to discuss disabilities.

The speakers and participants included Dr Jean Jacques Frere, senior health specialist with the World Bank, Ammar Abdul Aziz Al Saffar, Iraq's deputy minister of health, Dr Sabah Ghani Al Rubayi, Iraq's director general of medical services, myself, nine heads of disability services centres (DSCs) in Iraq and 22 other participants.

The discussions from the Iraqi side focused on lack of accurate data, poor facilities and the limited number of staff.

The focus from the World Bank was on developing self-sustaining systems of rehabilitation in Iraq. Almost all the DSCs reported staff shortages and a lack of materials. Many DSCs were looted and destroyed during the conflict and not all the regions in Iraq have DSCs.

The World Bank has promised to support the Limbless Association to help Iraq to build and rehabilitate the 11 DSCs, but required "need assessment surveys" to show the gaps between available facilities and services required. Such surveys with meaningful results have not been possible so far because of the instability and the insecure conditions in Iraq, but the Limbless Association is still in touch with both the World Bank for funding and the Iraqi government for providing assistance.

We are still hoping that we will be able to contribute something to re-establishing these rehabilitation centres in Iraq.

Zafar Khan MBE, chair, Limbless Association