The author travels to "enemy" country to meet with women bearing the brunt of sanctions.

Life & Death in Iraq

By Hadani Ditmars

FAR LEFT: Images of Saddam Hussein are ubiquitous in Iraq.
LEFT: Waiting in line for food at a Baghdad mosque.
ABOVE RIGHT: Women protest at a state-sponsored mass funeral in Baghdad for 38 children whom the Iraqi government said died because of the U.N. embargo.
If you live in North America and must depend on CNN for images of Iraq, you might well think that this is a place inhabited only by the Republican Guard, Saddam Hussein, and legions of his supporters chanting patriotic slogans. Iraq, a country rich in culture and history, with more than 22 million people who are Arabs, Kurds, Muslims, and Christians, is almost always reduced to caricature: an empty desert nation inhabited only by war-mongering crazies and passive victims.

If Iraqis in general are invisible to the Western eye, Iraqi women are that much harder to see. Although their presence in public life was more keenly felt before the embargo, which began 11 years ago, they are still active in many areas of society. But as a traveler to Iraq, you have to cross a threshold before you can really get inside the lives of women. In fact, the road from the Jordan border to Baghdad is conspicuously absent of any sign of womankind. From my hotel in Amman to the venerable al-Rashid Hotel in Iraq’s capital, it is a blur of desert highway, roadside stands run by men, and male border guards. And once I get to Baghdad, my encounters with women feel almost clandestine. Interviews go through a Ministry of Information-assigned minder—who is a man.

The absence of the X chromosome factor is such that I often feel an amnesiac sense of genderlessness; I travel in psychic drag. Sitting with my driver in the roast chicken joint at the last Jordanian pit stop before Iraq, I watch men smoking and eating and viewing soccer matches on TV, while wild cats wait in silence for the right opportunity to pounce on unfinished dinner plates. I am one of the boys. Although I wear a long, black dress, I am free to comment on the soccer match and make jokes with the men, whose wives are waiting at home. After all, I am the one paying the dinner bill for my driver. Here, my status as a foreigner outweighs the baggage of my sex.

On this, my fourth trip to Iraq in three years, my driver and I have arrived at the border at midnight. We still have hours to go before we reach Baghdad. As the mustached border guards (nearly all the men seem to sport a Saddam Hussein mustache) go through my papers, I regret not being able to fly into the country. I had tried to get on a plane from Amman but was told at the last minute that the U.N. had revoked permission for anything but a ‘humanitarian’ flight. So instead, I am crossing the border in darkness with a man who would rather be home watching the soccer

**AS A TRAVELER TO IRAQ, YOU MUST CROSS A THRESHOLD BEFORE YOU CAN GET INTO THE LIVES OF WOMEN.**
game but is happy for a needed injection of hard currency.

After the standard document checking (“You, Canada?” they always ask, in disbelief, as I explain about my Arab name, my Lebanese grandmother), I am allowed into Iraq.

It is a country I love. A country that was the cradle of civilization: the Sumerian and Mesopotamian cultures were born here—this was the home of Ishtar and Gilgamesh, of Sheherazade, and also the birthplace of the prophet Abraham, the patriarch of three world religions. This is the country of countless scholars, writers, mystics, scientists, and architects of note. It had been a crossroads for trade and commerce. In the twentieth century, it survived occupation by the British, the installation and dissolution of a monarchy, followed by a CIA-backed coup that brought the Baathist party to power in 1968. Iraq has effectively been a one-party state ever since, run by Saddam Hussein since the mid 1970s (although he didn’t officially take over the presidency until 1979). The early years of his rule were a period of unprecedented growth fueled by oil wealth and national

ist aspirations. But these aspirations, along with the help of international arms dealers and the backing of both Western and Soviet sources, spilled into a harrowing eight-year war with neighboring Iran that began in 1980. The ostensible reasons were that Iraq, a secular nation, did not want the Islamic Revolution to get past its borders, and neither did the United States, which was alarmed by the revolutionary zeal of the Iranians. And so, for nearly a decade, the two nations hacked away at each other, decimating a generation of young men. Then, when that hellish conflict was over, Saddam Hussein invaded Kuwait.

Believing he had a green light from the U.S., Saddam was unprepared for what followed. George Bush used the opportunity to “bomb Iraq back into the stone age” with 88,000 tons of explosives. Far from the glorified video game it appeared to be on Western television screens, the Gulf War was an assault in which the U.S. bombed civilians—killing an estimated 150,000—and violated several other Geneva conventions and protocols. Thousands of retreating Iraqi soldiers were massacred by U.S. troops, water treatment plants were deliberately targeted, and more than four hundred people were incinerated when a U.S. bomb landed on the Amriyah shelter outside Baghdad. And although few people realize it, British and U.S. warplanes still bomb Iraq almost daily.

For all the bombing and bloodshed, the U.S. left Saddam Hussein in power when it could have ousted him, which has led many observers to believe that the U.S. wants him there. Recently, The Times (London) quoted an anonymous senior U.N. official who said that he could not think of a single “success” of sanctions unless it was in “killing children.” The Times then quoted another anonymous diplomatic source who argued that the U.S. did not want to retreat from sanctions because “as things stand, Saddam is in his box, he is strong enough not to allow the country to break up, he can keep Iran and the region’s oil-producing nations on their toes, but he is not threatening anybody and certainly not threatening their [the U.S.’s] No. 1 ally, Israel.”

I arrive in Baghdad at 5 A.M. and enter the al-Rashid,
where a tiled mosaic likeness of George Bush and the words BUSH IS CRIMINAL grace the entranceway, so that it is impossible to avoid stepping on him as you walk in. Iraqis believe that the mosaic's creator, Leila al-Attar—who died shortly after she completed the work, when her house was bombed during Clinton's 1993 missile attack on a residential area of Baghdad—was deliberately targeted. But everywhere else, the president on display is not Bush, but Saddam Hussein. He appears in many guises: here looking dapper in a Panama hat, there quite natty in an improbable Tyrolean cap. There had been a vogue for large sculptures of goddesses like Ishtar in the sixties and seventies, but these are now overwhelmed by presidential statues.

"The whole situation is oppressive," says Nasra al-Sadoun, editor of the Baghdad Observer, an English-language weekly. "So the men oppress the women more—it's natural." Al-Sadoun is casually sanguine. Her face is tough, proud, handsome, but the dark circles under her eyes betray her exhaustion; it is hard to tell whether this is recent or the result of ten years of waiting to exhale. Her husband and the father of her four children died two years ago, of a stress-related stroke. It seems that many Iraqis are dying young these days, in their early fifties, of strokes and hypertension-related heart disease. While the young suffer from malnutrition, the middle-aged suffer from seeing a country and a lifestyle they helped build crumble before their eyes.

In the 11 years since the harsh U.N. sanctions were imposed, well over 1 million Iraqis have died. Figures from UNICEF show that 5,000 to 6,000 children die monthly from sanction-related causes—mainly malnutrition, waterborne diseases, and lack of medicine. More than half of Iraq's population does not have access to clean drinking water, yet chlorine is blocked by sanctions. As much as 70 percent of Iraqi women suffer from anemia. Before the embargo, Iraq's socialized medicine and general oil wealth made obesity the biggest health issue. Today, it is infant mortality. The number one killer of children under five is dehydration from diarrhea. These problems are especially severe in the south, where

![Child Mortality in Central and Southern Iraq](chart.png)
birth defects and cancers in women and children have skyrocketed as well. This is the area where bombing—nearly always using depleted uranium tips—has been most intense, and where infrastructure damage and pollution are the most prevalent. The residue from the bombs is everywhere; it has leaked into the water of southern Iraq and is part of the desert dust that everyone breathes.

Due to sanctions, the value of the dinar has plummeted, and the majority of Iraqis have seen their lives go from comfortable to desperate, with many women forced to prostitute themselves in order to feed their families. The educational system, once the envy of the Arab world, is now in ruins. The embargo has meant that science, technology, and even literature textbooks are blocked at the border, as are chemicals for lab experiments and lead pencils.

Although a small percentage of Iraqis are enriching themselves through sanctions profiteering, selling food and medicine on the black-market and running banned supplies into the country, life for the majority remains grim. As an article in The Economist stated, "Sanctions impinge on the lives of all Iraqis every moment of the day." The middle class has been virtually wiped out. There is a new generation of angry, unemployed young men, increasingly drawn to the seduction of fundamentalist Islam.

When it comes to laying blame for these conditions, U.S. State Department critics allege that there are warehouses full of untouchable medicine outside Baghdad, and some U.N. officials quoted in a recent New York Times article say that Iraqi authorities are taking illegal commissions on contracts for food, medicine, and other essential goods. Humanitarian groups say that, whether the allegations are true or not, the Iraqi people, who have no control over any of this, are paying the human price of these sanctions. But there is plenty of blame to go around. The sanctions committee at the U.N. wields a mighty sword. It is currently blocking hundreds of contracts for items such as spare parts (which could repair refrigerated vehicles that transport medicines), ambulances, X-ray machines, medical swabs, syringes, and stethoscopes. The U.S.—through its security council status—has placed holds on approximately $700 million worth of contracts for food and medical supplies.

Current conditions in Iraq are tragic, but the particular tragedy for women is that before the embargo, they enjoyed arguably the highest status in the Arab world. They benefited from subsidized health care and education. Female as well as male students were regularly sent abroad to complete their education. Mothers who worked outside the home used state-subsidized day care. According to some estimates, nearly half the doctors in Iraq were women, and it was the first country in the Arab world to produce a woman judge, ambassador, and government minister. Now Iraqi women’s lives have been reduced to a basic struggle for survival.

At the beginning of my trip, Nasra al-Sadoun had not wanted to reveal too much of this. "Go out," she said, "and see for yourself how it is. Make up your own mind." But making up one’s own mind as a journalist in Iraq is a com-

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llicated process that involves a government minder, or “guide” as they prefer to call themselves. My minder, Khaled, somewhat of a rookie, is particularly vigilant in his quest to keep me on the “officially approved” straight and narrow.

Happily, there is a place where Khaled cannot filter everything I hope to learn about women and their lives: namely, the beauty parlor, where men do not venture. On previous visits to Baghdad, I had befriended a beautician named Ahlam, who worked in a salon near the al-Rashid. I phone her and make an appointment to see her. The salon is in Mansour, a relatively prosperous area of town, where Ahlam once lived. Now her home is 40 minutes away, in a formerly middle-class area that has been reduced, as has Ahlam’s life, to poverty.

**The salon is decorated with posters advertising**
European shampoos, and postcards — one of Paris, one of the Austrian Alps. I sit in the back with two women. One, dressed in blue jeans, is getting a pedicure, while the other, wearing a T-shirt and a long cotton skirt, waits her turn, leafing idly through a dog-eared copy of a fashion magazine. We drink coffee and smoke cigarettes, exchange gossip, and laugh at each other’s jokes.

We could be anywhere; only the ubiquitous portrait of Saddam Hussein betrays our location. Our conversation is mainly about beauty products from Europe that are no longer available. No one talks about the other goods that are hard to find in embargoed Iraq. Sanctions fatigue seems to have set in, and unlike even a few years ago, no one wants to discuss it. The two women, who are sisters, are friendly and curious about me. I tell them that I am Canadian, but after they catch a glimpse of my thigh, as Ahlam prepares to strip the hair away with a sugar mixture, one exclaims, “But you have legs like an Arab woman!” There is a sense of freedom here. The sisters’ responses to my probing questions are not met with Baathist platitudes and sudden, inexplicable silences. And so, Ahlam’s tone is almost casual as she discusses her husband, who died during the Gulf War on the “highway of death” (the desert highway where retreating Iraqi soldiers and civilians were massacred by U.S. forces). Now, like many other war widows, she is raising her children alone, on a salary of less than $150 a month.

At the time of her husband’s death, Ahlam had a house and all the conveniences of middle-class life, including, she relates with a certain longing in her voice, a large freezer, a microwave oven, a washing machine, a television, and a VCR. The first thing to go was the living room sofa. “Then the armchairs,” Ahlam says. She ticks off the household items she has sold over the years, a litany of loss. The last thing was the VCR, which she sold in 1996 to pay for an operation for her daughter. Soon after that, she had to sell her house and move into a small apartment.

As Ahlam paints her client’s toenails blood red, her hands tremble. She apologizes, saying she is a little nervous about a pending operation to remove ovarian cysts. When pressed, she confides, “I’m worried that there won’t be enough anesthetic,” then changes the subject. She begins to sing quietly
to herself as she stirs, on a small gas stove, the sugar mixture she will use as a depilatory. Sugar has become affordable again since rations were increased a year ago, she tells me. Now her children can sometimes eat sweets.

Most nights, she says, she can't sleep: stress and worry, as well as migraines and chronic pain in her abdomen keep her awake. I brought her bottles of extra-strength Tylenol on this trip, which she goes through at an alarming rate.

A few days later, I visit Ahlam at home. Her apartment, in a building on a street of open sewers and discarded garbage, is grim. She serves Khaled and me coffee in a small living room, beyond which is the bedroom where she and her two children, ages 9 and 11, sleep. Despite her drastic change in economic status, Ahlam clings to a fierce belief in the value of education. Out of her small earnings, she is supporting several of her siblings who are at Baghdad University. She is also adamant that her children stay in school and not work in the markets as many kids now do. She brings them to the salon after school, where they hang out upstairs, doing their homework. State-subsidized day care is a dream from the past, and private programs are "only for the rich."

Ahlam is hanging on by the tips of her beautifully manicured fingernails. In a few months, the building she lives in will be torn down, and current rents in the neighborhood are double what she pays now. She has undergone a series of operations for her ovarian cysts, but the underlying cause of these cysts is still unknown. Every time she needs another operation at the private clinic she goes to, she has to make impossible choices between food, rent, and bills. Public hospitals, which she relied on exclusively before the embargo, are now out of the question: "You only go there to die," she says.

Ahlam has no desire to remarry. When we'd been alone in the salon, I had asked her about that. "The situation is rough these days, so the men are rougher," she'd said. But now, with Khaled around, she is stiffer, and answers another question with what seems to be the "official" response: "The embargo has made women stronger, and the men have become more sympathetic to our suffering."

**On another day, Khaled and I go to the Saddam Hussein Pediatric Hospital in central Baghdad, where we are given a tour and a briefing by two young interns. You can tell by their manner and dress that they are from well-to-do families, while most of the patients are poor. I have the sense that**
as soon as they finish their internship, they will go to a private clinic or perhaps, if they have the right connections, to a Western nation. Their state salaries are almost worthless now, in addition to which, the public hospitals, from their own description and from what I can observe, are devoid of even basic medicines.

We visit a ward where several babies and young children lie ill, their families hovering over them in great distress. One of the interns tells me that some women come into the ward so malnourished they can't produce breast milk to feed their babies. I approach a woman whose baby, I am told, is suffering from an acute upper respiratory infection as well as malnutrition. She cradles her tiny child in her arms. I ask where she is from. "Saddam City," she replies, referring to the traditionally working-class area of Baghdad that, even before the embargo, was a rough place, but now is so desperately poor that it is virtually sealed off to journalists. She has eight other children waiting at home with her husband, who hasn't worked since he had a heart attack in 1997.

Later, I talk to a woman who has come from the outskirts of Baghdad with her seven-year-old daughter, who has a form of meningitis. The mother says she has five other children; her husband died from injuries he sustained during the Gulf War. The hospital is lacking the specific antibiotics needed for a secondary infection the girl has developed. The prognosis is not good. What, I ask, did your daughter like to do when she was well? "She always dreamed of going to school," the woman says. "But she never had the chance. She has to work in the market with me."

In the far corner of the ward, a baby is dying. Surrounded by his parents and several other relatives, the baby is hooked up to a pulsing machine. A woman lies on the next bed quietly weeping. As I watch, a delegation of international officials sweeps into the ward surrounded by an entourage of flunkies and a camera crew. There is a whirl of lights and flashes, official photographs. And then, within perhaps a minute and a half, they are gone. The baby in the far corner is dead, and his female relatives are weeping in long wailing sobs.

**Most Iraqis get their food through the “oil-for-food” program, which allows the government to use a set amount of oil money to buy U.N.-approved food and medicine. Before the war, oil revenues guaranteed a healthy diet for most Iraqis, but the destruction of the environment, as well as the embargo on animal vaccines and fertilizers, decimated the farming and fishing industries. Oil-for-food was started by the U.N. in 1996, to bring some relief from the embargo. Initially, the rations included tea, rice, sugar, flour, and lentils but no animal proteins, dairy products, or fresh produce. They were just enough to stop starvation, but not sufficient to prevent malnutrition. There has been a slight improvement over the years, but many Iraqis sell their rations to meet needs they consider more pressing, whether fuel for heat, textbooks for a student, or medicine for a sick child. It is a situation that Denis Halliday, the former U.N. humanitarian coordinator in Iraq, and one of several U.N. officials who resigned in protest over sanctions, has called “genocide.”

The al-Gaylani mosque in Baghdad is an exquisite example of Islamic architecture. It is also, as are many mosques, the site of a food distribution center. With its cool balconies and incense-perfumed breezes, it is, in both a real and metaphysical way, a sanctuary. On previous visits, I met all kinds of women here, not just religious hajis but “modern” wom-
THE IMAM PRAYS FOR SURVIVAL AND THE LIFTING OF THE EMBARGO. THE WOMEN WEEP AS THEY LISTEN, AND I PRAY WITH THEM.

en—engineers, doctors, lawyers—who had started to pray again after the Gulf War. “It gives us strength,” they told me. “It helps us to survive the situation.”

I enter the mosque shortly before the Friday afternoon prayer, dressed in a black chador belonging to Khaled’s mother. I’m hoping to have a brief audience with the imam. I had met him on previous visits and found him to be helpful. But when he receives me, he is far from friendly. “You journalists from the West,” he snarls, “you say you want to help us, but you go home and write lies.” He forbids me any contact with the women collecting food, but then relents slightly and allows me to photograph them. “But do not speak to any of them,” he warns.

Fumbling with my chador and camera straps in the bright winter sunlight, my situation becomes increasingly absurd. How can I not speak to the women before photographing them? I leave Khaled behind and once again take refuge among women, this time in a courtyard prayer area set aside for them. I am taken up by a kind, old haji with a tattooed chin. “I am a journalist from Canada,” I tell her, “and a Muslim.” She extends part of her prayer mat to me.

The haji introduces me to her friends, who smile, holding their hands to their hearts, before the prayer begins. I pray shoulder to shoulder with the women and prostrate myself beside them. The imam’s sermon is about the “jihad” of the Iraqi people—their struggle for survival. He prays for the lifting of the embargo. Some of the women weep as they listen. As I watch their faces, I feel the strength and solidarity they share. There is no spiritual crisis here, I think. Only a material one.

After the prayer, I return to see the imam, who seems calmer now. I explain again about my article. His initial reluctance may have had something to do with a recent government request that journalists refrain from reporting on extreme poverty and begging, which has become endemic in most areas of town. Or it may have just been anger and confusion. “Why,” he asks me, “after all the reports you have made about the situation here, are the sanctions still in place?” Eventually he agrees to let me interview the women queuing up for rations of soup and yogurt.

Many are young, barely out of their teens. They all have the pallid look I’ve come to associate with malnutrition. I ask about their lives before and after the embargo, but many have trouble remembering what “before” was like. They are a generation that has come of age knowing only war and sanctions. One woman gives me a blank look when I ask about life before 1990, and then says, “Um . . . we had a television that I remember.” She smiles sheepishly and stares at the mosque’s stone walls as if in a mild state of shock.

When I describe to the imam my conversations with the women, he responds, “They are only thinking of Paradise now.”

If things are bad in Baghdad, they are worse in Basra, which bore the brunt of both the Iran/Iraq and Gulf wars, and has been the site of some of the worst post-war pollution. This once prosperous port town had been full of clubs and oil-rich sheikhs gambling and deal-making the night away. Now, Basra is a shadow of its former self, a jewel on the Gulf flooded with despair. On the drive from the newly re-opened airport, the first thing we notice is the floodwater mixed with open sewage seeping through the streets. These murky waters are everywhere—in rich and poor areas, in residential suburbs and the heart of downtown. During the Gulf War, U.S. planes bombed sewage and water-treatment facilities. They are slowly being restored, but the pace of work is hampered by the many goods withheld by the sanctions committee.

There is no other economy to speak of beside the oil in-
distry. Some residents are trying to revive fishing, but the waters are too polluted. The rates of cancers and birth defects are soaring. Khaled and I and my Basran minder (now I will have two guides) head to the general hospital for a tour of the cancer ward. I meet with Dr. Abdul Karim, a gynecologist, who after taking a few minutes to welcome me, launches into a grim description of women's health issues. “Since the war,” he begins, “there has been a huge increase in stillbirths, miscarriages, and congenital malformations and diseases like spina bifida.” This could be partly explained, he suggests, by the severe anemia and widespread malnutrition in women of childbearing age, but not entirely. “We suspect it is also due to depleted uranium,” he says.

It is estimated that at least 300 tons of the stuff was dropped on Iraq during the Gulf War, and Basra and its surrounding oil fields were heavily bombed. While there is no absolute proof that depleted uranium causes cancer and birth defects, the evidence is quickly mounting. British scientists have shown that even one atom of uranium lodged in the body can set off genetic mutations that can lead to cancer. One of the researchers on that study added that although there is a risk from radiation emitted by a uranium atom, “it may well be that the radiation is less harmful than chemical effects of the metal in the cell.” The British Ministry of Defense has also recently acknowledged that depleted uranium weapons may also contain traces of plutonium, which increase the risk of cell damage for anyone exposed to it. Meanwhile, Dr. Karim’s staff has kept records, including photos of babies born with two heads or missing limbs and vital organs.

“Cancers in women and children have increased dramatically,” continues Dr. Karim. “In children, the main cause of death after malnutrition and waterborne diseases is leukemia. Among women, there’s been a huge rise in ovarian cancer, especially women in their twenties. Also uterine cancer, which is common in women over 60, is now occurring in women under 30. There’s also been a pronounced increase in breast cancer and leukemia.”

The doctor interrupts his narrative with a brief anecdote. “You know after the Gulf War, I remember we had three days of black rain. The sky was dark, and you could barely see in front of you.” He is silent for a long moment. “We used to be called, here in Basra, ‘The Venice of Iraq.’ We were known then for our canals and palm trees. But after the Gulf War, most of the palm trees died.”

We tour the cancer wards with a female intern, Amalid Abdul Jalim. There are about eight beds in each room, bare except for sheets and blankets and single lightbulbs hanging from the ceilings. The wards are not full. “Most of the cancer patients,” explains Jalim, “go home to die. There’s not much we can do for them here.” The hospital lacks chemotherapy drugs, she says, as well as pain killers and often doesn’t have syringes to administer IV fluids. “If I’d known it would be like this,” she confides, “I would never have gone into medicine. I feel useless.”

I stop to speak with a patient. Her name is Zikra Abdul Hassan. She is 26, the mother of one boy. “Last year,” Hassan tells me, “I started to see blue spots on my stomach.” Then she developed severe menstrual bleeding and was diagnosed with ovarian cancer. A few months ago, she had her ovaries removed. Today she is back for a blood transfusion. “I was 16 at the time of the Gulf War,” Hassan says. “My house was bombed.”

For many Iraqis, their experience of bombing is in the present, not the past. For Iqbal Fatous, an elementary school teacher in Basra, who is referred to by everyone as Um Hydir (mother of Hydir), the war is still going on. On January 25, 1999, her two young boys, ages 2 and 4, were playing outside when a U.S. missile was dropped into her residential neighborhood, killing seven people, wounding 36, and destroying several homes. Um Hydir remembers the morning with great clarity. “We were just finishing breakfast,” she says, “when we heard a big boom that shook the whole house. I was in the kitchen, and all the cups and dishes fell out of the cupboards onto the floor. Everything was shaking. Then I remembered that my boys were outside. I ran out; the sky was dark and full of smoke. The whole neighborhood was out on the street and everyone seemed to have panic in their eyes. I went to look for my children and saw a small mound of earth mixed with blood and missile parts. There were my sons, Mustafa and Hydir. I called their names, but only Mustafa responded.”

Hydir, the older boy, was lying face down in a pool of blood. A doctor in the neighborhood was on hand and broke
the news to her that Hydir was dead. “But I already knew,” she says, “when I first saw him lying there, I knew.”

Mustafa underwent a series of operations on his hands—two of his fingers were destroyed—and to remove missile parts from his body. “He is still full of missile parts,” says his mother. A U.S. charitable organization called LIFE wants to bring him to the U.S. where he can receive better medical care, but they haven’t yet found a hospital willing to treat him. And without a commitment from a hospital, he isn’t eligible for a “humanitarian” visa. Mustafa plays nearby as his mother recounts her story. “He’s very nervous,” she says, glancing over at him. “He can’t sleep at night; he’s always having nightmares.”

**Um Hydir still has hope, she says, thanks to her work as a teacher.** It is a job she loves, despite the hardships of working in a school that has “no water, no books, no electricity, no blackboards, and no pencils.” On top of that, “the children have a shorter attention span, less imagination,” because of malnutrition. But she sees her role as vital. “I have to fight with the parents sometimes, to convince them to keep their children in school. One father tried to keep his little girl away so she could sell things in the market. I said to him, ‘What kind of future will she have?’ The father replied, ‘Soon she will be married anyway.’” Such attitudes toward girls and education were much less prevalent before the embargo, says Um Hydir.

She is slowly adjusting to her losses. Her faith in Islam has helped her. She began wearing hijab in the mid 1990s, and she prays and fasts. “Before the embargo, I used to dress in Western clothes. But now this,” she says, pointing to her voluminous black chador, “is my protection.” I am not the first Western journalist she has met with, and now she asks me to deliver one more message to U.S. women: “What quarrel does your government have with our children? Stop the bombing, stop the sanctions, because they are destroying the lives of innocents.

“I know that many Americans are kind, good people who care about what is happening to us here,” she adds, and then in a faint voice, “... they must.”

As we drive back to the hotel, dusk comes and each neighborhood we pass through is enveloped in darkness, with only sporadic points of electric light. Soon, I think, if this embargo goes on, Iraq really will live up to its CNN image: an empty wasteland populated only by Saddam Hussein, the Republican Guard, and a broken populace too hungry to resist, too angry to forgive.

**Hadani Ditmars is writing a book and preparing a documentary about life in Iraq.**

**Action Alert** To help end sanctions in Iraq, contact either the International Action Committee at www.iacenter.org or Voices in the Wilderness at www.nonviolence.org/vitw.