The Right to Heal









On March 19, 2013 - the tenth anniversary of the U.S. invasion of Irag - the Organization of Women's Freedom in Iraq (OWFI), Iraq Veterans Against the War (IVAW), and the Federation of Workers Councils and Unions in Iraq (FWCUI), represented by the Center for Constitutional Rights, launched the Right to Heal Initiative. Iragis, U.S. veterans and their allies are coming together to demand the right to heal for war impacted communities.

Human Impact of War

The U.S. military's use of certain munitions has an apparent link to high rates of cancer, birth defects and other health issues in communities in Iraq and Afghanistan and among active duty U.S. military personnel and returning veterans.

U.S. forces in Iraq and Afghanistan have used weapons such as white phosphorous, depleted uranium, cluster bombs and Mark 77 firebombs (which are comparable to napalm). These weapons have been internationally condemned because of the suffering they cause civilians. The U.S. also operated and continues to operate massive "burn pits" to dispose of the majority of the solid waste produced by U.S. forces, which have exposed and continue to expose U.S. soldiers and Iragi and Afghan civilians to toxic and carcinogenic substances.

In Fallujah, Iraq, which saw some of the heaviest fighting in the Iraq War, residents face high rates of cancer, infant mortality and birth defects. One researcher described the situation in Fallujah as, "the highest rate of genetic damage in any population ever studied." The Iraqi district of Haweeja, located just miles from where the U.S. operated a military base and a large burn pit, also has an alarmingly high number of serious birth defects. Preliminary surveys in Haweeja led by the Organization of Women's Freedom in Iraq reveal that approximately one quarter of newborns are born with birth defects. Professional epidemiological research is critically needed to assess the health impact of weaponry and burn pits and determine treatment needs and options.

Iraq and Afghanistan war veterans have reported serious illnesses after returning from deployment. More research is necessary to determine the full picture of long-term and multi-generational health effects of recent war veterans' exposure to burn pits and munitions. A U.S. government survey of 21,000 veterans from the First Gulf War has shown that those who served in the Gulf were also two to three times more likely to report birth defects in their children.

The failure to treat the physical and mental injuries suffered by service members has affected the service members themselves, their communities at home and, when re-deployed, the communities where the conflicts are fought.



Right to Heal Initiative launch in front of the White House

The routine practice of multiple deployments have compounded U.S. service members' trauma. Over one million U.S. veterans of these wars have deployed twice or more (43%). Each additional deployment increases the likelihood that a service member will develop post-traumatic stress, which affected 20-50%

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of deployed troops by 2008. Additionally, approximately one third of returning veterans have experienced traumatic brain injuries.

Military suicides now outpace combat deaths. Service members seeking care have been subject to ridicule and stigma, excessive waiting lists, violation of confidentiality, and heavy medication in the place of counseling, as well as the routine practice of commanders overriding soldiers' medical orders up to, and including, re-deployments. As the wars draw to a close, service members are being discharged and denied benefits due to disciplinary infractions related to untreated traumatic injuries. Increased rates of family violence, incarceration, unemployment, and homelessness are already visible among veterans of the Iraq and Afghanistan wars.

The heaviest U.S. tolls of the Iraq and Afghanistan wars continue to be on communities already impacted by economic and racial injustice; the U.S. military is disproportionately made up of people of working class and working poor backgrounds and people of color.

Sexual violence, as a weapon and by-product of war, has had a deeply traumatic, far-reaching impact on civilians in Iraq and Afghanistan, as well as on U.S. service members.

Numerous independent reports, including those carried out by U.S. military-commissioned investigations, found systematic sexual assaults on civilian detainees in Iraq's detention centers. Though there is a need for additional data on the detention of civilians in Afghanistan, the U.S. Assistance Mission to Afghanistan documented detainee torture and abuse that included beatings, threats of sexual assault, twisting and wrenching of genitals and the application of electric shock. While the exact number may never be known, there have been a number of reports of rape and sexual abuse of civilians outside of the detention context at the hands of U.S. military personnel in Iraq and Afghanistan.

The sexual violence endemic to these wars has affected U.S. service members as well. A Veteran Affairs survey has found that 1 in 5 female and 1 in 100 male veterans seeking health care self-report having had non-consensual sexual experiences. Research studies conclude that one in three service women have been sexually assaulted. People who report a history of military sexual trauma (MST) are significantly more likely to receive a mental health diagnosis. Yet, survivors of MST are less likely to receive compensation for post-traumatic stress related to sexual trauma than those experiencing PTSD as a result of combat experiences. Recent DoD reports estimate that only 11% of sexual assaults are reported and less than 9% of reported sexual assaults go to trial each year.

Need for Accountability, Reparations, Policy Changes and Support for Programs Focused on Healing

Accountability

There can be no healing without genuine acknowledgement of harm caused and without accountability, both of which comprise core elements of justice and reparations. The U.S. should immediately withdraw all occupying forces from both Iraq and Afghanistan. The U.S. must acknowledge the illegality and inhumanity of the wars and admit responsibility for human rights violations such as war crimes, gender-based violence, lasting effects of munitions, and untreated trauma. There must also be accountability for the U.S.'s role in directly and indirectly imposing laws in Iraq that have increased insecurity and violence against women and sexual minorities, violated the workers' rights, and limited Iraqis' freedom of expression.

Reparations

Beyond acknowledging its responsibility, the U.S. should take concrete action to repair the harm in Iraq such as: conduct environmental and health studies on the impact of the wars in order to determine whom and what geographical areas health care services should target; fund health clinics, with particular attention to physiotherapy equipment for children with disabilities; compensate families suffering from the health consequences of munitions; compensate families of victims of acts of war; fund and allocate resources to rebuilding infrastructure in communities that have been suffering from public health crises.

Changes in Domestic Policies

In the United States, there must be immediate changes to the policies governing the provision of health care to active duty service members and veterans, including: provision of full benefits and prompt and adequate physical and mental health care for returning troops and veterans; enforceable protections against stigma and retaliation for seeking physical or mental health care; enforceable protection from chain of command interference in service members' medical and mental health care plans; policies protecting service members' rights to medical discharge/retirement and to excuse from certain duties for medical reasons; and provision of services to victims of sexual and gender-based violence among U.S. service members and their communities.

The Right to Heal Initiative petitioning organizations are Iraq Veterans Against the War, the Organization of Women's Freedom in Iraq and the Federation of Workers Councils and Unions in Iraq, represented by the Center for Constitutional Rights. Supporting organizations are Civilian Soldier Alliance, War Resisters League, MADRE, and the Harvard Law School International Human Rights Clinic. See "About Us" on www.righttoheal.org