



ALADDIN'S MAGIC LANTERN

HELP FOR THE SICK CHILDREN OF BASRA

No Light at the End of the Tunnel

Iraq in May 2009



Basra, May 5th through 8th, 2009

By Dr. Eva-Maria Hobiger

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A Medical Conference in Basra

After an absence of more than three and a half years, I had returned to Basra for only a few days, but long enough to form an impression of the current state of affairs/condition/situation. The grounds for this trip lay in an invitation from the Basra Medical College. For the first time since the war, a medical conference would take place in Iraq, and with it an invited international contingent consisting of everyone, who in one way or another provided relief to the people of Basra over the past few years.

This invitation was followed by a game of “chicken,” which lasted literally until the moment before take-off. Despite multiple attempts, I was unable to obtain a visa for Iraq and so I finally gave up hope of ever being able to travel to Iraq. The deadline was looming closer and closer and then everything began happening blow by blow: Two days before departure I received news from Iraq that I should not, under any condition, cancel my flight. Until this point there was only uncertainty and my nervousness. The day before the trip, the Dean of the University of Basra called to tell me that I should, by any means, make the flight, and he would personally make sure that I could get into the country. Written confirmation that I would be allowed into Iraq came only after I was already on the way to the airport in Vienna.

And so it was that on May 3rd I flew through Frankfurt to Kuwait and was picked up by an Iraqi driver in front of my hotel in the early morning hours of May 5. The trip through the desert in Kuwait is short, and within an hour and a half we arrive at the border. Matters on the Kuwaiti side of the border were quickly dispatched. Foreign passports are not seen very often on the Iraqi side of the border, however, so there it took a little while. Just as the visa was stamped in my passport, my ride arrived to pick me up and off we go. The trip that follows is made by a small convoy of cars with a police escort at the front, and if there ever were a time during this whole trip to Iraq when I was truly frightened, it would have been during this ride in the convoy because all of the cars traveled so close together in tight formation and at great speed.

We pass the cities of Safwan and Al-Zubeir. There are countless roadblocks along the way, often within sight of each other. These checkpoints involve the police, to these we add numerous military posts, which lie between the police checkpoints. Street vendors have erected scanty booths along the median of the “highway” from which they offer watermelons and other fruit. Across the street I see somebody driving the wrong-way—a man with a horse-drawn cart loaded with gas cans under a covering made of reeds—is driving headlong into traffic. At some of the checkpoints we also had to drive the wrong way, because our police escort would



suddenly change lanes and speed past the long string of stopped cars in the opposing traffic lanes. From a distance one can see the smoke billows from the oil fields; we are driving through the part of Iraq where the ground conceals the country's greatest riches: "the super giant oil fields of Rumailah"—the largest deposits in the country. Herds of sheep graze on both sides of the road, in search of the isolated blades of grass offered up by the desert in spring.

Back to Basra

Soon after, we approach the entrance to the city of Basra and this view of the city is a familiar one to me, resembling the images that had made such an impression on me so long ago. To my utter dismay, I don't notice any substantial changes or improvement; there are quite a number of housing projects under construction—which I later learn are really just a collection of many individual projects that were begun and then abandoned when the money ran out. Today, just as it has been for years, garbage lines the city streets to the left and right: plastic bags, tin cans, bits of metal, paper, rotting fruit. The air is dusty, the sun hidden in a sky made gray by clouds of dust. I discover some new shops along the street and there are many new cars. But today, just as before, I still see children selling gasoline from plastic canisters and bottles. These are little boys only 8, 10 or, at the most, twelve years old, who at this time of the day should actually be in school. But, in order to make a living for themselves and perhaps their whole family, these children siphon gasoline through a hose with their mouths, a practice posing the utmost danger and risk to their health.



When we get to the Mother's and Children's Hospital, it impossible not to notice that it was very recently painted. The peeling light green paint from the 1970's has been replaced with a fresh coat of light lavender, a somewhat peculiar color in this part of the world. Can this one change be a sign of other improvements to the hospital? I can hardly wait to get to the pediatric oncology ward. The heat of mid-day knocks me back as I climb out of the car, it is already 104 degrees.

Dozens of fathers and other relatives sit on the ground outside the doorway to the cancer ward. Today, as in the past, they are not allowed inside the ward; only mothers can visit their children inside. The hallways swarm with people: police, soldiers, doctors, nurses, journalists with their cameras, and the other foreign visitors. Pressing her way between the mass of people is a small, white-coated person, and we throw our arms around each other's necks and embrace. It is Dr. Jenan, the director of the pediatric oncology ward, my most important partner in this project for the past eight yeas and my good friend for all these years. We last saw each other a year ago in Vienna. Neither of us can believe I am back in Basra! Every time we have parted since March 2003, there has been a big question, either spoken or unspoken: Would we ever see each other again? .Only one year earlier, many professional women in Basra were being murdered, most of them doctors, teachers, engineers, and the like. All of them were successful in their respective fields, making them targets for attack by militant groups. And Dr. Jenan is famous for not mincing words when there

was cause for criticism. But here we are, standing across from one another and neither of us can believe that I am back in Basra!

Jenan immediately leads me into the playroom that our group recently renovated to show me the reason for her excitement: some twenty children, whom she had invited and all of whom had earlier been sick with cancer, but were now healthy. It is an unbelievable joy, to see these healthy children here, in the same place where earlier I had seen so much suffering and pain. “This is my gift for you,” she seemed to be saying. “These children are alive because you helped them all these years. They are the fruit of your labor.” It is difficult to hold back my tears, and I see it is the same for Jenan. All the kids have been spiffed up, the lads mostly in white shirts and black pants, the girls in white dresses. One little boy, who must have been about 11, stood out:



he was dressed in traditional tribal costume: a little sheik. One look around the room told me that, even though five years had passed, the playroom remained in remarkably good condition. The governess, who I’ve known for some years, throws her arms around me and I only hear one word again and again:

“Shukran”—thank you. The children’s teacher, who is very energetic and involved, introduces me to a young girl with a bandage covering one of her eyes: Sabrin. I have received countless drawings from her, and on each one she writes: “Thank you Dr. Eva, thank you, Dr. Jenan.” Her thanks, which apart from the medications also extended to this place, in which she felt accepted and safe for the first time in her life after being practically cast out by her stepfather. I know that her fondest wish is for an artificial eye; her right eye was removed a few years earlier because of a tumor. I tell her that once she finishes growing, I will come back for her and bring her with me to Austria so she can get an artificial eye. She smiles and thanks me profusely and the next day I hear how happy this prospect has made her. Unfortunately, her chances of survival are small; her chemotherapy was interrupted too many times because the family did not have the money to bring the child to the hospital. Other parents often do not understand the necessity of adhering to the treatment plan; as soon as the child appears to improve



subjectively, they think the child is already cured and do not bring them back for further treatment—treatment that absolutely needs to be continued for several months longer, even after no traces of the original tumor remain. These are parents from rural areas, who themselves have never been to school, can neither read nor write, some of whom are nomadic. In these instances it would take a huge amount of teaching and education to change this terrible situation—something that social workers would need to do, except there aren’t any—or perhaps the parents of children who have been cured.



I meet two other foreigners, Dr. Amy Hagopian, from the United States and Dr. Tim Takaro, from Canada. For the last few years, they have been attempting to mount a study documenting the increasing rates of pediatric cancers in Southern Iraq. I had already been in contact with both of them before this trip and knew we would get along well, a feeling strengthened further as we got to know one another personally.

A mother calls me into one of the hospital rooms. Little Nour, 9 years old, had a nasty tumor in her left calf that required amputation, something quite terrible for a child this age. Nour had a request of me. She almost couldn't manage to look at me and shyly made her request: She didn't want to have to see other children playing and running around—she wished I could bring her a prosthetic leg, so she might walk again. With the help of a young doctor acting as interpreter I explained to the child and the mother that we needed to wait a bit until she finished her treatment.



Epidemics In Basra

Another mother calls me to her child's bedside. Her child is not doing well and cannot stop vomiting. Together with the young doctor I review the child's chart and she informs me that already, in early May, thousands of children in Basra have fallen ill to diarrheal disease. Under normal circumstances one would not expect to see so many patients suffering from diarrhea until June or July. But the temperatures have already risen and the water quality, as it was before, is horrible. Those who depend on tap or untreated river water are at highest risk, especially children who have yet to develop sufficient immunity to these disease-causing germs. And, if contracted by a child with leukemia—or any cancer—who is on chemotherapy, the infections will be especially severe. I try to reassure the mother, telling her that her child is getting IV fluids and the necessary medication and it will be a few days yet before the child recovers.



There are so many cases of infectious disease in Basra. Currently there is an epidemic of measles; when it was still a bit cooler, rampant whooping cough. I see a number of children with chicken pox during this trip. In recent years, immunization programs have not been adequately implemented. The poor security conditions are to blame, as well as the fact that many children were unable to attend school; many immunization programs take place in the schools. Apart from this, continuous cold storage of vaccine has not been possible, because of the power failures and frequently interrupted electrical service—and therefore the vaccines, when given, often no longer work.

All one really needs to do is look around and see the large packs of stray dogs searching through garbage strewn about everywhere, and the presence of this level of disease no longer comes as a surprise. Leishmaniasis, the quintessential disease of poverty, infects countless infants. In November of last year I sent 300 packets of the medicine, Pentostam, enough to treat and cure about 1,000 children. A doctor told me that the Iraqi Ministry of Health had provided only five packets of Pentostam for his hospital during the entire past year—this in an area in which thousands of people, mostly children, contract the disease annually. I do not understand the reason why the medical procurement system remains in shambles. Is there really no money? Does all the money disappear because of omnipresent corruption? Is it bad management? Is it the incompetence of the people in charge? I do not know, but whatever the reasons may be, the poorest suffer the most—and they need our help.

Dr. Jenan comes looking for me and finds me in a patient's room. She tells these mothers who I am, whereupon one of them gets up from her child's bedside, comes over to me, and hugs and kisses me. Tears in her eyes, she murmurs, "shukran, shukran (thank you, thank you)." The others also thank me profusely and as I leave the room, a whole chorus of thanks and blessings trails out after me. These scenes repeat in the other rooms.



I want to see another ward and Jenan takes me with her. I notice that the ceiling tiles have been removed from the hallways, as well as in some of the rooms. I ask Jenan about this and am appalled to hear her explanation: she explains that thousands of rats nested in the space above them, between the water pipes and electrical wiring. There were cats up there as well. All manner of vermin contaminate the floors of the hospital; bugs and insects are not uncommon. The walls in other neighboring wards are moist, covered in mold and mildew. The condition of the hospital is indeed much worse than before. The rooms, in which these seriously ill children lie, are darkened; there is no air conditioning. A glance into these rooms reveals only the bleakest of pictures. The beds and all the contents of the rooms have become more than unsightly. Is it even possible to get well here? Only the pediatric cancer ward, which we renovated so many years ago, remains the only exception to the decay in the rest of the hospital. The basic structural condition of the hospital has decayed to the point that general disinfection is no longer possible. I know how horrible the conditions are in the operating and delivery rooms. The only remaining option for this place would be to tear it all down and build a new hospital; it is way beyond salvation. To think: This is one of the critical care trauma hospitals in Southern Iraq!

The New Hospital

During lunch at a nearby restaurant we discover—and by “we” I am referring to the foreign guests: the nine Japanese, four Americans and myself—that all of the additional activities, all of which had been planned by our Iraqi hosts, have been cancelled: the visit to the school, the visit to the open market, a walk on the banks of the Shatt el Arab River. What I did not know before my departure was that a private American security company had been hired to guard our entire group and they had forbidden all of the “extra” activities. The only reason given was “for our safety”. As the only

person in the group who had not signed the contracts with the security firm—I and my Iraqi friends were responsible for my safety—I alone enjoyed an exception to their rules and for this reason alone, had won a little bit of freedom, specifically the freedom to receive visitors and separate from the group. As we left the restaurant their eyes of all those on the street were inevitably drawn to us. I ask myself what is the point of, and what good comes from, all of this? Inadvertently we all become part of this ruse: That since we are here, we therefore need some fifteen other people whose sole job it is to protect us.

Our group insisted that at the very least we be allowed to visit the construction site of the new hospital, a project initiated in 2003 by the wife of the ex-president of the United States, GW Bush, and mired in controversy from the very beginning. This was to be a modern, 100 bed facility, fully appointed with all the tools of modern medicine with a construction budget of \$50 Million dollars. But how on Earth can a hospital like that function in this place when such basic services as electricity and clean drinking water are lacking, when most medical specialists have left the country, where practically no nursing staff remains, and there aren't even any medicines or cleaning supplies. By 2006, all \$50 Million dollars were gone and the hospital was nowhere near completed. And today, it is still far from finished. In the meantime, the project has devoured more than \$200 Million dollars. The reality is that this hospital, if and whenever it finally does open, will never be able to replace the Mother's and Children's Hospital; it has far too few beds to do that. We visit the construction site and are lead around some parts of the hospital. Since there is no electricity, some areas are inaccessible to us. It is a hospital of monumental proportions—especially in relation to its bed capacity—and I feel sorry for the personnel who will need to traverse the wide distances between individual work areas. In a quiet moment I ask myself: How will some of the biggest of Iraq's facility problems, namely lack of maintenance and upkeep, possibly be addressed and overcome? When this hospital finally opens, how will it look after a few years? I ask these questions of the future hospital director who is leading the tour of the building. He is one of the doctors who has been to Vienna for advanced training. He claims the problems will stem from the fact that there will be very little money for general maintenance. (*Ich frage den künftigen Direktor, der die Führung durch das Haus macht. Es ist einer der Ärzte, die schon einmal in Wien zur Fortbildung waren. Er meint, das Problem wäre, dass es für Instandhaltungen kaum Geld gäbe.*) I can barely comprehend this, we know exactly what kind of patient burden Iraqi hospitals cope with daily (For example: One "delivery room" with only two beds performs 80 deliveries a day.). Some of these patients are nomadic and have never lived in a house and have no idea how to use many household appliances. Given the importance of janitorial and maintenance work demanded by these conditions, there would need to be a correspondingly large budget to address them.

In Iraq, there are about 1.2 beds per 1,000 residents, in Germany/Austria that number is between 6 and 7/1,000. Little Austria, with a population of 8.3 Million has more hospital beds than Iraq and its population of 28-30 Million. Just to reach the average standard of 3.3 beds/1,000 people would mean that Iraq would need to create almost an additional 100,000 beds—that and the hospitals they would occupy. With the glaring shortage of medical personnel in Iraq, how is that supposed to happen?

Safety, but at what price?

We make the short trip back to the hotel with blaring sirens and flashing blue lights. A military vehicle is parked in front of the hotel and many police have taken up positions nearby. I feel myself

becoming increasingly upset and insecure, although surrounded by all these security measures. The clattering electrical generators stifle all conversations outside the hotel.

Soon afterwards, my first visitors arrive—word has got around quickly that I am here—and it is a great joy to see my friends again here in Basra after so many years. The conversation with parents and children, who had been sent to Austria for medical treatments, and their doctors, puts the security situation, which the American security firm portrayed so drastically, in a whole new light. Up until a year ago, all of my friends in Basra had discouraged me from visiting; they all characterized the situation as too dangerous. But in the last few months, according to them, the situation was completely changed. The militias, which had been terrorizing the city, were gone and there were considerably more police and military on the streets, and this had altered the situation completely. People were free once more to go outside, coming and going until late in the night. Sure, there is still the occasional kidnapping and, of course, safety cannot to be compared to that of a European country, but it had become far less dangerous than it had been during my visits in 2004 and 2005. Nobody had any misgivings about driving around the city with me in the car. Now, I understand that protecting a group of fourteen people is something else altogether, but even this many bodyguards would not protect us from a well-placed roadside bomb.

Naturally, this topic was the focus of conversation during dinner, which—contrary to our original plans—we took in the hotel. Our group, consisting of adults from three continents, each in our own fashion refused to be practically hobbled and more or less imprisoned inside the hotel. We came as friends of the Iraqi people, and now we found ourselves in a convoy being lead around the city with flashing lights, sirens and a bullhorn screaming at anybody who didn't immediately get out of our way. We are kept isolated from the population. The police lead the convoy with the military bringing up the rear. When we approach checkpoints we have our own lane and simply go around them while the Iraqis wait in line to be inspected and only then allowed to pass. If this is how these people are treated generally, I can at least understand their resentment.

After all this talking, it is late and I am happy to finally get to my room. It's been a long day, full of conversation, and somehow, when here, one always seems to be in a constant state of psychological distress. Just as I get to my room, the power goes out again. Although the hotel has an emergency generator, but for a few minutes everything is dark. Strange thoughts run through one's head: There are several Iraqis staying in the room across the hall, couldn't they be some sort of "security risk" for us? I am staying in a completely different wing of the hotel from the rest of the group. The lock on my door is ridiculous. Darkness offers an ideal opportunity for someone to... and with a deafening roar, the generator started up shattering this chain of thoughts. In the sink in my room, the water that flows from the faucet is murky, with particles visible to the naked eye. The air-conditioning doesn't work if the generator is supplying power—which turns out to be most of the time. The stifling heat and experiences of the day keep me awake for a long time.

A Song for Life

In the morning we are loaded into cars and the convoy leaves the hotel headed toward the place where the conference is being held. One more trip with flashing lights and howling sirens. The canals, pictured in postcards from the 1950's flowing with clear water and possessing a deep blue hue, are dirty brown and their banks are heaped on both sides with towers of garbage. Curious, we

peer out from the car windows and take photos. This is our only opportunity to see and experience something of the world outside.

The conference is being held on the premises of the “Southern Oil Company” and the first talk is given by a professor from Hiroshima, Japan. During the coffee breaks there are many opportunities to converse with other doctors. Sometime after lunch the Minister of Health arrives, the conference is taking place under his sponsorship and at least he participates from time to time.

A man comes to talk to me; his fourteen year old daughter has leukemia. Today she stands before me wearing a colorful dress and is healthy. The father thanks me for his daughter’s life; for he knows that the medications that restored his daughter’s health came from me. These are the moments when a person knows for whom they work, for whom they fight, and for whom they endure so many difficulties; moments that are simply priceless.

The conference’s official opening ceremonies are held that evening. They begin with the Iraqi national anthem and a speech by the Minister of Health. Afterwards I give my presentation on our work in Basra of the past years. After that comes the high point of the evening: a song, sung by more than twenty children who have had cancer and are now healthy. Dr. Jenan had called up fifty families, but many of them live too far away from Basra and their parents were unable to bring them to the rehearsals. The children sing a song that carried the title: “A Glimmer of Hope.” I’d like to share the lyrics of the song here:

*From this place forward we give our thanks
Our hope has returned
And the wish we dearly wished, came true
With your love and with your medicine, we
were healed
With patience and faith, we conquered
cancer
You opened a window of hope, and we took a
step into the future
We will keep singing, for a new world, for
happy days
Free from despair
Our belief in life we shall never lose
We are filled with hope, we are filled with
happiness
And today we come to share with all who’ll listen this, our happiness*



The lyrics were sung in Arabic, of course, but they were also projected onto a screen in English so everybody could understand. I can’t look around the hall because I am fighting back tears, and afterwards many people tell me they were not able to hold back their tears. I believe the raw emotion brought the entire hall nearly to tears. It was a truly unbelievable moment, emotional and deeply felt. These children, standing before us so healthy, would have been dead—without our help, without our donations, without our work, without our involvement. And I know this was only twenty out of thousands who are still around today, although we can’t see them all. The children’s performance was Jenan’s idea, intended as thanks for our help over these past years. They sang of hope and happiness—and did so from the midst of chaos and terrible circumstance that is still very

much the rule in Iraq. Those of us in Europe, who take these things for granted, must be forever thankful and remember all those without them: clean drinking water, a steady energy supply—whether electricity or oil, hospitals that are clean and technologically advanced, medicines, health insurance that guarantees everybody the best possible care, well-trained doctors and nurses, sufficient food, clean and passable streets, good schools and universities, a good social security system, workplaces that offer vacations—a totally foreign concept in Iraq. We enjoy all these things without fear of being in the wrong place at the wrong time, as yet again another bomb explodes-- which actually happened on this same evening in Basra. We fail to treasure all that we have here in Europe.

When we drive back to the hotel it is very late. Once again, back in my hot and stuffy room after all of the experiences and conversations of the day, it is difficult to fall asleep. My head is a jumble of mixed up thoughts and feelings and I will need some time to sort them all out.

Depression and Hope

When we get stuck in traffic the next morning, our convoy manages to avoid the mess by turning down a side street—and we are all appalled at how the streets look just a few yards from the main thoroughfare. We see huge potholes, up to three feet deep, punctuating the street; crumbling walls surrounding homes; giant ponds of sewage heaped with garbage; old car tires, and huge cracks in the pavement under the feet of playing children. On the thoroughfares police and military fortifications stick out: made either of corrugated steel roofs mounted on four posts, or some sandbags, or even just a pile of old bricks.



The conference resumes, and once again the breaks between presentations offer opportunities for many conversations with a most diverse group of people. Since my arrival yesterday, more and more people come up to me asking for help, even the employees who work on the premises. One man tells he has only one kidney and it has a big kidney stone. He needs an operation to remove the stone, but he's afraid to get the operation here since there are so few specialists left in Basra, and the people have lost faith in the doctors who remain because of their reputation of making so many mistakes. A father tells me about his two daughters, both sick with a blood disorder, who urgently need medications. Another reports on his son's leukemia and he'd like me to look at the treatment plan. A child with spastic paralysis is brought to me. It goes on and on and on. I am with a doctor who spontaneously jumped in as translator and I am so grateful to him for explaining to everyone that I can only accept children, no adults, to come to the West for treatment, that some illnesses cannot be treated, even by us, and that I will try to find a way to send them the medications they so desperately need.

In a quiet corner of the lobby I strike up a conversation with one of the doctors. I will never forget him. He expressed deep frustration and depression when he told me that all of his siblings had left the country. He had stayed, because he wanted to change things here. But countless times every day he confronted huge insurmountable barriers: every day of every week of every month of every year, and now for so many years running. He feared he might lose his strength. Then what? Just give up? Just leave, like all the others? There are hardly any specialists left in the whole country, who is supposed to treat the sick, how are things supposed to continue in Iraq if all the people leave? Those who have fled to other countries are very often the most educated, the academics, and the specialists. They are a blessing for the countries where they now live, but they are missed in Iraq. His heart has hardened in the course of the past years, he fears.

Well, I don't believe this man has a hardened heart, but surely he has protected it with a strong shield. It's unavoidable; you have to protect yourself if you want to survive. We sit there silently for a few minutes, what can I possibly say or do that would give this man courage? Are there any words that help under these conditions? He anticipates my question and says, "The fact that you accepted our invitation to come gives us courage. We need to keep working, no matter how hard it is. When times were really bad in the past years you never forgot about us, never forgot about our children. That gave us courage, strength and motivation—and also hope," he added. Perhaps we accomplish more with our work than it first appears, more than we are told...

The conference comes to an end, finally, that afternoon. This event certainly required long and arduous preparations and involved a huge effort of the organizers. Considering the prevailing conditions makes it all the more a remarkable achievement, especially because we, the foreign guests, represented so much uncertainty. Our safety needed to be guaranteed, in a country where "safety" is becoming an increasingly foreign concept. I'll bet everybody will finally be able to take a breath when we finally leave Iraq.

Pollution

At this point I finally have a chance to enjoy a little "freedom." Unfortunately it is almost 4:00 pm and I need to be back at the hotel by 7:00, since there is still one remaining meal together. I have been invited to visit the family of a child who received medical treatment in Austria. It is another thing altogether to move around like all the other Iraqis without the myriad protections of the convoy. The checkpoints present no problems whatsoever; the police peek briefly into the car, women are never spoken to anyway.

Children and old ladies beg on the street corners; some children sell fruit or bottled drinks. They stand there, all day long, in the middle of the traffic turmoil, breathing exhaust. Many children have lost their lives in accidents doing this work, which is hardly surprising given the way people drive around here. We drive through a part of the city unknown to me until now. It's surreal; cows wander the streets searching out blades of



grass between piles of trash. I think of our cows grazing in soft green meadows at home; what a different world this is!

On a street with forlorn and disintegrating houses on both sides, we stop in front of a gated entrance—you never leave your car on the street here. Inside, the entire family has gathered, many relatives have come to see the woman doctor from “Nimsa”—the Arabic name for Austria. It is quite an experience, and always surprising, to witness Iraqi hospitality. I always imagine that at least ten other visitors are expected when I see the loads of food set



before me. The woman of the house is constantly worried that I am not enjoying the food, because even when I am done, almost everything remains. No wonder, given the massive quantities she prepared. I go out into the “garden”—a couple of chickens kept in tight quarters in a pen in a yard full of junk. One of the canals flows behind the yard and I want to take a look at it—and then I have to catch my breath at what I see beyond the bank: a thick dark brown sludge emitting a horrible stink—the ideal breeding ground for insects, parasites and vermin. It comes as no surprise that there is so much sickness in Basra; it is not possible to be healthy in this environment. On the opposite bank a couple of feral dogs look for food. Pollution in Iraq has progressed to the point that, in my opinion, I am afraid it might be too late to reverse.

The time passes so quickly and our parting is genuinely affectionate. We must go on; I’d really like to see the former home of the Catholic archbishop, who is currently in Australia. Once there, I am greeted by the caretaker, currently acting as a watchman. The Iraqi government employs these security personnel who are supposed to protect the churches throughout the country. The church is being rebuilt and the yard is covered. I learn that the charity pharmacy is being dismantled because the pharmacist has left Iraq. 600 Christian families remain in Basra, before the last war they numbered 1500. Time flies by and my companion thinks its time we moved on before our pictures are broadcast on the television and everyone will think he’s abducted me. His smile grows across his face at his “joke” and it feels good to be able to laugh, once, in this place. The Iraqi sense of humor never fails to surprise me; their ability to come up with jokes about their difficult circumstances is peerless.

We make our way back to the hotel, a short drive lasting about ten minutes. When we arrive, Doah and her parents are there waiting for me. Doah is blind, and was sent to Austria three years ago to be treated for a serious kidney disorder. Her condition is miserable, her father tells me, she has severe anemia and her test results reveal values that are inconsistent with life. The little girl is almost too weak to stand for even a few minutes. I tell the father that she desperately needs a blood transfusion, but apparently the hospital had refused her one. Doah is 17 now (although in her

condition she looks to be more like 12) and for this reason she can no longer be treated in the children's hospital, but she would not be admitted to the hospital that treats adults. I just don't understand the world anymore, and I especially can't understand such doctors. I send Doah to Dr. Jenan, who I am sure will try to help her.

We all get a wake up call early the next morning, at five. I'm not leaving until 10:00 am, but this fact was lost on the men at the reception desk. However, this does offer me the opportunity to say my good byes to the members of our group. We are all bound together through our shared friendship with the people in Basra and even though we live on three continents, we will certainly stay connected for the good of our shared friends. The convoy leaves the hotel, attached to the police cars are three additional military vehicles, which will accompany my new friends to the airport.

Jenan drops by the hotel and for the first time since my arrival, we have a few free minutes for quiet conversation. There is still so much to talk about. She is tired, the preparations for the conference, with which she was involved, have robbed her of time and energy. Another friend comes by and that signals it is time for me to leave Basra. One of the hospital doctors and a policeman in civilian clothes drive me in an armored car to the border. On the way to the border, I once again notice the pollution around me: the desert was once kept clean by birds, but the vultures can't eat the waste of these times—bottles, plastic and metal—and this is what covers the desert as far as the eye can see.



Scorched Earth

Iraq is a failed nation, a country wasted. Its historical and cultural roots have been shattered, the environment devastated, its most basic capacity to support life destroyed, society is ruined—and its people psychologically devastated. Where to begin? How to begin? **How can reconstruction get under way here, without fearing that every new project attempted will fail dismally due to an utter lack of all the necessary preconditions for success?** (*Wie kann hier ein Wiederaufbau in die Wege geleitet werden, ohne befürchten zu müssen, dass das in Angriff genommene Projekt kläglich scheitern muss aufgrund der gegebenen Rahmenbedingungen, weil die einfachsten Voraussetzungen fehlen?*) Never before have I been more aware of the extent of the devastation of this country as I was during this visit. One of the doctors described it simply, but appropriately: “There is no light at the end of the tunnel.”

My feelings regarding this recent trip are so ambivalent. On the one hand the trip was very sobering for me; I expected more, more positive development—in this realm I was disappointed. Security has improved—although it is far from optimal. But other than that, everything is pretty much the same

as it was four years earlier—or even worse. You can paint the outside of the hospital, but meanwhile it rots from within and its floors are devoured by pests. You can build a modern hospital, lack the means to bring it into service. There are still no medicines with which to treat the children, or other sick people. If somebody doesn't have money—which a majority of the population does not—to buy medicines on the black market, then what they get is a death sentence. And what of the father, the mother, forced to watch their child die because they couldn't scrape together the money to buy medicine? What about them?

A few days after my trip, an Iraqi newspaper wrote: “Prime Minister Maliki described corruption as “the greatest enemy of the reconstruction of Iraq”. The parliament has begun an investigation into the dealings of ministers suspected of corruption and their associates.” I can only hope this investigation succeeds and is broadened beyond the lower levels of the power hierarchy, because the Iraqi people suffer unspeakably from the consequences of this corruption.

What is especially damaging is the fact that nearly all the educated people in Iraq have left. These days it is increasingly rare to meet anyone speaks English. The illiteracy rate continues to climb inexorably, as countless children have not been able to attend school in the past 18 years. **Only in light of these facts, is it possible to understand: how can a country's administration function if not through knowledge and competence, but other characteristics are decided upon by an allocation of positions?** (*Und dann beginnt man vielleicht zu verstehen: wie kann die Verwaltung eines Landes funktionieren, wenn nicht Wissen und Kompetenz, sondern andere Eigenschaften entscheidend sind bei der Postenvergabe?*)

But I also experienced much that was positive, especially the wave of gratitude that I encountered—I must have heard the word “shukran,” thank you, hundreds of times during these past few days. In the beginning it came from the children and their parents, but then from those who somehow maintained their idealism despite everything, who persevered in their hospital jobs in order to do their duty and provide care for the sick. Once more it dawned on me: the only way I have been able to stick with my projects is because I've had such dependable partners: doctors, sticking it out in Iraq so as to be there for the sick people, the sick children, who overcame every setback only to begin again and again. We owe it to them that we are able to achieve so much in a country where so many things fail, where so many projects will never be realized because the money...simply... vanished. Thanks to our project partners in Iraq, we can be sure that every single donated Euro is put to good use; nothing has ever gone missing or been misappropriated. These doctors painstakingly guard each and every dose of medication we send them. And yet there is still far too little medication in Iraqi hospitals, a lack of instruments and supplies—and for these reasons thousands of patients die. Just as in every country on Earth where poverty reigns, incompetence and corruption cripple the administrative structures. Even then there are unbelievable examples of selflessness, courage and idealism. At the urging of Dr. Jenan, for example, an organization for parents of children who have had cancer, or a re currently fighting cancer, was founded. Now it is self-supporting. Just one example of their work: In Iraq there are no blood banks or blood donation centers like we have. There, somebody in the family must donate blood for a sick relative. But what if the family lives far away and nobody can come, and the parents who remain with the child have already donated multiple times? The organization of parents managed to get a blood donation drive going among the local soldiers, so that children who needed a blood transfusion, would get one—something completely normal in our countries, but highly unusual in Iraq. And they have bigger plans. On their website they call upon the government to provide care for all the pediatric cancer

victims in the country. For us, this is nothing special; but in Iraq, where people are still only accustomed to taking orders and never acting proactively, this is magnificent and exemplary—and a tentative sign that could develop into something positive

And the Future of “Aladdin’s Magic Lantern”?

It exceeds my capacity to build a hospital in Basra—although I’d truly like to—but I do want to try to continue the work we’ve begun, despite financial crises and despite weariness, which can afflict anybody who does this work—practically—alone. The trip to Basra provided a huge incentive to keep going. We have demonstrated over the past few years that it is possible to provide concrete help, even in a country where chaos rules over everything—I have just experienced it. To see healthy, laughing children before you and to know that their lives can be preserved by one’s own labor is motivation enough to keep working.

Given the present circumstances I’m convinced that the need to provide further support for medications is absolutely urgent and necessary. By the end of August, at the latest, I will again need to send another shipment of medication on its way to Basra. Furthermore, I wish in any case to continue to arrange medical treatment of the sickest children in other western nations. Last year it was twenty children, this year there have already been 11 children treated in Europe. I have a long list of others who are still awaiting their chance, because the only chance they have of survival is to have an operation in Europe. And I would love to start a new project: sponsorships for children so they can attend school. For this to work, I would need to pay someone in Basra who would act very much in the role of a social worker by visiting these families regularly, identifying children who need sponsorship, monitoring their academic achievement, purchasing school supplies and uniforms, etc.

The path that now lies before Iraq is long. It is too long for one generation, too much work for one generation. Those children, those young cancer survivors, sang about hope—and that should give us all hope. Although the light at the end of the tunnel is not yet visible, perhaps we can divine a glimmer of hope, when we hear what one doctor told me—he told me this during my recent visit: “Austria, Germany and Switzerland are becoming quite famous among our people here. Whenever a child returns after receiving medical treatment in Europe, the whole village celebrates. The entire extended family of the child, often consisting of a hundred people or more, comes together and all of them hear—and see—what the people in those countries have done. People in the West take our sick children and return them to us healthy. And during these celebrations many prayers for peace and blessings are sent to those unknown helpers in Europe. Before this we cursed the West, because they brought with them the war. This has all changed for our people, and their thinking has shifted because of you!”

And once again I ask myself: Has our work accomplished more than it might appear at first glance? To bring about peace, in a place where war has ruled for thirty years, is a beautiful success of ours.



Children, who suffered from leukemia or cancer, you are healthy!

I am asking all of you who read this report to consider how we—despite financial crises—can continue to help. The poor and sick people in Basra need us; the lives of their children are literally in *our* hands. These days, I barely receive any donations. I don't know how I am going to finance our next medical shipment. I don't know how I am going to pay for continued medical treatment of these children in France, because I must underwrite some of the cost of surgeries done there. Are their companies willing to assume the cost of treatment for children with heart disorders? The funds, an exemplary amount from one company that I received two years ago for this purpose, are exhausted. I would be happy to come and give lectures or presentations at any institutions, schools, or private companies. Do any of you have other ideas? I would also be more than happy to broker sponsorships for children to attend school.

Please, pass this message and report along to everyone you know.

Please continue to donate!

Your help is essential!

Dr. Eva-Maria Hobiger

Donations for the Children in Basra can be made to:
DONATION ACCOUNT IN AUSTRIA:

**Erste Bank Wien
(BLZ 20111)
Konto Nr. 28520096800
„Aladins Wunderlampe“
IBAN: AT282011128520096800
BIC: GIBAATWW
DONATION ACCOUNT IN GERMANY:
Bayerische Hypo- und Vereinsbank AG
(BLZ 38020090)
Konto Nr. 0364524226
"Aladins Wunderlampe Deutschland e.V."
IBAN: DE33380200900364524226
BIC:HYVEDEMM402**

*„Aladdin's Magic Lantern—Help for Sick Children in Basra“ is a project of the Society for Arab-Austrian Relations (SAAR), 1150 Wien, Anschützgasse 1
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