

The American Obsession with Interventionism Produces Global Health Crises

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This past July, I came across a New York Times report entitled “A Climate Warning from the Cradle of Civilization” discussing the drastic climate changes and water scarcity in modern-day Iraq (1). The work caught my interest due to my own Iraqi heritage, and the author’s descriptions about the nation’s former rich and fertile soil growing date palms “so thick and close together that their leaves blocked the sunlight” complemented my own family’s narratives about the flourishing land they grew up on. However, I realized that the author missed an opportunity to provide crucial context regarding the impact of consecutive wars on the country, instead alluding to “weak governance and the continued reliance on wasteful irrigation techniques that date back millenniums to Sumerian times” as the reasoning for the country’s challenges today. The description paints Iraq as a backwards country that has consistently struggled to support its people, but this could not be further from the truth.

I find many Americans fail to recognize the prosperity of Eastern countries and how foreign imperial involvement hindered the livelihood of these nations. Research published in *The Lancet* describes Iraq among nations with the highest living standards in the Middle East prior to the Gulf War of 1991, boasting first-class healthcare facilities, where 97% of its urban population had access to primary care services and 95% received sanitary water (2). My own family was incredibly fortunate to echo this sentiment. Many Iraqis like to refer to the “old Iraq” as a time before the invasions (1991 & 2003) by the United States which have destroyed the country’s infrastructure, leading to many of the public health concerns faced today. Regrettably, wars waged by the U.S. have weakened several Eastern nations, which is especially evident when evaluating the public health crises faced by these countries.

Many of the public health crises in Iraq today are rooted in the destruction of the country’s infrastructure, dating back to the Gulf War of 1991. A United Nations mission concluded that the invasion resulted in “near-apocalyptic” destruction of economic infrastructure that had previously been a “highly urbanized and mechanized society” (3). Most electricity-generating plants were destroyed, and power distribution lines were again targeted during the

2003 Iraq War (4). The absence of electricity interfered with hospital operations, water distribution, and agricultural demands. Similarly, the United States carried out an operation destroying Iraq’s water purification system knowing that it would cause increased deaths from water-borne disease, resulting in a series of cholera outbreaks that continue to devastate Iraqis as recently as 2022 (5,6). The economic crises resulting from U.S. interventionism have caused many doctors to flee the country, leaving a shortage of physicians and resources to provide for a struggling population (2).

Iraq is not the only country that has faced deteriorating health conditions due to American interventionism. Since 2014, the United States has been intervening with the Syrian Civil War, imposing sanctions against the Syrian people that have exacerbated the trauma that ordinary citizens have been experiencing since 2011. In 2022, a United Nations expert urged for the lifting of unilateral sanctions due to shortages in medicine, medical equipment, and material for the rehabilitation of water distribution networks, as well as serious concerns for food security (7). While humanitarian exemptions exist for emergency situations, exemptions for the 2023 Turkey-Syria earthquakes were met with poor execution, requiring ample documentation and paperwork (8). General licenses for earthquake relief were only authorized for six months, which aid workers criticized as being too short for long-term rehabilitation projects. Unfortunately, these tactics are still implemented despite the lack of evidence supporting their effectiveness.

The brutal impacts on global health due to U.S. military tactics are not a recent development in modern history. During the Vietnam War, the U.S. military sprayed approximately 49.3 million liters of Agent Orange, an herbicide, to defoliate forests over 2.6 million acres from 1961 until 1971, when suspicions of birth defects began to rise (9). Later, research studies concluded that the use of Agent Orange is associated with multiple adverse health outcomes, including birth defects, diabetes, and cancer. Decades later, Vietnamese populations are still facing the health and environmental impact of the toxic herbicide. Nevertheless, the U.S. government has yet to take accountability for the destruction caused by

Agent Orange (10).

Many countries impacted by U.S. military tactics are still facing disastrous public health consequences today. Every time I learn more about the health conditions in Iraq, I consider how much of it could have been prevented without U.S. interventionism, and I apply a similar lens when learning about other countries impacted by war. I urge others in medicine to uphold the responsibility of prioritizing human life over political interests by critically considering the implications of the tactics that our country, a nuclear superpower, uses in armed conflicts abroad. A basic knowledge of history allows one to recognize how hegemonic powers play a significant role in impeding developing nations from providing adequate health and living conditions for their population. Unfortunately, this ill-guided practice has destroyed far more lives than it has saved. As future physicians, recognizing these harmful implications and advocating for human lives will be essential for preventing unnecessary losses and adverse health outcomes worldwide.

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