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The Sound of Silence: Social Work, the Academy, and Iraq

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Despite the imposition of economic sanctions against Iraq in 1990, the social work academy has ignored the impact of this global social policy promoted by the international community. Though evidence existed for more than 10 years that sanctions contributed to the deaths of hundreds of thousands of children and other vulnerable groups in Iraq, while also crippling the nation's health care and social infrastructure, the profession has remained silent. The implications of this case study suggest a need for greater engagement by social work researchers and the profession on global issues.

Key words: *Iraq, social work, economic sanctions, social work researchers, global issues, global social policy*

Introduction

What happens when hundreds of thousands of civilians in one country die within 10 years due largely to a policy carried out on behalf of the international community? For more than 12 years, the use of economic sanctions against Iraq, often enforced at the behest of the United States, produced a range of devastating consequences for the health and well-being of much of Iraq's civilian population. The sanctions were criticized as a violation of international human rights (Kozal, 2000); as a weapon of mass destruction that prevented Iraq "from satisfying its most basic humanitarian needs" (Gordon, 2002, p. 43); and as being responsible for "the deaths of more people in Iraq than have been slain by all so-called weapons of mass destruction throughout history" (Mueller & Mueller, 1999, p. 51). Empirical data show

that sanctions contributed significantly to the decline of Iraq's health care system, once among the most advanced in the Middle East (von Sponeck, 2002; Popal, 2000; Pilger, 2000; UNICEF, 1998). Child malnutrition, disease, and child/infant mortality increased sharply in Iraq in the 1990s under the sanctions regime, while food self-sufficiency declined (Pellett, 2000; Abergavenny, 2000; Ascherio, et al., 1992; Garfield & Leu, 2000; Wareham, 2000; Garfield, 1999a; Pape, 1997).

Despite these dramatic consequences, the issue of economic sanctions in Iraq has received only limited attention. Since the imposition of sanctions in 1990, social work scholars have largely ignored these alarming events, and the larger social science community has produced few articles on this topic. A literature review reveals that most academic research on sanctions comes from the health professions and, to a lesser extent, political science. Reports from humanitarian and non-governmental organizations also form a key body of literature on the topic of sanctions against Iraq.

The lack of attention paid to Iraq by the academy in general is troubling; the silence on sanctions by social work is especially disturbing given the profession's stated commitment to address injustice and oppression at home and abroad. In this case, silence by social work scholars is notable on two main issues confronting Iraq's civilian population: 1) internal policies, specifically Iraqi government repression and the general lack of "democracy"; and, 2) external policies, namely economic sanctions promoted by the United Nations. Both contributed to pervasive oppression and a significant decline in the health and living standards among most Iraqi citizens. This paper focuses on the latter issue: the contradiction between social work's emphasis on eliminating conditions of injustice and the reality of the profession's silence about one of the world's greatest humanitarian crises in at least the past decade.

The neglect of such issues in the social work literature, because they occur in the global arena and may be seen as outside the purview of social work educators, highlights the parochial nature of U.S. social work. Further, silence on key global problems, especially those dealing with overtly "political" issues, reinforces the false notion that politics—especially on the international stage—

has little bearing on the social work profession, education, and research. Given the numerous social problems that transcend national borders and impact human well being, and in the wake of September 11, the task of engagement with such issues is vital to creating policies worldwide that reflect the values of the profession.

Sanctions as Global Policy to Effect Political Change

Shortly after Iraq's army invaded Kuwait in August 1990, the United Nations authorized a range of military, financial, and economic sanctions against Iraq. Diplomatic relations with Iraq were severed by most nations, while the country was isolated from much of the world via the end of travel and other cultural exchanges (Kondocho, 2001; von Sponeck, 2002). Economic sanctions were originally imposed in an effort to gain Iraq's military withdrawal from Kuwait. However, despite the removal of Iraqi troops from Kuwait the UN Security Council in 1991 approved a second resolution, which mandated that Iraq had to meet several new conditions to bring about the end of sanctions (Hårleman, 2002; von Sponeck, 2002; Pellett, 2000):

- Destroy all "weapons of mass destruction" and long-range missiles;
- Pledge not to develop or acquire any such weapons in the future;
- Cooperate with the UN weapons inspection program;
- Recognize its 1963 border agreement with Kuwait;
- Compensate those who suffered as a result of the invasion of Kuwait;
- Repatriate Kuwaiti and other foreign nationals;
- Pledge not to support or engage in forms of international terrorism.

This second resolution significantly raised the obligations Iraq had to meet to end economic sanctions. The implications would prove important, as over the next 12 years the United States in particular argued for the need to modify and maintain sanctions as a means to achieve its own foreign policy goals (von Sponeck, 2002). Since 1990, U.S. policy toward Iraq increasingly focused on toppling Iraqi President Saddam Hussein (Falk, 2002; von

Sponeck, 2002; Cortright & Lopez, 2000). Sanctions thus represented a policy promoted by three different U.S. presidents (Aziz, 2000). Whatever results sanctions produced, it is likely that as long as Saddam Hussein stayed in power, the United States would work to ensure that UN sanctions continued (Byman, 2001; Tarzi, 2000). Indeed, despite mounting evidence of the impact of sanctions during the 1990s, the UN maintained the most punitive and extensive sanctions in history, while Saddam Hussein solidified his rule (Kondoch, 2001; Graham-Brown, 1999; Kozal, 2000).

The use of sanctions despite the civilian cost raised troubling issues about the political motives behind this policy. Gordon (2002) suggests U.S. manipulation of the sanctions program to suit its own global policy agenda "effectively turned a program of international governance into a legitimized act of mass slaughter" (p. 43). A former United Nations official found that UN policy in Iraq was so vague as to allow for conflicting interpretation of Iraqi compliance with disarmament demands throughout the 1990s (von Sponeck, 2002). This disagreement helped keep the debate focused on "weapons of mass destruction" and cooperation with the UN by the Iraqi government, rather than the human and social costs of sanctions.

The Impact of Sanctions on Iraq

In key respects, the use of sanctions against Iraq proved a relatively ineffective policy tool (Kozal, 2000). Rather than weaken Iraq, sanctions may have strengthened Saddam Hussein (Byman, 2001), in part by allowing him to cite external interference in Iraq as justification for political repression, religious persecution, and human rights abuses. In 1990, CIA Director William Webster predicted the measures would fail to have the desired effect on Iraq. He told Congress "there is no assurance or guarantee that economic hardships will compel Saddam to change his policies or lead to internal unrest that would threaten his regime" (cited in Pellett, 2000, p. 152). Nonetheless, sanctions were maintained throughout the decade and caused a dramatic decline in Iraq's social health and infrastructure. The civilian impacts were especially evident among children, those in poverty, and other vulnerable groups (Drèze & Gazdar, 1992; Garfield, 1999a; UNICEF, 1998). Using data from 1994–1999, British child health specialists found

an abrupt rise in maternal mortality and a doubling of death rates for children under five. The group implicated economic sanctions as the cause of malnutrition, which combined with pneumonia and diarrhea to create thousands of preventable child deaths (Abergavenny, 2000). In 1998 the UN cited malnutrition as "a potent factor for increased mortality in young children" since the imposition of sanctions (UNICEF, 1998, p. 25). They documented a dramatic rise in child mortality rates from 1989 to 1997: an estimated 40,000 "excess deaths" per year of children under five were linked to the collapse of the health care, sanitation, and food distribution systems (UNICEF, 1998). After 10 years of sanctions, Popal (2000) found that "malnutrition and under-nutrition are now chronic, and health facilities remain in a poor condition" (p. 79).

The civilian impact of sanctions was clear within months of their application. Following Iraq's defeat in the 1991 Gulf War, Hiltermann (1991) found that "the total devastation of the strategic infrastructure (power installations, telecommunications, airports, some industrial facilities) had made normal life in this country so dependent on modern technology virtually impossible" (p. 111). This destruction, combined with sanctions, prevented Iraq from mounting an adequate response to an emerging public health crisis (Hiltermann, 1991). As a result, the rate of malnutrition and water-borne diseases exploded in 1991, (Ascherio, et al., 1992).

Drèze & Gazdar's (1992) field research in 1991 found that despite an efficient public food distribution system in Iraq, "poverty and nutritional deprivation remain endemic, and for the poorest sections of the population, life grows increasingly difficult" (p. 922). While the Gulf War and an ensuing economic crisis crippled the Iraqi economy and the purchasing power of most citizens, the impact of sanctions emerged as the main barrier to the provision of basic needs and economic recovery. As Drèze and Gazdar (1992) predicted, the use of sanctions would institutionalize acute poverty throughout Iraq. In 1995, the UN found that some 20 percent of the population was living in "extreme poverty" (UNICEF, 1998).

The chronic crisis in malnutrition, and the rapid increase in child mortality and disease, led to a long-delayed agreement between Iraq and the UN in 1995 for a new humanitarian system

to address the situation. Dubbed a "temporary measure" to meet Iraq's humanitarian needs, the UN created a new oil-for-food program (United Nations, 1995; Kozal, 2000). The UN then allowed Iraq to sell a limited amount of oil every six months and use approximately two-thirds of the proceeds (one third was spent on UN administration and compensation to Kuwait) to purchase basic foods and medicine, make repairs to the nation's water and sewer systems, and help fund primary education (von Sponeck, 2002). This became the largest UN administered humanitarian program seeking to meet basic human needs in one country (UNDP, 2002a). The limit on how much oil Iraq could sell was later lifted, while the amount of revenue used for humanitarian needs was increased (Oil-for-Food Programme, 2003).

This change led to small yet vital improvements in the economy and greater access to food for much of Iraq's population (Popal, 2000). However, access to oil revenue was restricted; income was placed in a UN controlled account off-limits to Iraq's government. In addition, requests by Iraq for all imported goods were subject to approval by a UN committee. It became common for certain requested items—medical supplies and equipment, electric generators, materials to chlorinate water, and other humanitarian goods—to be rejected or subject to lengthy delay by the UN for fear that these so-called "dual use" items might be utilized for military purpose (Mueller & Mueller, 1999; Research Unit for Political Economy, 2003).

Despite limited progress in the availability of food, some medicines, and medical supplies, sanctions continued to undermine the overall social health of Iraq. Iraq's water and sanitation systems were so compromised by sanctions that many water-borne diseases became commonplace. The UN humanitarian coordinator for Iraq resigned in 1998 to protest the continued use of sanctions and their civilian impact, in particular their role in thousands of preventable child deaths each month (Kondocho, 2001). His successor quit two years later for similar reasons, as did the head of the UN's World Food Programme in Iraq (Kozal, 2000).

Following the U.S. war against Iraq in 2003, the Bush administration gained approval to gradually lift UN sanctions. Questions about the "effectiveness" of sanctions will likely be debated for some time, and a satisfactory answer is largely dependent upon

the criteria used to measure this issue. Of note, although Saddam Hussein remained in power until 2003, sanctions along with UN weapons inspections led to the dismantling of at least part, if not all, of Iraq's "weapons of mass destruction" (Weiss, 1999; Kozal, 2000; Manley, 2003; "Hans Blix," 2003).

Some caution that an accurate assessment of the impact of sanctions is unknown, due to the lack of precise data or its manipulation by the Iraqi government. However, many of these same researchers found that sanctions created widespread health and nutritional problems for most Iraqis (Baram, 2000; Alnasrawi, 2000; Kondoch, 2001; Garfield, 1999b; Byman, 2001). While methodological issues are significant, Weiss (1999) suggested that "a cluster of indicators" measuring economic, health, and socio-demographic data could help adequately assess the humanitarian cost of sanctions. Thus Garfield (1999a) found that more rigorous research methods still suggested 300,000 excess deaths of children under five occurred by 1999 from sanctions. Saddam Hussein was also charged with neglecting certain areas of Iraq in favor of others—in essence, misusing oil income while most of Iraq suffered. Initial UN research found that within the limits of the oil-for-food program, Iraq spent more than 85 percent of its allowed oil revenue on food and detergent, and on health supplies (UNICEF, 1998).

Other research has contrasted the state of health, nutrition, and well-being in Iraq under sanctions with the country's relatively affluent status in 1990. UNICEF found that prior to the 1991 Gulf War, Iraq had invested heavily in the health sector, making primary medical care available to nearly all urban residents and some 80 percent of the rural population. As a result, key indicators like infant and child mortality had been reduced significantly during the 1980s, while water and sanitation treatment services "were well developed" (UNICEF, 1998, p. 7). Support for all levels of education was significant; by 1990 more than 90 percent of Iraqi school age children attended primary school (UNICEF, 1998). Other research suggested that at least until the mid-1980s, in terms of social development Iraq was "fast approaching standards comparable to those of developed countries" (UNDP, 2002b, p. 11).

Despite documentation from respected agencies like the UN and independent researchers about the ruinous health and social

impacts caused by sanctions, both the U.S. and British governments contested the validity of these data, as did supporters of sanctions (von Sponeck, 2002; Garfield, 1999b; Kondoch, 2001; Kozal, 2000). Critics suggested that rather than being caused by sanctions, the social deterioration that occurred in Iraq was a direct result of the negligent spending priorities of Saddam Hussein. In response to the Clinton administration, the UN found that sanctions and the use of a *temporary* oil-for-food program to address a *long-term crisis* were a primary cause of the ongoing health and nutrition crisis in Iraq (Graham-Brown, 1999). A 1998 report on women and children found that malnutrition was not a public health problem in Iraq before the application of sanctions: "Its extent became apparent during 1991 and the prevalence has increased greatly since then . . . By 1997, it was estimated that about one million children under five were malnourished" (UNICEF, 1998, p. 23).

Over the next few years, health and nutrition conditions stabilized or improved slightly due to the oil-for-food program, especially in reducing chronic and acute malnutrition in children under five. However, infant mortality stayed at alarmingly high levels, more than one in five children were malnourished, and gastrointestinal diseases remained key problems among Iraqi children (UNDP, 2002a). On the eve of a second war with the United States, after 12 years of sanctions, nearly two-thirds of Iraqi's were dependent on government food rations, while the nation's poverty and jobless rates continued to inhibit economic and social progress (UN Security Council, 2002). Summarizing the impact of sanctions, the UN found that Iraq "experienced a shift from relative affluence to massive poverty" (UNDP, 2002b, p. 12).

A Social Work Perspective on Sanctions

Viewed from a social work context, the purpose and the impacts of economic sanctions against Iraq warrant analysis and critique. This is appropriate precisely because of those professional core values that call upon social workers to eliminate and transform oppressive situations and institutions (Gil, 1998). The National Association of Social Workers (NASW) Code of Ethics (1999) includes as a core "ethical principle" that social change efforts by all social workers should be "focused primarily

on issues of poverty, unemployment, discrimination, and other forms of social injustice" (p. 5). Among its "ethical standards" is the idea that as part of their ethical responsibilities to society "social workers should promote the general welfare of society, from local to global levels . . ." (p. 26). Finally, the preamble of the Educational Policy and Accreditation Standards endorsed by the Council on Social Work Education (2001) notes that the U.S. social work profession, in striving "to correct conditions that limit human rights and the quality of life," should work "to effect social and economic justice worldwide." (Council on Social Work Education, 2001, p. 3).

Given the immediate and long-term impacts on human and social development attributed to sanctions, the social work profession is well within its mission to address this situation via scholarship or practice interventions. Thus conditions in Iraq caused by sanctions meet the basic criteria of "injustice & oppression" advanced by Gil (1998). He suggests oppression refers not only to domination and exploitation between social groups and classes within societies, but also globally between entire societies, while injustice includes the maintenance of inequalities "and dehumanizing, development-inhibiting conditions of living . . . imposed by dominant social groups, classes, and peoples" (p. 10).

In the absence of a formal declaration of conflict by the UN or the United States against Iraq, sanctions served as a form of economic warfare for more than 12 years, one whose impacts were tangible in the lives of most Iraqi citizens (Mueller & Mueller, 1999). Compared to the potential expense of a war with Iraq, the use of sanctions allowed the United States to pursue its policy goals with little cost and relative impunity. Yet most research found that the biggest effect of sanctions was to harm the civilian population, rather than serving stated political aims.

Increasingly, sanctions have been used by the United States (often with the UN) as a foreign policy tool, despite their cost to civilians and inconsistency with UN accords guaranteeing human rights and access to goods essential to survival (Garfield, 1999b). Sanctions are thus viewed as a coercive tool used by some nations and international agencies like the UN (Center for Strategic & International Studies, 1999; Kozal, 2000; Garfield, 1999b). This highlights the influence of powerful nations on the

UN Security Council to maintain harmful policies that serve their own national interests. According to Mueller and Mueller (1999), through the use of sanctions "the dominant powers have shown that they can inflict enormous pain at remarkably little cost to themselves or the global economy. Indeed, in a matter of months or years whole economies can be devastated . . ." (p. 49). Garfield (1999a) found that sanctions against weak nations like Iraq "reverse 'development' gains, and their effects cannot be mitigated by humanitarian assistance alone" (p. 1).

These conclusions should concern a profession committed to the rights of people and communities everywhere to freely develop to their full potential. The question of the practicality rather than the morality of sanctions should make this issue even more compelling to professional social workers. Despite the claim that sanctions are a justifiable policy tool short of war to induce political change, there is little to suggest that they are an effective intervention. With few successful examples to cite, at best this remains an open question depending on the specific situation. The fact that utilizing sanctions may be detrimental to the United States has also been noted (Center for Strategic & International Studies, 1999), raising the question of why sanctions are used at all. In sum, the literature fails to demonstrate that the use of sanctions in Iraq was either effective or a humane method to achieve policy goals. Indeed, because the opposite conclusion seems clear—that sanctions ultimately represent a "form of collective punishment" targeting civilians (Garfield, 1999b, p. 53)—a social work response to their use seems warranted. As Kozal (2000) noted regarding Iraq, "when the enforcement of the sanctions worsens the humanitarian situation or violates human rights, the efficacy of the method employed must be examined" (p. 383). Given the likely use of economic sanctions in the future, such a challenge by social workers in the United States (or elsewhere) would thus bring a critical perspective to their use as a legitimate global policy.

Divergent Responses from the Social Work Academy

How did social work scholars react to the use of sanctions against Iraq? A survey of the literature revealed that fewer than 40

articles dealing with *any* aspect of Iraq were published in professional social work journals over a period dating back more than 20 years. Of these, none offered a specific (or even secondary) focus on the issue of economic sanctions, and only two of the articles dealt indirectly with U.S. policy toward Iraq following the end of the 1991 Gulf War. A literature search conducted in February 2003 in the "Social Work Abstracts" and "Social Services Abstracts" databases was performed using the keyword "Iraq." Only five results were found in the social work literature, and an additional 31 in the "Social Services Abstracts." A total of 342 citations were identified using the same keyword in the "Sociological Abstracts" database. Other social science literature was discovered using a "snowball" technique, primarily by reviewing the bibliographies of relevant articles about Iraq.

While the social science literature contained more total entries concerning Iraq (nearly 350 citations), less than 15 of these articles dealt specifically with the issue of economic sanctions. Only four articles were published within the first three years of the implementation of the sanctions (Cainkar, 1993; Drèze & Gazdar, 1992; Hiltermann, 1991; Chomsky, 1991), while two others dealt with public attitudes toward Iraq (Toth, 1992; McAlister, 2000). In comparison to the social work and social sciences literature, the health professions produced a constant stream of research starting in 1991 dealing with the impacts of sanctions in Iraq. While the actual number of citations (a total of 191) was less than in the social sciences, the number of refereed publications and other relevant articles that dealt directly with sanctions was significantly higher. Two sources were used for this search, the "Health Reference Center—Academic" database, and "PubMed," the National Library of Medicine's search service. The conclusion from this literature is clear: sanctions had a negative impact on much of Iraq's civilian population, while undermining the ability of the public health system and social infrastructure to address the crisis in health care, nutrition, and economic development.

One inference from the literature is that social work researchers were not adequately informed about the sanctions issue and thus did not pursue it as a potential line of scholarly inquiry. However, advances in communication and the ease of international travel make it likely that some common knowledge about the social

conditions that existed in Iraq was available to social work scholars. Alternatively, the lack of attention to this topic within social work scholarship may reflect a bias toward research on domestic issues. One might assert that other disciplines, in particular health/public health, have traditionally pursued a more international focus than social work; these professions are actively involved in research and practice on global (health) problems to an extent unique among academics. Thus, it may be understandable that the issue of Iraq and sanctions has not been addressed in the social work literature, as some might argue that it is beyond the purview of social work, especially as the profession is structured in the United States.

Another hypothesis is that social work researchers and academics were aware of the impact of sanctions in Iraq, and that sanctions may have been viewed "as an acceptable means of pursuing desirable goals" (Mueller & Mueller, 1999, p. 52). Regardless, the failure to address or investigate this situation in the literature suggests tacit support at least for UN and U.S. policy goals in Iraq. Both premises—ignorance of the situation in Iraq or an unwillingness to engage in research on critical international issues—should be re-examined in an effort to make the profession more relevant in an increasingly interconnected world.

The Role of Social Work in a Global Society

That sanctions caused a humanitarian crisis in Iraq supports the need for greater engagement on global issues within social work. This is essential given the profession's statements about enhancing human well-being and mandates to challenge injustice and oppression wherever they occur (Gil, 1998). The contradiction between these professional values and the attention (in the social work literature) paid to specific international issues raises a fundamental question: to what extent is the social work profession committed to critical engagement with global problems, especially those involving war, genocide, and human rights?

Despite pleas for a more "internationalized" form of practice (Hokenstad, Khinduka & Midgley, 1992), international social work is largely focused either on comparative studies of social welfare policies, or the practice of social work in different

countries. Caragata and Sanchez (2002) suggest that the formal support for international social work education reflected in North American MSW programs is not matched by scholarship or a specific commitment to take action on "political" issues in the *global arena*. This contradiction, which also belies core values embodied in the NASW Code of Ethics, highlights a key limitation of the profession. In the case of Iraq, the silence by social work academics—the failure to generate new and/or report on existing research—helped perpetuate a climate of ignorance about the effect of sanctions, as well as tacit support of U.S. policy goals. Some suggest this highlights a trend within the profession, which in effect parallels broader social apathy toward most global crises.

Johnson (2002) identified several reasons "why the American citizenry—including social workers—is largely silent with respect to world affairs and politically disinterested at home" (p. 10). He cites a pervasive cultural domination by elites over key aspects of society, in particular the control and delivery of information to the public; a process of "othering" in which different groups, populations, or countries are socially constructed by elites as problems to the national interest, or a dangerous class that must be controlled for the good of society; and a firmly entrenched social and political stability which allows most U.S. citizens to lead a middle class ("normal") life "without paying attention to the politics, the people, or the world around them" (p. 10). The influence of "othering" was also raised by Toth (1992), who argued that U.S. officials and mass media effectively demonized Saddam Hussein—depicting him as "villain and devil" (p. 26)—to justify U.S. military action against Iraq in the 1991 Gulf War.

Mueller and Mueller (1999) suggest that "a lack of concern about foreign lives," especially those viewed as opponents of the United States, is a key reason the deaths of thousands of Iraqi civilians due to sanctions failed to warrant significant attention in the United States (p. 52). The effects of moral disengagement, "in which the normal inhibition of violence is deactivated through several well-defined cognitive processes," may also help explain public opinion toward Iraq (McAlister, 2000, p. 191). Trends within the profession itself may also help explain the lack of attention by social work scholars to sanctions in Iraq. Mirroring other research (Fisher & Karger, 1997; Specht & Courtney, 1994),

Johnson (2002) claims that the quest for professional status by social work has led to an obsession with private practice and self-interest. This emphasis on a distinct social work identity, they allege, has come at the expense of engagement and relevance on key social and political issues, both domestic and abroad. Caragata and Sanchez (2002) also find that the North American social work emphasis on individual treatment and clinical practice has led to minimal professional involvement in the international arena. They find this significant, since social workers around the world are confronted with universal problems like poverty, health care, and ethnic and religious conflict.

Shamai & Boehm (2001) identify a common social work viewpoint that national policy and politics is not related to typical social work practice, and assumptions that the social work profession has little influence over national political decisions. They suggest that both attitudes contribute to a climate of silence on "political" and international issues, and emphasize the danger in remaining "removed from political uncertainty anywhere in the world," since national politics can have a direct or indirect impact on the provision of social services (p. 358).

Johnson's (2002) plea for a more globally engaged professional presence—in particular on behalf of those adversely affected by governmental actions—has resonance concerning Iraq. One example of the interweaving of international and national politics is the concern that the cost of U.S. military intervention (in Iraq and elsewhere) threatens funding for social services (McAlister, 2000). This issue was raised after the first Gulf War by Stoesz (1992), and is relevant as the United States is committed to fighting and winning an expensive and vaguely defined global "war on terror," with ambiguous means of measuring "success." Thus, in response to an alleged ongoing threat to the security of the United States posed by international terrorism, military spending is expected to rise dramatically. President Bush's projected Defense Department budget plan calls for increasing military spending by more than 25 percent over the next five years, reaching \$500 billion by fiscal year 2009 (Congressional Budget Office, 2004). This increased spending will likely reduce available federal resources for social welfare programs, posing a direct, long-term challenge to the social work profession and the provision of social services. As a result, recipients of public services

and other vulnerable groups in the United States are threatened by the “war on terror,” and the normalization of a “permanent war economy.”

The Need for Global Engagement

More direct social work engagement on international issues offers the hope that alternatives to structural violence as policy can be pursued. What can the profession offer on issues of global conflict and oppression? Social work is founded upon a unique point of view, one that translates into a professional obligation to address human suffering, structural inequality, and the causes of these conditions. While to date this duty appears underutilized in the international arena, there is much to suggest that social workers can—and should—help resolve global conflicts. Such behavior can take many forms. Social work scholars and educators can address global socio-economic-political issues in their research, while integrating these issues into the classroom. Students and practitioners can be encouraged to take a more active interest in global problems as part of an expanded concept of social work practice. What is needed are activities distinct from engaging in comparative research on social policies, examining the commonalities and differences of international social work, or taking a course on “international social welfare,” all worthy endeavors in themselves (Hokenstad, Khinduka & Midgley, 1992). Rather, North American social work scholars and practitioners should commit themselves to address international problems of conflict and violence, especially those in which the United States plays a defining role. An example of such involvement was the letter written by NASW President Terry Mizrahi to George Bush in the fall of 2002, opposing unilateral, preemptive military action by the United States against Iraq, and urging a non-violent resolution of all international conflicts. The association also asked its members to write public officials with a similar message. Of note, NASW never took a formal policy position in regard to the need for nor the consequences of sanctions against Iraq.

The new conventional wisdom holds that in the wake of September 11, there is an urgent need to understand and address international events, as the United States has become inextricably linked to every corner of the world. This task is especially rele-

vant for social work scholars and educators, in order to promote our ethical standards and practice methods in addressing global problems. Inspired by our values, social workers must oppose apathy on issues of war and peace, structural violence, and human rights, and instead emphasize our collective responsibility as social workers in a global society. Attitudes of “moral disengagement,” if unchallenged by social workers, clearly pose significant risks. For example, there is growing recognition that the economic, political, and social conditions in many “Third World” countries have created fertile ground for resentment and violence toward the United States, which is often seen as tolerating inequality in those states in pursuit of larger policy goals. Also, economic sanctions against weak nations like Iraq undermine international support for the United States given the inevitable suffering this causes among civilian populations. Thus all social workers should be concerned with U.S. policies—even if they occur in the global arena—that have clear, negative impacts upon vulnerable groups. Addressing these issues with greater dedication will advance the social work profession, and through collaborative efforts help ensure that people worldwide benefit from our insight and experience.

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