

After Ibn Zuhur

Before it was trashed amidst the U.S.-led invasion, this hospital outside Baghdad was both protector and prison for its HIVers in Sadaam's Iraq. Have they been liberated-only to be left to die?

October 1, 2003 By Fariba Nawa

Sari Zegum holds his mother's hand loosely, gazing at the straw carpet in his family's mud house. The 10 year old's throat is too sore to speak. Hoarsely, he tries. "My neck and stomach" is all he can say, pointing. His belly protrudes like a malnourished baby's, his ear is bent in half, and pinkish boils cover his face and arms.

Sari is one of 73 people with HIV in Iraq, by the last count of the country's AIDS Studies Center before U.S.-led troops invaded in April. The figure is likely higher, even though Saddam Hussein's regime mandated that every border-crosser take an HIV test. Positive foreigners were turned away, while locals were moved to Ibn Zuhur hospital outside Baghdad, the nation's single public AIDS facility. Some lived there; others dropped by for treatment; all got a monthly stipend roughly equal to \$7, food rations and clothes. Wadah Hamed, MD, who heads the AIDS Studies Center, says the World Health Organization (WHO) also dispensed drugs, including AZT, ddi, ddC and Crixivan. It is widely believed, however, that the regime quarantined patients there, especially in the '80s.

We may never know the truth. Soon after troops marched into Baghdad, looters ransacked the hospital. The six resident patients, five of them prostitutes, vanished. Thieves took furniture, then everything from medical equipment to contaminated syringes. The few outpatients who still come around since the war are seen at a nearby TB hospital, but it's overcrowded and understaffed. One can only wonder: In a country where chaos has replaced terror and where food, medicine and health care are even scarcer than before the war, does the ruin of Ibn Zuhur foretell HIV positive Iraqis' liberation — or their demise?

A FAMILY WAITS

Three months after the U.S. declared victory, Baghdad is still hobbled. Water, electricity and phone service are spotty or nonexistent. Public demonstrations, forbidden by Saddam, occur daily. Two million civil servants are unemployed, many shouting "No to America, no to occupation!" in the streets. Coalition soldiers continue to die in skirmishes. English graffiti on a bombed-out government building blares, "Fix this corrupted ministry"—the same health ministry that built Ibn Zuhur.

Sari Zegum spent two months there. He's happier now at home, even if, at 32 pounds and three feet tall, he's stopped growing. He lives with his eight siblings 40 minutes outside Baghdad. Green pastures surround the house, and the sick child often plays outside, amidst the family's six cows and three shepherd dogs.

The Zegums hide Sari's diagnosis from neighbors, but they are open and deeply hospitable to foreign press, desperately hoping that publicity may save Sari's life. "We don't want money," says his mother, Fatin Hamid Daud, 38, a confident, urban-raised woman with striking olive skin and striking sad eyes. She is the first wife of Sari's father, Zegum; the second, Fazila, lives with them as well. "We want a cure for our child to be healthy again." Two former Ibn Zuhur doctors who see him now at the TB hospital say he is taking AZT and ddC, but they need to get him a third drug to fight HIV, plus medicines to treat his oral thrush, skin infections and osteochondritis, a lack of blood to his joints that causes him severe pain.

His father, 55-year-old Zegum, lost three fingers fighting in Iraq's eight-year war with Iran and now does yardwork for meager cash; the family barely gets by with its farm and livestock. They have already spent \$500—far beyond their means—for second and third opinions from private doctors, and then, once HIV was diagnosed, to get to and from Ibn Zuhur. But the boy has deteriorated rapidly. His decline seems unstoppable.

Two years ago, Sari had severe diarrhea. His mother says a hospital doctor diagnosed anemia and injected new blood. Two months later, Sari developed a rash. Another blood test found HIV. "We didn't think AIDS existed in Iraq," his mother says.

CONFLICTING ACCOUNTS

HIV is a shameful secret here, believed to result only from promiscuity, gay sex or drug use. But 85 percent of PWAs are thought to have gotten it through blood products imported in the '80s from France's Merieux company. About 123 people with hemophilia received the bad blood, many passing it sexually to their spouses. Iraq has sued Merieux for \$33 million, but the company, now Aventis Pasteur, denies all responsibility.

Hamed also insists that no one who's contracted HIV in Iraq in recent years can blame the blood bank, which he says has been clean for several years. He suggests that Sari likely got HIV at the barber, or when he was circumcised.

The Zegums know little about AIDS. They often make Sari sleep outside, alone. His food is sometimes put in a separate bowl, and when he hugs his siblings, they pull away, afraid. Reminded that it is nearly impossible to get HIV from casual contact, they say, "You never know."

"He hates it when we separate him," his mother says, tears filling her eyes. "How can I tell him not to hug and kiss us?"

This afternoon, while Baghdad simmers, the Zegum home is mild and breezy. An electric fan hums overhead, and soothing Koranic recitations echo from a tiny stereo and TV set. The family spends

little time indoors. All have duties: The women milk the cows, cook and clean. Zegum and his sons till the land. Only two of the children walk the 90 minutes to school.

Sari is left to play, though doctors have warned him to rest. He and his siblings run barefoot, swim in the nearby canal and play soccer. Sari terrorizes his two cats. Those are his good days. When he's in pain, more than half the time, he complains. He often cannot breathe well. He shakes in his sleep. "He gets nervous, leaves the house, hits his brothers and sisters and says he wants to kill himself," his mother says.

She takes him to the TB hospital whenever he declines, and he often improves there. But the two-hour trip is long and costly for the family, who rely on public transportation.

Sari has been told he may die. His mother says he is mature for his years. But he won't discuss his illness with strangers. He goes limp in his mother's arms while she shows his deformities. "I pity him," says his older sister, Sabine. "I cry when he's in pain. I wish he would get better or just die."

OLD THINKING, NEW REALITY

The stipend and checkup for which HIVers reported to Ibn Zuhur on the fifth of each month under Saddam have become sporadic since the war. The WHO dispensed \$28,000 for July, August and September installments, says its Faris Buni, MD. Hamed says that Iraq now intends to give patients roughly \$10 a month for emergency goods.

Most of the 244 people with AIDS first documented in Iraq in the late '80s have died—but for the survivors, the scenario is bleak. Access to antiretrovirals and other key medications is spotty, as in Sari's case. Hamed says many patients used to refuse HIV meds anyway, thinking they'd die regardless.

As Ibn Zuhur's patients have fled, health care professionals worry the virus will spread, especially through the prostitutes. Hamed says his staff is looking for them—and that he's trying to meet with Iraq's interim leadership about the matter.

Under Saddam, schools and media offered no AIDS education. The United Nations Children's Fund (UNICEF) fought to get prevention information to community and health-care centers. But the Muslim nation, in which sex talk is taboo, permitted only abstinence instruction. Shoubo Rasheed, MD, who worked on the project, says UNICEF plans to introduce more explicit HIV education.

According to Hamed, though, "Health education toward AIDS could create a disturbance in Iraq, because we don't have a real problem, like we do with cholera or malaria." He notes that Saddam's regime HIV-tested 4,300 ostensibly high-risk Iraqis, mostly prostitutes, and none tested positive.

But the two doctors now treating Sari say that Hamed embodies "the old Baathist way of thinking," referring to Saddam's ruling party, which routinely withheld the truth and punished or killed those who spoke it. Moreover, Iraq's current instability and penetrable borders make it fertile

ground for the spread of HIV. “Since there were so few cases, AIDS was swept under the carpet and largely ignored,” say the doctors, who withheld their names. “Now it’s the same faces running things in the ministry of health. If a new approach is not adopted, AIDS could go from 80 cases to thousands very quickly.”

TWO WIDOWS

The Palestinian caretaker Rouda Fahd Ali, 47, has lived beside Ibn Zuhur’s patients for 17 years. Plump and vociferous, the take-charge widow emanates Mother Teresa’s warmth. She feels more for the patients than perhaps anyone else does. But she has little to do these days, because most are missing or wait for their stipends at home.

Ali has watched 40 patients die, some in her arms. “I’m doing this for God,” she says, sitting in her brother’s air-conditioned house. “I’m the only one who’s stayed with them since 1986. I’m their friend, their big sister, one of the few who comforts them.” She also paints a bright picture of their lives, calling them normal, independent and accepted by their families. Few lived at Ibn Zuhur, but she visited them and took them to shrines and picnics. Most come from poor parts of Baghdad and barely get by. A few are trying to open newsstands now.

Before the coalition invaded, the patients enjoyed a safe community, Ali says. They could socialize and support one another; they were also encouraged to marry each other. One couple married at Ibn Zuhur and had a son—born HIV negative, Ali says, even though the mother hadn’t taken anti-transmission meds. The husband died two years later, and the woman returned to her hometown, near the Syrian border.

Ali denies that patients were held at Ibn Zuhur. Upon arrival, she says, “they were hospitalized for three to four months and not allowed to leave. That was for checkups. After that, they could go wherever they wanted.” Yet it is hard to tell if she is lying—or to forget that, with Saddam still missing, many Iraqis fear he may return to power, and that those who spoke or acted against him in his absence may be punished.

Since the war, some patients have told the Western press they were quarantined at Ibn Zuhur in the late 1980s. When they were finally released, some had nowhere to go. Others lived there part-time when they wanted to hide their obvious sickness from their neighbors.

Nawal Muhammed (not her real name), 40, is a widow with HIV who still shows up for her provisions. She tested positive in 1994, soon after her husband died of AIDS-related typhoid, and has masked her status ever since. “The secret is killing me more than the disease,” she says. “But I cannot reveal the truth. No one will speak to my family if they find out.”

Muhammed, an accountant, comes from a lower-middle-class Baghdad family. She looks healthy and stylish, with orange-painted nails and heavy makeup, and observes Islamic dress in a black head scarf. She is reluctant to speak in front of Ali at the TB hospital, where patients now come for treatment, but Ali won’t leave her side. Staffers scurry around, drowning out her gentle voice. Slowly, she opens up, unleashing her frustration and ambivalence toward her husband and her life.

Muhammed's husband and two of his brothers were born with hemophilia. They contracted the virus from blood products they received in the '80s. But her husband wasn't diagnosed with HIV until three years later. Muhammed tested negative then. "The police came in an ambulance and took him away to the hospital where they isolated him for three years," she says, her gold wedding band still on her finger. "I was shocked. I didn't know what had happened. I stayed with him off and on."

Over the years, the two had unprotected sex, even though they knew Muhammed could get HIV. They disliked condoms, she says. The couple had a girl and two boys—all HIV negative, Muhammed says—who are now 10, 13 and 16. Muhammed lives with them, plus three in-laws, in a modest house. The relationship with her in-laws, however, is tense.

She and the children keep to one sparse room. Her husband, who was a taxi driver and bank teller, left them nothing. She supports the children with her HIVer's stipend and salary of \$25 a month. They try to lead normal lives: The children go to school daily and Muhammed works two days a week.

A "DEN OF DEATH"

Describing her misery, Muhammed quietly weeps. She's healthy now, but every time she feels sick, she thinks it's the end. She doesn't take her medication because she believes it's useless. Her children, who know of her illness, are her only reason for living, she says. She's pleased they do well in school, but her teenage son is depressed. He has watched his father die, and now Muhammed can't bear him to imagine her dead.

"The day my husband died, I lost my dignity," she says. "I lost everything." Yet she also blames him for her illness and anguish. He should have left her, she says, when he learned he had AIDS. "I will die a martyr because I haven't done anything wrong," she adds. "I'm not afraid of death. I just don't want my children to be orphans."

When Muhammed comes to Ibn Zuhur for her monthly provisions, she avoids the other patients with HIV and feels only gloom. She finishes the interview pensive and sad.

Muhammed and Ali walk to Ibn Zuhur, a block away, to show the wreckage. What used to be a 250-bed facility with a garden and theater is now a pile of light-blue bricks. In front of press and hospital staff, looters pick away at wires and files strewn inside the halls. A truck stacked with rubble drives off.

"They're stealing the bricks to sell," Ali yells, horrified.

After the first looting, when only furniture was swiped, the French relief group Première Urgence planned to rehabilitate the hospital. But no one has protected it since, and now, three months later, there's nothing left to renovate.

The U.S.-led coalition has a military base four miles away. Some aid workers believe that heavy

fighting in the area exposed both Ibn Zuhur and the TB hospital to depleted uranium, but there's no conclusive evidence of radiation.

"We told the soldiers that looters were looting," says Estelle Langlais of Première Urgence, who visited the hospital several times. "They didn't do anything about it." Now the group is instead focusing on providing aid to the TB hospital.

Muhammed kicks at the bricks, looking pleased. Asked if she's happy the hospital was destroyed, she gazes at Ali fearlessly. "I have to be honest," she says. "I'm so glad it's gone. This was a den of death. Its destruction is my freedom."

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