

Iraq (Humanitarian Contingency Plan) debate

Thursday, 30 January 2003

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Ms Oona King (Bethnal Green and Bow): I welcome this debate on humanitarian contingency plans for Iraq, and I am grateful to the Conservatives for their interest in this critically important area, although in my view that is almost as surprising as Dracula securing a debate on blood transfusions for haemophiliacs. I note that the hon. Member for North-East Bedfordshire (Alistair Burt) made a somewhat personal attack on me. What he does not seem to grasp is that my attack on the Conservatives is not personal at all; indeed, I had a meeting this morning with Baroness Chalker, one of the most intelligent and sincere people ever to grace the Conservative Benches.

I am not looking at Conservative Members' personal qualities; I am looking at their record. Eighteen years in office and what did they do? They cut aid to the world's poorest people and linked it to trade. That is the record. It is a shameful legacy, which this Labour Government have consigned to the dustbin of history. I would be very happy to leave it there, if only Tory MPs would stop acting as though they ever did anything useful when it mattered: when they were in power.

Alistair Burt: If that is the hon. Lady's view, perhaps she might enlighten us as to the tone of her conversation with Baroness Chalker this morning.

Ms King: I am an executive member of the newly formed all-party group on Africa, which the hon. Gentleman is very welcome to join. However, he might also want to think about a reconciliation and truth commission within the Tory party, in order to come to terms with its shameful past on this subject.

How urgent are our efforts to prevent blood being spilt, and to minimise any civilian casualties? Our first and foremost aim must obviously be to minimise the loss of human life. For the purposes of the current debate on Iraq, there are four possible causes of loss of life, all of which are more or less interlinked: first, military action; secondly, the development and use of chemical and biological weapons; thirdly, the poverty that faces most developing countries in that region; and fourthly—a particularly lethal cause of loss of life—Saddam Hussein himself.

The latter is not a flippant point. I made the same point during a debate on sanctions in Iraq some years ago, and it was eloquently restated today by my hon. Friend the Member for Cynon Valley (Ann Clwyd). The worst infant mortality and malnutrition in Iraq is in areas under Saddam Hussein's control. In northern, Kurdish-controlled areas of Iraq, which face greater sanctions and shortages, loss of life is less. Saddam Hussein kills more Iraqi children than anyone else, but that does not mean we can abdicate our responsibilities to those same children. Saddam Hussein has built and used chemical and biological weapons, but that does not mean we can abdicate our responsibilities towards the prospects for their future use.

The dilemma that we face is that if we permit the development of chemical, biological and possibly nuclear weapons, at some point we are inviting a terrible loss of human life. Yet if we take military action to disarm Iraq and enforce UN resolution 1441, we risk a more immediate loss of life. For this reason, it is my

30 Jan 2003 : Column 1089 fervent, although perhaps futile, wish that we avoid military action. None the less, the decision rests with Saddam Hussein: it is up to him whether he wishes to do what he has been requested to do by the UN.

So I agree with the Government's actions so far. Threatening Saddam Hussein with military force has been the single most effective thing that we have done in the past 11 years to get him to accept UN authority. And it is UN authority that is at stake. I trust that the UN will be given more time to carry out its work. If military action is taken, humanitarian risks are grave. As we have heard, 16 million people rely on food aid through the oil-for-food programme. That is 60 per cent. of the Iraqi population.

Other humanitarian risks that have been set out include regional factionalism and bloodletting—we have seen terrible examples of that in Afghanistan, post conflict—risks to sanitation facilities; the deliberate or inadvertent use of chemical and biological weapons; and the terrible legacy of land mines and cluster bombs. Will the Secretary of State make representations—perhaps she has already done so—to the Defence Secretary and the Prime Minister to ensure that those types of weapons are not used? Will she also let us know what further humanitarian aid the British Government are making available to Iraqi civilians? It might come as a surprise to people to hear that the British Government are one of the largest donors to Iraq, and that since the Gulf war we have committed nearly £100 million for water, sanitation and basic health provision. We also run a programme to help Iraqi refugees in Iran.

However, the worst-case scenarios facing Iraqi civilians as a result of military action could dwarf the terrible problems that they have faced so far. That is why any military action must take account of humanitarian risks, perhaps in a way that challenges current military thinking. In the past, the vulnerability of the civilian population has not usually been at the top of the military's agenda—but if it is not at the top of the agenda this time, I have no doubt that the military will win the battle but lose the war.

Half of Iraq's population are children under 14. If we do not protect those children, all the military hardware in the world will not protect us from the justifiable anger of the Muslim world—indeed, from the anger of all those who hold sacred the value of human life. This Government are renowned for having developed one of the world's most effective humanitarian programmes. For that reason, we have a responsibility to make every possible effort to ensure that humanitarianism is at the top of the international community's agenda.