# Appendix A
## *Harvard Study Team Members*

**Lincoln Chen** (USA, team leader) is Takemi Professor of International Health and Chairman of the Department of Population and International Health at the Harvard School of Public Health. His recent interests include health, population, and development policies in response to political crisis and humanitarian emergencies.

**Winifred Fitzgerald** (USA, deputy team leader) is a policy analyst with 7 years field experience in Africa with the Peace Corps, UNDP, and Catholic Relief Services. She holds a masters degree in public policy from the Harvard Kennedy School of Government and focused on political, economic and policy analysis.

**Gretchen Berggren** (USA) is a public health physician with several decades of experience in Haiti on health and nutrition programs. A faculty member of the Harvard School of Public Health, she focused on health and nutrition programs for children and women.

**Sarah Castle** (UK) is a demographer-anthropologist with residential field experience in Africa studying women's health and family livelihood strategies. She has a doctoral degree from the London School of Hygiene and Tropical Medicine and focused on women's reproductive health and household coping strategies.

**Catherine Michaud** (Switzerland), a public health physician, is a research scientist at the Harvard School of Public Health specializing in health and nutrition data analysis and research methods. She focused on indicators of the health and nutrition of children and women.

**Marko Simunovic** (Canada), a Toronto-based physician and a graduate of the Harvard School of Public Health, has extensive experience in human rights in the Balkans and Central America. Seconded from Physicians for Human Rights, he focused on health and human rights.

# Appendix B
## *Organizations Contacted*

### Haitian Organizations

Government
Centre de Technique de Planification et d'Economie Appliquée
Ministry of Health
Ministry of Social Affairs

Private Agencies, NGOs and Individuals
Agri-Supply
Albert Schweitzer Hospital
Association Nationale des Agro-Professionels Haitiens (ANDAH)
Association des Industries d'Haiti (ADIH)
Centre d'Analyze en Politique de Santé (CAPS)
Centre d'Education Populaire
Centre de Promotion des Femmes Ouvrières
Clinique pour Femmes
Delatour, Leslie (Economist)
FRIC
Institut Haitien de l'Enfance
International Child Care
Programmes des Medicaments Essentiels (PROMESS)
St. Joseph Hospice
Université Quisqueya
University Hospital
Miscellaneous interviews and focus groups with church leaders, women's groups, health workers, families, small traders, etc. in Meilleur, Grand Guave, Cité Soleil, St. Joseph's Hospice, Deschapelles, Solino Health Center, and Marchand Cayes.

### International Agencies and Donors

Bilateral
Canadian Embassy
Canadian International Development Agency (CIDA)
United States Agency for International Development (USAID)
United States Embassy

Multilateral
Organization of American States (OAS)
Pan-American Health Organization (PAHO)
United Nations Children's Fund (UNICEF)
United Nations Development Programme (UNDP)
United Nations Fund for Population Activities (UNFPA)
World Food Program (WFP)/Programme Alimentaire Mondial (PAM)

Private Agencies, NGOs and Individuals
Adventist Development and Relief Agency (ADRA)
Alvarez, Maria (Anthropologist)
Bureau de Nutrition et de Développement (BND)
CARE
Catholic Relief Services (CRS)
International Lifeline Haiti
Murray, Gerald, Ph.D. (Associate Professor of Anthropology)

### US-based Agencies, NGOs and Individuals

Government
General Accounting Office (GAO), National Security & International Affairs Division

Private Agencies, NGOs and Individuals
Haiti Communications Project
Partners in Health
Physicians for Human Rights
US Senate Sub-Committee on Immigration and Refugee Affairs of the Committee on the Judiciary
Washington Office on Haiti

# Appendix C
## *Chronology of Events, 1990-1993*

**1990**

Mar 13 Provisional government established; Ertha Trouillot appointed provisional president.

March OAS begins election observation process.

Dec 16 202 OAS observers monitor first-round balloting.

Dec 23 Jean Bertrand Aristide declared winner of Haitian presidency.

**1991**

Jan 6 Roger Lafontant unsuccessfully attempts overthrow of provisional government.

Jan 7 OAS adopts resolution repudiating attempted violation of constitutional order.

Jan 20 Run-off elections for President.

Feb 7 Jean Bertrand Aristide inaugurated.

Jun 5 OAS General Assembly approves automatic mechanisms to respond to coups or interruptions of democratic process (1991 OASGA Res. 1080).

Sep 29 Elements of Haitian armed forces attack the residence of President Aristide.

Sep 30 President Aristide forced into exile in Caracas, Venezuela. OAS Permanent Council meets, condemns coup, and calls for meeting of foreign ministers to consider collective response.

Oct 2 OAS Meeting of Foreign Ministers (MFM) convened.

Oct 3 MFM, invoking resolution 1080, condemns coup and calls for Aristide's reinstatement (MRE 1/91).

Oct 4 US freezes regime assets.

Oct 4-7 Delegation of OAS foreign ministers open dialogue in three visits to Haiti.

Oct 8 Foreign ministers meet again at the OAS and call for members to impose a trade embargo on Haiti; OEA-DEMOC formed (MRE 2/91). Haitian Parliament vacates presidency, elects Joseph Nerette provisional president and Jean Jacques Honorat prime minister.

Oct 29 US imposes embargo on Haiti effective November 5th.

Nov 10-11 OEA-DEMOC negotiators, led by OAS envoy Augusto Ramirez Ocampo, travel to Haiti to resume dialogue; Haitian parliamentarians agree to direct talks with President Aristide.

Nov 21 Inter-American Commission on Human Rights condemns coup and apparent rights violation by *de facto* regime.

Nov 22 OAS Permanent Council calls for international cooperation in aiding displace Haitians.

Nov 22-24 Under OAS auspices, direct talks between President Aristide and Haitian parliamentarians begin in Cartegena, Colombia; two sides agree in principle to continue dialogue, working toward return to constitutional order.

Dec 2-7 OAS Humanitarian Assistance Assessment Team visits Haiti.

Dec 4-6 Inter-American Commission on Human Rights team visits Haiti.

**1992**

Jan 7-8 Direct talks resume in Caracas.

Jan 8 Aristide agrees in writing to accept Rene Theodore as Prime Minister.

Jan 18 OAS Secretary General calls meeting of all parties at OAS headquarters, and President Aristide attends. Aristide reiterates commitment to Theodore.

Jan 22 OAS special committee established to monitor embargo, humanitarian needs.

Jan 25 Theodore and others attacked, one killed, at political meeting in Port-au-Prince.

Jan 28 Under OAS auspices, 30 metric tons of food and medicines delivered to Haiti.

Feb 4 US announces adjustments to embargo in the assembly sector; begins granting licenses on a case-by-case basis for American companies to resume assembling goods in Haiti for re-export.

Feb 13 Haitian parliamentarians agree to resume negotiations.

Feb 23 President Jean Bertrande Aristide signs an agreement with leaders of Haiti's parliament that set out general terms for his return to Haiti as President; a second agreement, signed between Aristide and his premier designate, Rene Theodore, created a mechanism for his return.

Feb 26 US administration announces that it was returning Ambassador Alvin P. Adams, Jr. to Haiti immediately, in response to the agreement reached between

Aristide and the Haitian parliament. Adams had been withdrawn from Haiti in January following an attack on premier-designate Theodore in which one of Theodore's bodyguards was killed.

May 17 Foreign Ministers of the OAS meet and approve strong new measures, including a denial of port rights at any OAS nation for ships that violate the embargo by delivering oil and other commercial goods to Haiti. The provisions also urged member countries to deny travel visas to prominent supporters and participants in the coup, and appealed to European nations to assist in the economic embargo against Haiti.

May 24 US administration directs US Coast Guard to halt all boats carrying Haitian refugees to the US and to forcibly return them to Haiti. The order also prevents the refugees from landing at the US Naval base at Guantanamo Bay to file for political asylum in the US.

May 28 US administration announces that it will close the refugee camp at the US naval base at Guantanamo, Cuba and bar any ship that trades with Haiti from United States ports.

Jun 19 Former World Bank economist Marc Bazin is sworn in as Haiti's new Prime Minister.

Jul 21 Eighteen US companies agree to resume operating assembly plants they owned in Haiti, having been shut down after the US joined the trade embargo in 1991. Companies agree to pay Haitian taxes, customs duties and utility charges into a US escrow account since direct dealings between US companies and the current government remain forbidden under the trade embargo.

Aug 1 US Ambassador Alvin Adams, Jr. ends his tour of duty in Haiti, having served as ambassador since November 1989.

Aug The OAS initiates new diplomatic efforts to try to resolve the political crisis, with a delegation to Haiti led by OAS Secretary General Joao Baena Soares.

Sep 11 Haiti's *de facto* government formally agrees to the deployment of an 18-member OAS observer mission in Haiti to monitor human rights and assess humanitarian needs. Agreement reached at OAS-brokered talks in Washington between representatives of Aristide and the army-backed government in Haiti, nominally headed by premier Marc Bazin.

Sep 29 Aristide urges the UN to impose a total embargo on Haiti as a means of reinstating his democratically elected government. He harshly denounces the Vatican, which had been the only state to extend diplomatic recognition to the current military-backed government in Haiti (The UN recognized Aristide as the legitimate Haitian leader).

Nov 10 OAS urges the UN to adopt the embargo that the OAS had imposed in 1991 and called on the UN to join in the OAS observer mission monitoring the human rights situation in the country. OAS declaration argued that a restoration of democracy in Haiti rested on the cessation of European and African shipments of petroleum to that nation.

Dec 13 UN becomes involved in diplomatic efforts when the OAS passed a resolution authorizing the OAS Secretary General to explore with the UN Secretary General ways to resolve peacefully Haiti's political situation.

Dec UN Special Envoy Dante Caputo begins holding meetings in Haiti.

**1993**

Jan 14 President-elect Clinton announces that he will temporarily continue the Bush policy on Haitian asylum seekers.

Jan 15 Coast Guard ships are stationed around Haiti in "Operation Able Manner" to prevent a massive migration of Haitian boat people after Clinton's inauguration.

Feb 9 The de facto Haitian regime reverses its position and agrees to accept an OAS/UN civilian observer mission to oversee the restoration of order and monitor human rights conditions.

Mar 11 Former Ambassador Lawrence Pezzullo is named US special advisor on Haiti.

Mar 16 President Clinton meets with Aristide and commits the US to its "fair portion" of a 5-year $1 billion plan to rebuild Haiti's economy.

Apr 16 The military rejects a plan offering a blanket amnesty in exchange for the resignation of the military leadership, including General Raoul Cedras.

May 16 A joint mission of representatives of the Presidential Commission, UNDP, IMF, World Bank, IDB, OAS, and USAID convenes in Port au Prince for four weeks to carry out investigations and gather pertinent information about the economy, public finances, monetary developments and key sectors. Develops the Emergency Economic Recovery Program (EERP)

May 24 The military rejects another proposal, backed by the US, UN and OAS, calling for the deployment of an international police force to pave the way for Aristide's return.

Jun 4 President Clinton, facing increased criticism for his administration's policy on Haiti, imposed new sanctions targeted at Haitian military and political leaders.

Jun 8 Prime Minister Marc Bazin resigns.

Jun 16 The UN, after the urging after the US, votes and approves a world wide oil and arms embargo and internationalizes the freezing of assets of members of the coup regime (to take effect one week later), but does not authorize the US or other countries to enforce the ban with a naval blockade.

Jun 23 Embargo measures take effect. The UN Security Council implements the world wide embargo on oil and arms shipments to Haiti and a freeze on foreign assets of officials and business people who supported the coup.

Jul 1 Clinton administration announces that it will release $37.5 million almost immediately after a settlement to create jobs and help restructure the economy.

Jul 3 Under the terms of a UN-brokered agreement signed by General Cedras and President Aristide, Aristide is scheduled to return to power by October 30th. The 10-step peace pact, negotiated at Governors Island in New York, provides that Haiti's parliament must ratify Aristide's choice of prime minister before sanctions are dropped. The plan also guarantees amnesty for coup leaders and calls for reforms within Haiti's army and police force.

Jul The joint mission releases the Emergency Economic Recovery Program (EERP), in preparation of the Constitutional Government's return to office and to assist in determining the major components of an immediate economic and social program.

Aug 25 Robert Malval, longtime Aristide confidante and businessman, is nominated by Aristide to become Prime Minister. Wins parliamentary approval for his transitional government.

Aug 27 The Security Council suspends the oil embargo.

Sep 2 Ministers in new Aristide government are invested. Sanctions are lifted.

Sept 11 A leading Aristide supporter, Antoine Izmery, is assassinated at a Mass for those slain in the military repression. The UN envoy, Dante Caputo, blames auxiliaries directed by Col Joseph Michel François, the police chief.

Oct 7-8 Armed opponents of Father Aristide shut down Port-au-Prince.

Oct 11 The US ship *Harlan County*, carrying about 200 American troops who are to prepare for the return of Father Aristide, anchors off Port-au-Prince. But they are prevented from landing by armed civilians who are assisted by uniformed police. At least two dozen men, some of them armed, beat up merchants in shops and fired their guns.

## Sources


Taft-Morales, 1993.

US Senate Sub-Committee on Immigration and Refugee Affairs, 1992 [extracted from US Permanent Mission in the OAS, February 19, 1992].

Miscellaneous press clippings (NY Times, Washington Post, The Economist, etc.).

# Appendix D
## *Technical Notes*

**November 14, 1993**

Two technical questions have arisen with regard to the preliminary report, "Sanctions in Haiti: Crisis in Humanitarian Action."

(1) Does the report attribute all health effects to sanctions?

(2) What was the basis for estimating 1,000 excess child deaths each month over the two year crisis period?

The answer to the first question is straightforward. As noted in the report:

> ...the sanctions were imposed not as an isolated single action; rather, the sanctions were imposed in the midst of a complex political crisis. In the Haitian case, political sanctions and an economic embargo were superimposed upon a crisis of governance, a military coup d'état, the *de facto* government's mismanagement, an atmosphere of political violence and repression, and evasive and black-market activities by the private business community. The sanctions in Haiti can be described as contributing to a 'syndrome,' a multidimensional political crisis. As such, it becomes very difficult to disaggregate any single element of the syndrome as being responsible for any particular humanitarian insult.

As its first two lessons, the report highlights the points that "The September 1991 coup was the triggering event of the crisis," and that "long-term humanitarianism in Haiti is compatible with democracy and human rights; thus the primary political objectives pursued through sanctions were not necessarily in conflict or in competition with humanitarian goals."

The second question is technically complex. It may best be answered as a sequence of three sub-questions: Is there scientific evidence for any increase of mortality or malnutrition in Haiti? Should the Maissade data have been extrapolated to the national level? If such is done, what should have been the scientific method for the extrapolation?

Answers to the first two sub-questions are direct: there is solid evidence of health deterioration in some population groups and with sufficient qualification, "extrapolation" can be a useful scientific exercise for estimating order of magnitude effects. There is considerable scope for technical discussion regarding the third sub-question — the underlying assumptions and methods of extrapolation.

There are three ways of considering the method of extrapolation: (1) the method employed in the report; (2) extrapolations nuanced by the 1992 Maissade measles epidemic; and (3) other assumptions for extrapolations. Before presenting our analysis of these methods, however, it is worthwhile to quote from the text our concluding comment on the extrapolation:

> These projections of national burdens of child mortality and malnutrition based upon extrapolation from a single sample site are obviously fraught with scientific hazards. The estimations should be considered illustrative, providing "order of magnitude" figures rather than precise estimates. As any single location within a country is likely to be distinctively different from other sites and as national data collection systems were scientifically flawed, the true mortality impact of the crisis on Haiti will never be known with certainty. What happened in Maissade — the qualitative evidence suggests — happened in many communities in Haiti over the two crisis years. Thus, a fairly consistent picture of excess human hardship and loss of life emerges from a combined assessment of the quantitative and qualitative data.

**1. Current Method**

The current method of extrapolation is crude and transparent, simply taking the changes of under-5 mortality in Maissade between calendar year 1991 (baseline year) and 1992 (crisis year) to compute national level changes. In other words, as the under-5 mortality rate increased 32% between 1991 and 1992, the extrapolation assumes that the national under-5 mortality rate of 133 per 1,000 live births increased 32% in both calendar years 1992 and 1993. Noteworthy is the fact that the changes of under-5 mortality in Maissade represented a continuing decline of infant mortality but an increase of 1-4 year mortality. A direct extrapolation of under-5 mortality generates a baseline under-5 mortality of 32,080 deaths annually; a 32% increase generates 10,266

deaths per year, or 855 deaths per month. The report deliberately rounds off these numbers to 20,000 for the two crisis years or about 1,000 per month. The rounding was purposeful to avoid false precision and to demonstrate what is referred to as "order of magnitude" effects.

**2. Measles Mortality**

It has been suggested that several additional factors could have been considered in the extrapolation, including (a) the distinctiveness of Maissade, (b) an extrapolation by the absolute rather than percentage increase of under-5 mortality, and (c) the well-documented measles epidemic in Maissade in 1992.

***a. Distinctiveness of Maissade.***

Since Save the Children has a health intervention in Maissade that is in the Central Plateau and since the baseline level of mortality in that region is about two-thirds the national average, extrapolation to the national level could have been more conservative, as the crisis could have exerted a disproportionately larger inflationary effect in Maissade than in other parts of the country. On the other hand, it could be noted that given the NGO health program that had been sustained in Maissade before and throughout the crisis, the increase could have been even higher in other regions which were not as well served by a health program that continued to function during the crisis. These counterfactual comparisons for Maissade could cut either way and we have basis for selecting either.

***b. Extrapolation by the absolute rather than percentage increase.***

Most extrapolations take the percentage change from the baseline, as noted above. However, it could have been possible to take the absolute rate of increase for extrapolation. In other words, with an increase in the under-5 mortality rate in Maissade from 87 to 115 per 1,000 live births, it is possible to project national increases of 28 per 1,000 live births (115 minus 87, rather than the 32%). Such an assumption would generate 563 excess deaths per month.

***c. Well-documented measles epidemic in Maissade in 1992.***

Given the well-documented measles epidemic in Maissade, the extrapolation could have been more sophisticated, taking into account various measles-associated complexities, including cause-specific deaths due to other measles-linked immune-depressed infectious deaths (e.g., diarrhea), the age structure of deaths under-5, and the seasonality or periodicity of measles epidemics in poorly immunized populations.

Assuming that the excess child mortality in Maissade results from measles and not other health threats would generate a lower extrapolation figure. Crude estimates could be made taking note of the differences in measles risk due to the decline of national measles immunization coverage from 40% to 24%, an upper bound in the case-fatality ratio of 4% among these excess measles cases, and the periodicity of measles epidemics between years. Such assumptions would generate an excess child mortality that is one order of magnitude lower than our estimate.

This measles-only hypothesis, however, depends upon a number of assumptions. For example, data on changes in the national measles vaccine coverage are uncertain and the quality of the cold chain is under dispute; thus, the group at extra risk from the immunization decline is uncertain. Indeed, unpublished data about the measles epidemic in Deschapelles showed a very wide age range of measles attack, suggesting that the epidemic not only affected those exposed during recent coverage changes but also a pool of unimmunized children at different ages. Moreover, there is reasonable presumption that if measles vaccine is compromised, other vaccines would also be affected. Likewise, essential and other drugs (antibiotics, oral rehydration) would be affected. The disjunction between the longer-term secular improvement in mortality and a deterioration of the socioeconomic situation in Haiti in the 1980s suggests that a broad range of health technologies and services play an important role in health status among Haitian children. This suggests that while focusing entirely on measles is possible, it is restrictive and likely to be inconsistent with the host of demand and supply factors compromising all basic health services described in the report.

**3. Other Assumptions**

Adopting other assumptions could actually increase the extrapolation beyond the level that was cited in the report. We do not believe such are warranted, but simply record these to illustrate the range of estimates that are possible. These estimates can generate much higher figures than those generated from the methodology adopted in our study.

There are four ways that higher estimates could have been calculated in the extrapolation. If our extrapolation had focused exclusively on 1-4 year mortality rates (not under-5 mortality), the increase in Maissade would have generated approximately 1,350 excess deaths per month. If the extrapolation had been based upon the increasing proportion of under-5 deaths in relation to deaths at all ages reported in Haitian health facilities, as described in the report, the monthly pace could have reached 1,416 deaths. The estimate of increases in malnutrition of 100,000 could have ranged as high as 260,000 if the largest rather than the smallest differences in prevalence of malnutrition in Maissade had been extrapolated. Finally, the excess malnutrition could result in extended higher mortality risk not only in 1992 but also in subsequent

years, generating several thousands of additional deaths into the future. In Bangladesh we found a relative mortality risk of 3.07 for severe and 1.15 for moderate malnutrition in comparison to normal nutrition/mild malnutrition defined by the Gomez classification over 24 months of follow-up (Chen et al., 1980).

These illustrations obviously inflate the extrapolation. They underscore the fact that we simply do not have either the data or knowledge for refined estimates. Indeed, given the long-term secular improvements in child mortality in Haiti, the counterfactual question of what would have happened to child deaths in the country without the crisis is simply unanswerable. All of the comparisons are based upon an uncertain assumption of no change (rather than continuing improvement) on whatever baseline values are selected.

As a working hypothesis, we used the most straightforward and transparent method for extrapolation, cautioning the reader that the exercise was an "order of magnitude" estimation. If other assumptions are employed (as noted above), the extrapolation could generate numbers ranging from 100 to 2,000 excess deaths per month.

# Appendix E
## *Brief Note on Sanctions*

### Definition and Objectives

Economic sanctions may be defined as "a deliberate, government-inspired withdrawal, or threat of withdrawal, of customary trade and financial relations" (Hufbauer et al., 1990) for the purpose of regulating or influencing the behavior of nation states (Ngobi, 1993).

Sanctions are presumably "...used as an effective tool in order to regulate international behavior before resorting to the use of force" (Ngobi, 1993). Like criminal law, the purposes of sanctions are to punish, to deter and to rehabilitate. Sanctions are a half-way measure between pro-active diplomacy and war. "The rationale is that the consequences of sanctions are likely to be less devastating than the ravages of warfare in terms of injury to persons and damage to property." (Ngobi, 1993) The exercise of sanctions may be conducted along with inducements or withdrawal of foreign assistance.

"Sending" countries, including regional or international organizations, have usually sought to influence the behavior of "targeted" countries with regard to three arenas of state behavior:

(1) promotion of democracy and the protection of human rights;

(2) deterrence of military ventures (cessation of hostilities, withdrawal of armed forces, halting proliferation of nuclear and other weapons of mass destruction, and impairment of a country's economic capacity for waging war;

(3) settling of political disagreements (destabilizing targeted governments; combatting international terrorism).

Historically, other purposes have also precipitated sanctions, such as retaliation for the expropriation of foreign business assets. Indirect and more subtle objectives, however, may be associated with the imposition of sanctions. Deterring future aggression, gaining credibility with allies, responding to domestic constituencies, and conveying messages of disapproval to a dominant government or of solidarity with opposition groups are some of the indirect purposes pursued. The reluctance of the United States to accept the mass of "boat people" that flowed out of Haiti after the coup may have fueled, in part, the desire of the US Government to escalate sanctions sufficiently powerful to induce governmental change. The perpetuation of sanctions against Iraq for military disarmament conveys a powerful message to other militarily-ambitious states. Sanctions, therefore, can never be considered purely in terms of their direct instrumental role; understanding sanctions requires incorporation of their indirect or symbolic roles as well.

### History and Trends

The use of sanctions was first recorded in ancient Greece in 432 BC (Hufbauer et al., 1990). Since World War I, there have been about 120 instances of economic sanctions. Of 116 cases of sanctions examined by the Institute for International Economics, the United States, either alone or in concert with its allies, deployed sanctions 77 times. Other significant users have been the United Kingdom (22 cases), the Soviet Union (10 cases), and the Arab League (4 cases).

Bilateral deployment of sanctions has been far more common than multilateral use of sanctions. The League of Nations employed sanctions four times — against Yugoslavia and Greece in 1921 and 1925, respectively, to withdraw from occupied territory; and against Paraguay/Bolivia and Italy in 1932-35 and 1935-36, respectively, to withdraw troops. The Allied powers used sanctions during World War II against Germany and Japan. The Arab League in 1946 imposed sanctions against Israel in support of a Palestinian homeland.

Some have argued that the multilateral deployment of sanctions will increase markedly during the post-Cold War era. As an intermediary between diplomacy and war, the use of sanctions represents a middle path, providing means for bringing about a resolution of tensions before their escalation into open hostilities. The 1990 UN action in Iraq may have set a modern precedent for the popular appeal of sanctions as well as perceptions of their effectiveness. In the UN's first 45 years, sanctions were imposed four times — against North Korea to withdraw troops from South Korea in 1950; against Portugal to free African colonies in 1963-74; against Southern Rhodesia in 1966 and South Africa in 1977 to bring down the apartheid regime. Over the past three years, the UN has imposed economic sanctions against four nations (Iraq, former Yugoslavia, Libya, and Haiti), while the UN

has imposed an arms embargo against Somalia, Liberia, and the Khmer Rouge area of Cambodia.

## Effectiveness

In its study of sanctions, the Institute of International Economics estimated a "success" rate of about 34 percent. The impact of sanctions was greatest when the targeted nation was small, had extensive trade linkages with the sanctioning country or countries, and the sending country was able to avoid high costs on its economy and population. Speed, decisiveness, and sweep — comprehensive and universal — were considered important factors affecting effectiveness. Impact may also be enhanced through linkages with positive incentives, such as inducements through increased foreign aid.

The criteria for determining "success" are complicated because the goals of sanctions, direct and indirect, are multiple and vary between the different parties involved. Several contemporary international challenges illustrate these difficulties. The objective of limiting nuclear proliferation in North Korea, Ukraine, India, Pakistan, Israel and Iran are not necessarily jointly shared, to the same degree, between the major powers. To be effective in North Korea, for example, sanctions would require the very strong political and logistical support of China; Ukrainian disarmament is linked to assurances of its development and security after the breakup of the former Soviet Union. In Iraq and ex-Yugoslavia, although "food and medicines" have been exempted, sanctions have undoubtedly hurt the poor more than the targeted political elite. Sanctions in Haiti and South Africa are supported by the political opposition seeking changes in government power. In Iraq and ex-Yugoslavia, sanctions may be contributing to Iraqi solidarity and Serbian resistance against international pressure, thereby strengthening the hands of the government.

There are many notorious instances of failures of sanctions. Sanctions failed to compel the Sandinistas to hold national elections in Nicaragua, failed to dismantle apartheid in South Africa, failed to dislodge Noriega from power in Panama, and failed to prevent China's post-Tianamen Square suppression. It has been noted that failed sanctions may be due to excessively selective or gradual application without adequate monitoring of compliance. Either extensively delayed monitoring or none at all characterize sanctions against Southern Rhodesia, South Africa, ex-Yugoslavia, and Liberia. The human rights monitoring group in Haiti may be an exceptional experiment in which pro-active monitoring of the human rights situation has been maintained while negotiations for the withdrawal of sanctions and return to constitutional government are underway.

The logistical aspects of sanctions implementation can also be important. Punishment for sanctions violations must be imposed if sanctions are to have the desired effect. Sanctions by the Organization of American States in Haiti exerted little effect because the European Community did not comply with the regional action. Detection of violations requires a monitoring capacity. Also, countries that may be unintentionally damaged by sanctions should be able to apply for compensatory aid; 26 countries, such as Jordan, have done so in the case of sanctions against Iraq.

## Ethical Issues

The imposition of sanctions is a blunt instrument. Broadly applied, economic embargoes may have a devastating impact on civilian populations. "The question of inconvenience to innocent people in countries targeted for sanctions has already been raised. The purpose of sanctions is to force the people in charge of the formulation of national policies to change those policies; unfortunately, it often happens that such people are least affected by sanctions. With regard to the population at large, sometimes a paradox appears. The people engaged in campaigns against colonial oppression or subjugation have often insisted that, in spite of the difficulties to them, they prefer the sanctions to be maintained and tightened." (Ngobi, 1993).

The national or international agencies imposing the sanctions must ensure that the basic humanitarian needs of innocent civilians are met, even if this makes the enforcement of sanctions more difficult. The actors imposing sanctions must not only avoid harming innocent civilians but must positively ensure that humanitarian needs are adequately addressed.

Sanctions can also be far better targeted at the political elite: freezing bank accounts, denying travel visas and air connections, imposing an arms embargo on the military, and other targeted actions that reduce hardship on the general population. International action could also mitigate the impact of sanctions or innocent populations through positive actions, including acceleration of humanitarian relief activities.

Ethics depends upon an effective monitoring of sanctions, especially humanitarian impact. The degree of support for sanctions by those directly affected is important; for example, the popular opposition movements in Haiti and South Africa have supported sanctions, making their use more morally acceptable.

## Summary of Currently Active Economic Sanctions for Foreign Policy, 1914-93

| Principal Sender | Target Country | Active Years | Goals of Sender Country |
|---|---|---|---|
| Arab League | Israel | 1946- | Create a homeland for Palestinians |
| United States and COCOM | USSR and COMECON* | 1948- | 1 Deny strategic material;<br>2 Impair Soviet military potential |
| U.S. and U.N. | North Korea | 1950- | Withdraw attack on South Korea |
| U S. and South Vietnam | North Vietnam | 1954- | 1 Impede military effectiveness of N. Vietnam;<br>2. Retribution for aggression in S. Vietnam |
| United States | Cuba | 1960-<br>(tightened in 92-93) | 1. Settle expropriation claims;<br>2. Destabilize Castro government;<br>3. Discourage Cuba from foreign military adventures |
| United Nations | South Africa* | 1962- | 1 End apartheid;<br>2. Grant independence to Namibia |
| United States | Arab League | 1965- | Stop U.S. firms from implementing<br>Arab boycott of Israel |
| United States | Countries supporting international terrorism | 1972- | Overview |
| United States | Countries violating human rights | 1973- | Overview |
| United States | Chile | 1973- | Improve human rights |
| U S and Canada | Countries pursuing nuclear weapons options | 1974- | Overview |
| United States | USSR* | 1975- | Liberalize Jewish emigration |
| United States | Eastern Europe (Romania) | 1975- | Liberalize Jewish emigration |
| United States | Ethiopia | 1976- | 1. Settle expropriation claims;<br>2. Improve human rights |
| United States | Libya | 1978- | 1. Terminate support of international terrorism;<br>2. Destabilize Gadhafi government |
| United States | Pakistan | 1979- | Adhere to nuclear safeguards |
| United States | Iraq | 1980- | 1. Terminate support of international terrorism:<br>2. Renounce chemical and nuclear weapons |
| United States | Iran | 1984- | 1. End war with Iraq;<br>2. Halt attacks on Gulf shipping |
| United States | South Africa | 1985- | End apartheid |
| U.N | Libya | 1986, 1991 | Terminate support of international terrorism<br>(Berlin bombing and Lockerbie crash) |
| United States | Syria | 1986– | End support of terrorism |
| United States | Angola** | 1986- | Expel Cuban troops |
| Japan, West Germany and United States | Burma | 1988- | 1. Improve human rights;<br>2. Restore democracy |
| U.S. and United Kingdom | Somalia | 1988- | 1. Improve human rights;<br>2. End civil war |
| United States | China | 1989- | Retaliation for Tiananmen Square |
| United States | Sudan | 1989- | 1. Improve human rights;<br>2. Restore democracy |
| United States and United Nations | Iraq | 1990- | 1. Withdraw from Kuwait,<br>2. Restore legitimate government;<br>3. Release hostages |
| U.N., EEC, and U.S. | Yugoslavia | 1991 | 1. Improve human rights<br>2 End civil war |

Summary of Currently Active Economic Sanctions for Foreign Policy, 1914-93 (cont.)

| Principal Sender | Target Country | Active Years | Goals of Sender Country |
|---|---|---|---|
| OAS (later UN in 1993) | Haiti | 1991 | Restore legitimate government |
| United States | Sudan | 1993 | Terminate support of terrorism |
| Bilateral donors | Nigeria | 1993 | Restore democracy |
| Prospective sanctions | India/Russia | 1993 | Adhere to nuclear safeguards (Missile Technology Control) |
| Prospective sanctions | China | 1993 | Adhere to nuclear safeguards (Missile Technology Control) |

* In process of being dismantled
**More recent sanctions have been imposed (1993)

Source: Hufbauer, Schott and Elliott. *Economic Sanctions Reconsidered*, pp. 16-27.

# Appendix F

## *List of Criteria for Humanitarian Aid to Haiti Approved by the Permanent Council of the OAS*

**February 24, 1993**

1. Humanitarian aid should take into account:

   I. The political intent of the embargo measures

   II. The consequences of those measures in the specific economic and socio-demographic circumstances of Haiti.

2. Aid should be donations from which no monetary profit should result.

3. Aid should comprise the provision of essential supplies to meet minimum basic needs for survival as food and nutrition, health and sanitary care, water and water treatment, medical supplies, clothing and shelter.

4. The provision of Humanitarian Aid should be coordinated and delivered through the International Red Cross and other non-governmental organizations in close collaboration with the OAS, the United Nations, and the specialized agencies of both organizations and in consultation with the constitutional legitimate Haitian authorities.

5. The provision of Humanitarian Aid should not serve to reinforce the position of the de facto regime. Such aid, therefore, should be of an ad hoc rather than institutional nature.

6. In the context of the above and given the specific circumstances of Haiti, the following additional criteria are recommended:

   I. That Humanitarian Aid should be supported by transportation, other logistics and minimal administrative arrangements to ensure security, safety, and proper distribution of supplies.

   II. That Humanitarian Aid should include certain preventive measures such as subsistence food production, health care, basic nutrition and sanitary programs, plant disease protection and basic education in order to avoid poverty related illness, epidemics and irreparable economic and social decay among the most needy of the population.

7. The Humanitarian Aid described in the present document will be granted in the context of the resolutions adopted by the OAS Foreign Ministers at their Ad hoc meeting. It thus complements and parallels the activities of the International Civil Mission in the field of human rights among others.

# Data Sources and Bibliography

Many different types of data sources and references have guided this study, including documents, reports and studies produced by various agencies and research institutes both in Port-au-Prince and internationally. For sake of clarity, the references have been listed in three groups: documents pertaining to health and nutrition in Haiti; references on Haiti; and other general references.

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