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TRIPOLI DISPATCH

## The Nurses' Tale

"Tell Americans we want to be free."

BY JUDITH MILLER

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Bad blood, literally and politically. Tortured nurses and a mercurial despot. More than 400 HIV-infected children and grieving parents. These are the ingredients of a crisis of Moammar Gadhafi's own making, one which, in turn, sparked a human-rights tragedy that may at last--after seven years of threats and recrimination--be close to resolution.

Before the Bush administration took Libya off the terrorist-state list and restored full diplomatic relations in June, U.S. officials insisted that Libya find a way to release five Bulgarian nurses and a Palestinian doctor who have been imprisoned since 1999 and sentenced to death for allegedly infecting 434 children in Benghazi with HIV, 52 of whom have already died of AIDS.

No topic--not even Col. Gadhafi's renunciation of WMD--is as politically charged within Libya as this epidemic and its appalling consequences. Many of those I have interviewed asked not to be quoted since the lives of the foreign medics remain at risk. And while diplomats said they have faith in a deal, quietly devised with Libyan officials, that would free the medics and ensure better medical care for the infected children, they fear it could still collapse.

The crisis, like the epidemic itself, began slowly. Dr. Achris Ahmed, who heads the Benghazi HIV Committee, which the government created only last year to address the crisis, told me that the first case of AIDS among the children at the Al Fateh Children's Hospital was diagnosed in June 1997, a year before the Bulgarian nurses even began working at the Libyan hospital. Several months later, doctors diagnosed a second AIDS case. "But we knew little about the virus because there is no HIV in Libya," Dr. Ahmed said, parroting the then-official line.

Dris Lagha's eight-year-old daughter, Rokaya Lagha, was the seventh case to be diagnosed in September 1998. "The doctor was confused," he said, recalling the day he learned the devastating news. "He didn't seem to know much about the virus, and we didn't know what to do." Some parents were told they could do nothing. "My doctor said: 'This is from God,'" said Omar Mismari, whose infected son, Saef al-Islam, is now 10.

In December 1998, after a cluster of such cases was found among the hospital's former patients, Messrs. Lagha and Mismari formed the Family Association of HIV/AIDS Children of Benghazi, a group that now has similar political clout in Libya to that of the Pan Am 103 victims' families in the U.S. "We were terrified," said Mr. Lagha. "Because AIDS is a sexually transmitted disease, many of our kids were mocked and ostracized. Many stopped going to school." Some were treated like animals by their own parents. "We isolated our kids, thinking they might infect their sisters and brothers or us. Some were locked away and thrown food like dogs. We were afraid to touch or hold them," said Mr. Mismari.



After a Libyan magazine published an article about the outbreak, attributing it to poor hygiene in the hospital, people in this city of 800,000--a traditional bastion of resistance to Col. Gadhafi--were outraged. Libyans demanded to know how, where and why the infection started and spread. On Feb. 9, 1999, police raided the homes of dozens of hospital medical workers and threw them in jail. After several months, five Bulgarian nurses and a Palestinian doctor were charged with having deliberately infected 426 children with HIV-tainted blood. In May 2004, a Benghazi court sentenced them to death by firing squad for "undermining the security of the state." Nine Libyans who also worked at the hospital were acquitted.



Bulgaria, which had supplied Libya and even Col. Gadhafi himself with doctors and nurses needed to keep hospitals running, was in turn outraged, as was much of Europe. But the foreign "plot" to infect Libyan children played well at home, deflecting responsibility from a hospital that could barely maintain treatment records, and from the government, which had shortchanged medical services for years.

The conspiracy theory soon had a powerful champion: the "brother-leader" himself. Col. Gadhafi declared that the CIA or Mossad had designed a unique strain of killer virus and given it to the medics to experiment on Libya's children. Belief in the foreigners' guilt was not shaken by evidence that the confessions had been extracted by torture. When it became clear that foreign protests would not subside, Col. Gadhafi proposed that the medics be released in exchange for the Libyan who has been serving a life sentence for the bombing of Pan Am 103, plus the payment of

\$5.7 billion in compensation to care for the children and their families.

Unwilling to acknowledge culpability and furious at Libya's effort to draw moral equivalence between the Pam Am victims of Libyan terrorism and the sick children, Bulgaria refused. Its stance won strong support from the European Union, whose ranks it is scheduled to join, and from President Bush. But the Libyans dug in further, as I saw on a visit to Benghazi in March. Five obviously sick children were being treated when I arrived at the Center for Infectious Diseases and Immunology. Ali Barinasse, whose 18-year-old daughter had developed skin lesions, told me he only trusted foreign doctors. He had come to the center to ensure his daughter would be treated in Italy, but he had not brought her with him. In fact, she didn't know she had the virus. He'd never told her. "She's going to college next year, and I want her to study."

The families I met agreed on almost nothing except their desire to continue going to Europe where the Libyan government pays for their children's treatment, along with a generous stipend for the families' living expenses. "Don't let them tell you this is not about the money," said one doctor in Benghazi. "For some families, it is mainly about the money." For others, foreign treatment is a means of escaping the stigmatizing disease in Libya.

The mood was also grimly combative at the Al Fateh hospital, the 320-bed facility where the infections are believed to have begun--though to this day no one knows for certain how the virus was contracted and spread. With some 12,000 admissions a year, the hospital does not look like a facility in an oil-rich land. Dr. Abdelsalam al-Shakmak, director of medical services, angrily denied the conclusions of a report by Luc Montagnier, co-discoverer of HIV, who testified in Libyan court and wrote a letter to Col. Gadhafi saying that the children were probably infected because of poor hospital hygiene and poor staff. "Our own experts concluded the opposite," Dr. Shakmak said defensively.

A Libyan physician who refused to be identified confirmed that the HIV strain that had infected the children, while rare, was definitely African. Contrary to the mythology of Libya as an AIDS-free zone, there is HIV in Libya, he said. Libyans were at risk because few wanted to acknowledge that, he added. Unless Libya faced facts now, worse outbreaks would explode. Normally, the doctor said, family associations were useful. But because so many of the families were angry, politicized, greedy and powerful, given their children's status as "martyrs" to the foreign viral invasion, they had made matters worse. Col. Gadhafi, ever the cynical balancer of political forces, did not wish to challenge them. His reluctance was reinforced earlier this year when government-sponsored protests in Benghazi over Danish cartoons of Prophet Mohammed turned against the government, sparking riots in which the Italian embassy and Libyan government buildings were burned.

Diplomats said a turning point in the crisis came last March when Col. Gadhafi raised the issue at an Arab summit in Algiers. Questioned again about whether he would release the medics, he refused, asking why no one seemed concerned about Libyan children dying of AIDS. European diplomats sensed an opening: If the West were to provide humanitarian relief to the children, perhaps the medics could be freed. EU diplomats devised a five-point "action plan" to help Libya deal with a health and political crisis that had overwhelmed it. Joined by the Baylor College of Medicine in Houston, the EU agreed to provide 25 medical experts, plus \$1.7 million in drugs and equipment, to the Benghazi center. Libyan and European diplomats also agreed to create a "fund" to assist the children, though the Europeans carefully avoided any suggestion that the money was compensation for a crime.

But tensions in Libya were still high. Last November, when a judge postponed reconsidering the case for a month, relatives of the children rioted, demanding the nurses be put to death. "I want the Bulgarian nurses injected with the virus they gave my children," said Hosni Chibli, 32, whose daughter Zenab was three months old when she was diagnosed in 1998. The diagnosis of "medical terrorism," or "bio-terrorism," as Col. Gadhafi called it, has clearly been emotionally satisfying for the families, Libyan medics and officials who might otherwise be blamed for hospital conditions. But denial has meant that 10% of the infected children have died, far higher than the rate in Europe, where proper treatment is the norm.

One person who understands the dimensions of this tragedy, for Libyans and foreign medics alike, is Col. Gadhafi's son, Saif al-Islam, whose own foundation has been mediating among the warring parties. The foundation hired Dr. Montagnier, who

dismissed the thesis that the infections were bio-terrorism. A foundation executive said it also paid Dr. Montagnier \$100,000 for the report it translated into Arabic so that it could be submitted to the court. And the foundation successfully lobbied to have the nurses and the Palestinian doctor moved to a cleaner prison in Tripoli with access to diplomats, attorneys, their families and the occasional journalist like me. Saif al-Islam has challenged his father's argument that the outbreak was a foreign plot. "There is no conspiracy," he told me. "There is no hand of Mossad or the CIA. This was a question of mismanagement, or negligence, or bad luck, or maybe all three." Conspiracy theories, rooted in Libyan and Arab culture, had created a terrible dynamic in this case, he said. "We must find a solution to this tragedy."

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Permission to visit the nurses in jail arrived, predictably, on my last morning in Libya. Human rights activists had told me that Jdeida prison in Tripoli was far superior to the miserable places in which the nurses had been kept for seven years. Before seeing them, I was given a tour of a new high-tech medical center where inmates will receive care. Three of the five Bulgarians were in the villa that was built for them when a prison "translator" and I walked through the metal doors that sealed the area off from the rest of the prison. Their living room and small kitchen looked out on a tiny courtyard where they had planted a tree and herbs. Their tiny living-room shelves were filled with crackers, coffee and other donations from the Bulgarian ambassador's weekly visits. The adjacent twin bedrooms were clean, and contained real beds (which some American jails have stopped providing prisoners). They share a bathroom.

Valentina Siropulo's tears began flowing almost as soon as we sat down. Yes, they had enough to eat and read. And yes, they could watch TV and listen to music. "The hard part is psychological," she said, exhausted by the strain of seven years of hoping for freedom and fearing execution. The loneliness was oppressive, despite the privilege of one phone call a week. "I have a son. He's a student in Bulgaria," said the 46-year-old nurse. "I have seen him once in seven years." They had counted the days, the hours spent in prison. Valya Cherveniyashka, 51, who has two daughters, was finishing an intricate needle-point of the Last Supper when I arrived. She measures time in stitches and hoped she wouldn't have time to finish it.

Tugging at her worn Navy blue tracksuit, Nasia Nenova, 39, stared at me silently, reluctant to speak what she called her poor English. But the translator who the prison had insisted accompany me, spoke no Bulgarian. "We are innocent," insisted Ms. Siropulo. "We did nothing wrong. Tell Americans we want to be free."

Their first year in prison had been the worst, they agreed. They had only "confessed" because they'd been tortured almost every day. The guards had put electrical wires on their fingers, wrists, chests, toes, necks, ears and tongues, they told me, pointing to the places where the current had shot through them. They named the men, one by one, who had abused them. Only the day before I'd shaken hands with one of them--Juma Al Mishri--an attractive man with close-cropped graying hair and warm smile who denied having mistreated the women. He'd introduced me to his daughter, a shy student at Al-Fateh university. "We're human," he said. "How could we torture nurses?" He and seven other cops, a doctor and a translator had been tried in court in June 2005 on the torture charges, rare in Libya. All were acquitted.

"Juma was the worst," Ms. Siropulo insisted.

What the women said was consistent with what they had told Human Rights Watch in May 2005, and what diplomats and lawyers who had seen the women and heard their stories. Kristiana Valceva, who spoke the best English and was at the dentist during my visit, told Human Rights Watch that she had also been beaten with an electric stick on her breasts and genitals. Ashraf Ahmad Jum'a, the Palestinian doctor, whom I was not permitted to see, said interrogators had forced the medics to shock one another. Now there were no more drugs or dogs or sleep prevention, they said. There was just the terror of waiting to learn if they would live or die.

Their fate now hangs on the Libyan court that is reconsidering the case this week, and on continued implementation of the European deal to help the children. The amount of "assistance" to each child's family has been tentatively set at \$250,000 rather than the more than \$10 million per family originally demanded.

Libyans have discussed ways in which the medics could be freed, diplomats say. The court could set aside the earlier verdict as "flawed." Or the original conviction could be upheld, but with sentences imposed shorter than the time the medics have already served. Or the verdicts could be upheld with clemency granted by the minister of justice or the leader himself. With some luck and belated good will, this tragedy may finally end. But the episode shows that although Washington has taken Libya off the terrorist list and restored diplomatic relations to reward Col. Gadhafi for renouncing terrorism and weapons of mass destruction, Libya may well remain problematic.

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