

FOR IMMEDIATE RELEASE
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**Opening Statement
Senator Byron L. Dorgan
Chairman, Democratic Policy Committee**

**An Oversight Hearing on Whether Halliburton
Has Failed to Provide Clean Water
to United States Troops in Iraq**

Friday, April 6, 2006

Today, the Democratic Policy Committee is holding the eighth in a series of hearings on serious problems with Iraq contracting practices.

On January 23, this committee heard the testimony of two former Halliburton employees who alleged that Halliburton supplied unsafe water to our troops in Iraq. This was contaminated water that our troops used to shower, wash their hands and their faces, brush their teeth, wash their clothes, and sometime even make coffee. The whistleblowers alleged that they informed Halliburton of the problem, and the company failed to take corrective action.

Shortly after the January 23 hearing, Halliburton issued a statement stating that it had found neither contaminated water nor medical evidence to substantiate reports of illnesses at the base. The Pentagon referred the matter to the Inspector General, but said that the "allegations appear to have no merit."

I regret to say that the denials by Halliburton and the Pentagon are directly contradicted by an internal Halliburton report, which this Committee has obtained, and by information provided to the Committee by an Army physician currently in Iraq.

The report to which I refer was written on May 13, 2005, by Wil Granger, the company's top water quality manager. In that report, Mr. Granger plainly states the following:

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No disinfection to non-potable water was occurring [at camp Ar Ramadi] for water designated for showering purposes. This caused an unknown population to be exposed to potentially harmful water for an undetermined amount of time.

This event should be considered a “NEAR MISS” as the consequences of these actions could have been VERY SEVERE resulting in mass sickness or death.
(emphasis in original report)

The deficiencies of the camp where the event occurred is not exclusive to that camp; meaning that country wide, all camps suffer to some extent from all or some of the deficiencies noted.

This report establishes that there was indeed serious contamination of the non-potable water provided to our troops – not only at Camp Ar Ramadi, but throughout U.S. military camps in Iraq.

Today, we will hear testimony from witnesses who will shed further light on the consequences of Halliburton's failure to supply unsafe water to our troops.

Before we do that however, I want to read an e-mail that this committee has received from a U.S. Army surgeon currently serving in Iraq. The e-mail, from Army Captain Michelle Callahan, describes water contamination at another U.S. military camp in Iraq, and the resulting health consequences to our troops of exposure to that water.

The e-mail is long, and I will read only excerpts from it.

Sir,

I am the 101st Sustainment Brigade Surgeon (a family physician), currently serving in Iraq. . . I have read information on the internet about the situation you are investigating in Ar Ramadi. The situation here was almost identical. I am glad to know your office is looking into this. I find it concerning that even after KBR had gone through the investigation at Ar Ramadi they still provided doubly contaminated water to soldiers at our [Forward Operating Base Q-West].

In January I noticed the water in our Showering facility was cloudy and had a foul odor. At the same time (over a 2 week period) I had a sudden increase in soldiers with bacterial infections presenting to me for treatment. All of these soldiers live in the same living area (PAD 103) and use the same water to shower. I had 4 cases of skin abscesses, 1 case of cellulitis, and one case of bacterial conjunctivitis.

On January 20th I asked our preventive medicine environmental science officer ([Lieutenant] Simon Strating) to test the water at PAD 103. . . PM tests results of the PAD 103 water showed no chlorine residual and was positive for coliform bacteria.

So here we have evidence both of contaminated water and of health problems associated with bacterial infections.

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The e-mail then describes how an Army Lieutenant determined that Halliburton's subsidiary KBR was not properly treating non-potable water being supplied to our troops.

During a discussion (on 1 Feb 2006) between [Lieutenant] Strating and a newly hired KBR water quality technician (Mr. Bill Gist) [Lieutenant] Strating mentioned the bacterial infections that I had been seeing in my clinic. Mr. Gist told [Lieutenant] Strating he had concerns that the [reverse osmosis water purification unit] concentrate reject was being used to fill the water tanks at the PADs. After hearing this [Lieutenant] Strating investigated. He went to the water treatment site and followed the lines from the ROWPU concentrate drain to water trucks filling up with this water. He then followed this truck and observed it pumping the water into the water storage tank at PAD 206. The PM team tested the water at the ROWPU concentrate distribution point. The results are as follows: . . . Coliform Positive, E. coli Positive.

Finally, the e-mail describes how Halliburton's subsidiary KBR, when confronted with the fact that water was unsafe in violation of military regulations, insisted that this was the way that KBR always treated water.

After discovering that KBR was filling the water storage tanks with ROWPU concentrate, [Lieutenant] Strating gathered the base mayor (COL Grayson), The Q-West KBR site manager (Bernardo Torres), Rachel Vanhorn (KRB LNO), Mathew Wallace (KBR ROWPU Manager) and Bill Gist (water quality technician) to the [reverse osmosis water purification site] and told them all at the same time that he had identified that KBR was filling the water storage tanks with ROWPU concentrate. Mr. Wallace stated that it has always been done this way and there is not a problem with it. [Lieutenant] Strating explained that it is against Army regulations (TB MED 577) to use ROWPU reject for personal hygiene. Mr. Wallace argued that since the raw water from the Tigris is first filtered through carbon prior to going into the ROWPU that it is acceptable for hygiene. This argument is wrong. Charcoal filtration only removes particulate mater and binds some chemicals. All the bacteria and chemicals that make it though the charcoal are concentrated to twice the level as in the Raw water. This is the water with which the soldiers at Q-West have been showering, shaving, and brushing their teeth.

So to sum up: a U.S. military surgeon documented water contamination, bacterial infections for our troops, basic ignorance by KBR as to how their own equipment work, and resistance by KBR to fixing the problem.

I must emphasize that after our January 23 hearing, we notified Halliburton of the allegations of water contamination raised by the whistleblowers. Yet, as the e-mail demonstrates, even after that hearing — and eight months after their own internal report — Halliburton failed to notify its employees of proper procedures and continued to resist attempts to fix the problem.

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The very practice that the internal Halliburton report documented at the base at Ar Ramadi — providing the troops with concentrated waste water — was documented again at the base at Q-West by a U.S. military surgeon. Halliburton has disputed the accounts of its own employees at Ar Ramadi; will Halliburton now dispute the eyewitness testimony of an Army officer?

We would of course have wished to have Captain Callahan testify at today's hearing. Her current duties as a surgeon in Iraq did not permit that. She and her superiors did consent, however, to our making public the information she had provided us.

Today, we will hear from three witnesses who will speak about the consequences of Halliburton's failure to provide safe non-potable water to our troops.

Jeffrey Griffiths, M.D., is Associate Professor of Public Health and Family Medicine at Tufts School of Medicine, where he is also Director of the Global Health Division. He is an expert on water distribution systems and waterborne parasites.

Captain Matthew Harrison (ret'd) was a U.S. Army dentist at Camp Ar Ramadi, who began experiencing gastrointestinal problems shortly after he arrived in Iraq and has experienced them on a daily basis in the 18 months since his return from Iraq.

Richard Murphy is a representative of Iraq and Afghanistan Veterans of America (IAVA), a group that is gathering information about the health risks that contaminated non-potable water may pose to the troops, and the adverse health effects that those who used the contaminated water may have experienced.

I thank the witnesses, and look forward to their testimony.

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