

Letters from our readers

6 March 2007

The following is a selection of recent letters sent to the World Socialist Web Site.

On “Judge rules Jose Padilla competent for trial”

On March 2, Tom Carter advised that Judge Cooke ruled Jose Padilla competent to stand trial, and noted,

“Both the ‘dirty bomb’ and ‘natural gas’ allegations are entirely absent in the new charges—the first ever to be formally brought against Padilla. One can only assume that this is because there was no factual basis for the ‘dirty bomb’ and ‘natural gas’ charges in the first place.”

Since real domestic terrorists are very hard to find, efforts were made to manufacture the relevant evidence but failed. These efforts included the torture of one Binyam Mohammed....

His case was discussed by Amy Goodman in “Democracy Now” and by Rapporteur Dick Marty in the June 2006 Council of Europe Parliamentary Assembly. But only that bastion of the free press, the *New York Times*, January 4, 2007, troubled to tell us why the torture of Binyam Mohammed was necessary: he refused to manufacture false evidence needed to convict Padilla.

“The Bush administration’s military case against Binyam Mohamed, 28, the Ethiopian detainee at Guantánamo, put the current proceedings in a different light, too.

“In December 2005, Mr. Mohamed was referred to the military commission in Guantánamo on accusations that he conspired with Mr. Padilla on the dirty bomb plot. It was little noticed at the time.

“But accusations against Mr. Padilla that are nowhere to be found in the indictment against him filled the pages of Mr. Mohamed’s charging sheet, with Mr. Padilla repeatedly identified by name. The sheet referred to the two men meeting in Pakistan after Sept. 11, 2001, studying how to build an improvised dirty bomb, discussing the feasibility of a dirty bomb attack with Al Qaeda officials and agreeing to undertake the

mission to blow up buildings.

“Mr. Mohamed’s lawyer, Clive Stafford Smith, said that these charges were based on a forced confession by Mr. Mohamed, who, he said, was tortured overseas into admitting to a story that was fed to him. ‘Binyam was told all along that his job was to be a witness against Padilla, Abu Zubaydah and Khaled Sheikh Mohammed,’ Mr. Stafford Smith said, adding that his client ‘has no conscious knowledge that he ever met’ Mr. Padilla.

“The charges against Mr. Mohamed and other Guantánamo detainees who were headed for prosecution there have been suspended temporarily as a result of the Military Commissions Act passed by Congress in October. Those charges are likely to be reinstated, a Pentagon official said yesterday.

“That Mr. Mohamed faced dirty bomb charges and Mr. Padilla does not speak to the central difference between being a terrorism suspect in Guantánamo and a criminal defendant charged with terrorism offenses in the United States.”

Such are the benefits of US citizenship.

MG

Los Angeles, California, USA

3 March 2007

On “Army Secretary resigns, soldiers gagged: Washington tries to quash scandal over neglect of wounded troops”

The two Iraqi veterans with whom I have become acquainted here in my hometown are ill. They told the Army exactly what the Army wanted to hear in order to get the hell home. These two gentlemen drink excessively, flinch at the slightest loud noise, and are in constant battle with the memories of shooting or shooting at civilians. They will, if history is our guide, be sitting on street corners in the not-too-distant future dressed in their fatigues and panhandling for spare change so that they can self-medicate with any and all drugs available, both illegal and legal. They will,

undoubtedly, be arrested, incarcerated and that will be the end of the problem as far as the US government is concerned.

Be all that you can be, indeed.

PK

3 March 2007

Late one evening, there was a half-hour program on Australian TV that attempted to put a positive spin on new medical techniques that were being developed as a result of the invasion of Iraq. The program stated that the injuries US servicemen and women were sustaining in attacks by roadside bombs (especially when confined to humvees) would have caused a much higher mortality rate in the past, but new medical techniques had saved many lives.

The program focused on the rehabilitation of two US servicemen who had sustained horrific injuries. One soldier had initially lost an arm and a leg, and subsequently had to have his other leg amputated, while another soldier had sustained severe burns to much of his body.

During the course of the program, it was evident that both soldiers were suffering severe psychological trauma. They could hardly speak more than 30 seconds without breaking down into an incoherent mess.

Yet this was completely ignored by the program's presenter, who continued babbling on excitedly, lauding the new medical breakthroughs.

The poor psychological state of the soldiers was so overwhelming that it beggared belief that this propaganda piece was aired at all. There was certainly nothing from a medical viewpoint that was revolutionary. It was very sad indeed.

DD

Melbourne, Victoria, Australia

3 March 2007

On the Australian public health system

I think it is time for public hospitals to realize that employing less staff is not putting a smile on anyone's face.

Prolonged waiting periods for category 2 operations are not a funny thing and it is not a hide-and-seek game that the patient and doctor enjoy playing. (I'm not so sure about the doctor, but the patient definitely does not enjoy it!)

I have been in a vicious cycle waiting for my category 2 operation to be performed. It has been a

rollercoaster from my local GP to the emergency department at my local public hospital to my local pharmacist.

It makes me want to scream at the top of my voice when I get different opinions from every doctor I speak to with no one willing to confirm what another just said. It's more like they hide from each other rather than working in a team.

It seems that I have to be suffering in pain, screaming at the top of my voice and unable to walk in order to be considered to be seen by the next available doctor in the emergency department.

When the nurse in charge sees the patient, the patient is given a dummy in the form of panadol to "shut up."

I just want one question answered: Is all this a money-making game? Or are the public hospitals genuinely worried about the well-being of their patients?

NH

Melbourne, Victoria, Australia

4 March 2007

On the ethnic question in Sri Lanka

However much I agree with your assessment that socialism might be the solution to the present ethnic strife, unfortunately the left in Sri Lanka has failed to address the national question in a manner to obtain the support of the Sinhalese, Tamil and Muslim masses. Is it because of the strength of extreme nationalisms on the side of all ethnic groups? Or is it because the left has failed to address the issues in a thorough manner? Or is because the left has shied away from touching on ethnic discrimination? I don't know.

RM

3 March 2007



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