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One Night in Kunduz, One Morning in New York

By Tom Engelhardt
November 15, 2015

Here's a little thought experiment: imagine that we're in Kansas (without Toto) and a bridal party in three rented limos is heading down a highway toward a church where a wedding is about to take place. Suddenly, a small out-of-control plane plummets into those limos killing the bride, the mother of the bride, and five of the seven bridesmaids; 15 others are wounded. Bear with me here, if this particular method of wedding slaughter seems a little farfetched. After all, we don't (yet) have drones armed with Hellfire missiles patrolling American skies that could take out such a caravan.

So all we have is a small plane and seven dead women. Tell me, though, that such a situation wouldn't make horrified 24/7 headlines and get top TV news billing for days, that the cable news channels wouldn't be interviewing crisis counselors and wedding planners around the clock, and that they wouldn't stick with it through the tearful interviews with the bridegroom, who was practically at the altar when his bride-to-be died, and the similarly tearful funerals to come. Who can doubt for a moment that such a story would dominate the news – as, for instance, happened on October 25th when a woman ploughed her car into a crowd, killing four and injuring 50 at Oklahoma State University's homecoming parade? On the second night of coverage of the story on *NBC Nightly News*, it still came in well ahead of a breaking news report from Afghanistan and Pakistan: that more than 200 people had just died in an earthquake, including at least 12 girls killed in a panicked flight from their school.

Now, take a moment to think about something you probably never saw on your TV screen. I'm talking about not one but at least eight wedding parties wiped out in whole or in part between December 2001 and December 2013 in Iraq, Afghanistan, and Yemen by U.S. air power, and evidently two more barely a week apart this fall by the U.S.-backed Saudi air force, also in Yemen. In the first of those, two missiles reportedly tore through wedding tents in a village on the Red Sea, killing more than 130 celebrants, including women and children; in the second, a house 60 miles south of Yemen's capital, Sana'a, "where dozens of people were celebrating," was hit leaving at least 28 dead. Cumulatively, over the years (by my informal count) close to 450 Iraqis, Afghans, and Yemenis have died in these disasters and many more were wounded. Each of the eviscerated weddings made the news somewhere in our world (or I wouldn't have noticed), though with rare exceptions they never made the headlines and, of course, never did any of them get anything close to the 24/7 media spotlight we've grown so used to; nor, except perhaps at this website, has anyone attended to these disasters as a cumulative, repetitive set of events.

Again, try to imagine the reaction here if multiple wedding parties were being wiped out repetitively, always in more or less the same way. I hardly need tell you what a hullabaloo would result. In this country, even single acts of horror against Americans or by those we officially loathe regularly get such attention, as with the grisly beheadings of the Islamic State. And that is certainly appropriate. Even after all these years, what still seems strange to me, however, is that we – Washington, the media, the public – seem so cold-bloodedly unfazed by horrors repetitively committed in our name in distant lands.

All of this came to my mind once again when *TomDispatch* regular Laura Gottesdiener filed her latest piece and in it I could feel – and identify with – her frustration over the attention we regularly don't give those we kill in our war zones. ~ Tom

The Angel of Death

By Laura Gottesdiener

When people ask me what my new job is like, I tell them that I wake up very early and count the dead. When I say "very early," I mean a few minutes after four a.m., as the sky is just softening to the color of faded purple corduroy. By "the dead," I mostly mean people across the world that my government has killed or helped another nation's government kill while I was sleeping.

Once I was a freelance reporter, spending weeks or months covering a single story. Today, I'm a news producer at *Democracy Now!* and, from the moment I arrive at the office, I'm scouring the wire services for the latest casualties from Washington's war zones. It's a disconcerting job for someone used to reporting stories on the ground. As I cull through the headlines – "Suspected U.S. drone strike kills 4 militants in Pakistan"; "U.S. troops dispatched to Kunduz to help Afghan forces" – I've never felt so close to this country's various combat zones. And yet I'm thousands of miles away.

Usually, I try to avoid talking about our wars once I leave the office. After all, what do I know? I wasn't there when the American gunship began firing on that hospital Doctors Without Borders

ran in Kunduz, and I didn't get there afterwards either. Nor was I in Yemen's Saada province a few weeks later when a Doctors Without Borders health clinic was bombed.

If you live here and don't listen to *Democracy Now!*, odds are you didn't even know that second strike happened. How is it possible, I think to myself, that bombing medical facilities isn't front-page news? On that gutted clinic in Yemen, however, I can't tell you much more. I know that the strike was carried out by U.S.-backed, Saudi-led forces, and that it happened only a few days after the Obama administration approved an \$11.25 billion arms deal with Saudi Arabia. But I don't know what the air felt like that evening just before the missile hit the maternity ward.

Still, when your job is to chronicle these wars each morning, how can you not say something? How can you not start writing when our wars become all you think about, something you begin to dream about? How can you not respond when you realize, as I did recently, that the longest of them, the (second) U.S. war in Afghanistan, has stretched on for nearly half my life?

All this is my way of telling you that I need to talk to you about Kunduz.

A Calm Night in October

Like any good story, there's what happened – and then there's the version you're asked to believe. Let's start with the first one.

On Friday, October 2nd, staff members from the trauma center in Kunduz, Afghanistan, climbed to the roof of that hospital and laid out two large flags with the name of their organization: *Médecins Sans Frontières* (Doctors Without Borders), the Nobel-Prize-winning medical-humanitarian aid organization best known by its French acronym MSF. This wasn't something the workers could have done days earlier. The previous Monday, September 28th, Taliban fighters had unexpectedly seized control of the fifth largest city in Afghanistan, as up to 7,000 government troops and police fled. Over the next days, the Afghan government's efforts to retake the city sparked intense fighting between the Taliban and government troops backed by U.S. Special Operations forces.

As that fighting grew closer to the hospital, stray bullets pierced the ceiling of the intensive care unit and MSF staff were instructed to sleep inside the hospital compound. If any of them left, it was feared, they might be unable to safely return to work the next day.

And there was plenty of work to be done. One hundred wounded patients arrived on Monday – 36 of them in critical condition. The staff added 18 extra beds. Over the next four days, another 250 patients cycled through the emergency room alone. The building was so overcapacity that staff members put mattresses and pillows in corridors and administrative offices.

Fighter jets could be heard roaring overhead as the U.S. began launching airstrikes in support of the Afghan army's haphazard efforts to retake the city. Most of the hospital's staff refrained from even stepping outside.

By Friday, however, the fighting began to recede from the area around the hospital, and staff members felt safer climbing to the roof to spread out the flags in order to ensure that the facility would be identifiable from the air. The organization had also sent the hospital's GPS coordinates to the U.S. Department of Defense, the Afghan Ministries of Interior and Defense, and the U.S. Army in Kabul four days earlier. The markers were just considered one more level of protection.

The hospital itself couldn't be missed. Its lights blazed throughout Friday night and into the early hours of Saturday morning as doctors tried to tackle a "backlog of pending surgeries." Outside the compound's walls, the rest of the city, home to 270,000 inhabitants, was mostly dark. After a week of fighting, the hospital was one of the few buildings in the area that still had running generators and so the power to light itself. It was a relatively calm night, slightly overcast and unseasonably warm for early October. The sound of gunfire had receded, and some staff members even dared to step outside for the first time in days.

"The Single Deadliest Aircraft"

The explosions began just as staff members were putting patients under anesthesia in the operating room.

At 2:19 a.m., a representative of MSF in Kabul called the American-led NATO mission to Afghanistan to say that the hospital was being bombed. A minute later, an MSF representative called the Red Cross, then the United Nations. From New York, a member of MSF called the Pentagon.

We don't know what was happening inside the Pentagon that night. We do know that, back in Kunduz, a U.S. AC-130 gunship was circling above the hospital's main building.

The low-flying AC-130 is equipped with cannons and a 105-mm howitzer. It can fly at speeds of up to 300 miles per hour, but it's designed, above all, to circle close to the ground while firing at targets below. As an article in the *Washington Post* explained, "The AC-130 essentially loiters over a target at around 7,000 feet, flying in a circle and firing from weapons ports mounted on the aircraft's left side."

The gunship is specially designed for night missions. The plane is equipped with infrared sensors, while its crew of 12 (or so) sport night-vision goggles. Manufactured by Lockheed Martin and Boeing, the older version of the plane, the AC-130H Spectre, cost \$110 million apiece, while the newer AC-130U Spooky version goes for \$210 million. One Special Operations Air Force captain described the gunship as "the single deadliest aircraft and flying squadron in the war on terrorism." In 2002, this same type of gunship fired on a wedding party in Afghanistan's Helmand province, killing more than 40 people.

Versions of the gunship have been in use by the U.S. military since the Vietnam War. An older model, which flew in Operation Desert Storm, the first Gulf War, is now on display at the National Museum of the United States Air Force at Wright-Patterson Air Force Base in Ohio. It was dubbed Azrael, which in both Hebrew and Arabic means the Angel of Death.

At 2:47 a.m., a representative from MSF in Kabul texted the American-led mission to Afghanistan that one of the Kunduz hospital's staff members had just died, that many were missing, and that the trauma center was still under repeated fire.

Five minutes later, someone from the mission texted back: "I'm sorry to hear that. I still do not know what happened."

At this point, the U.S. gunship above had been firing on the hospital's main building on and off for more than 45 minutes. The strikes were, according to MSF Director of Operations Bart Janssens, very precise. "[The gunship] came four or five times over the hospital, and every time extremely precisely hit with a series of impacts on the main building of the hospital," he told Reuters.

Surviving staff members recall that the first room to be attacked was the intensive care unit, which then held a number of patients, including two children. The strikes next hit the lab, the emergency room, the X-ray room, the mental health center, and the operating theaters, where two patients were lying on the operating tables. Both were killed.

Everyone capable of fleeing tried to do so: doctors, staff, patients. One man in a wheelchair was killed by flying shrapnel. Some people were on fire as they ran. One staff member was decapitated. As people fled the building, doctors and medical staff were hit by fire from the plane. Some who survived had the impression, from the sound of the plane, that it was following them as they ran.

"A Purpose to Kill and Destroy"

MSF's hospital had been a fixture in Kunduz since August 2011, the only medical facility in the region. A photo snapped a few months after its opening showed a large sign affixed to the front gate of the compound: "The MSF Trauma Centre will prioritize treatment for war-wounded and other seriously injured persons, without regard to their ethnicity or political affiliations, and determined solely by their medical needs. No fee charged." Above the text was an image of an automatic rifle surrounded by a red circle with two thick lines through it, indicating the hospital's and the organization's strict no-weapons policy in its facilities.

Doctors Without Borders opened the facility two years after it returned to Afghanistan. In 2004, the organization had pulled out of the country after five of its workers were killed in a roadside ambush in Badghis Province. In 2009, the group returned and began supporting a hospital in Kabul. Upon its reentry, Michiel Hofman, then a director of the organization, told the German magazine *Der Spiegel* that he had been "shocked" to discover normal wartime rules of hospital neutrality didn't seem to apply in the ongoing conflict. "International forces and police," he said, "would regularly go into hospitals to harass patients. Hospitals would be attacked. There is a dire record of respecting the neutrality of health structures."

That same year, a Swedish aid group running a hospital in Wardak Province accused the U.S. Army's 10th Mountain Division of storming the facility and tying up hospital guards as the troops searched for members of the Taliban.

Nonetheless, the Kunduz hospital operated in relative peace until July 2015, when armed members of a U.S.-backed Afghan Special Operations team raided it, forcing the facility to close temporarily. It soon reopened. By October 2015, the site was under increasingly close surveillance by U.S. Special Operations analysts who, it was later reported, believed there might have been a Pakistani intelligence operative working out of the facility. (MSF officials insist that there were only nine international staff members, none of whom were Pakistani, no less intelligence operatives.)

In the days before the attack, those analysts had put together a cache of information about the hospital – including maps with the facility circled.

At 2:56 a.m., on the morning of the attack, an MSF representative in Kabul again texted an official of the American-led mission, demanding an end to the strikes, which had lasted nearly an hour. By then, flames had overtaken the main building, with children still trapped inside. Abdul Manar, a caretaker at the hospital, recalled the sound of their cries. “I could hear them screaming for help inside the hospital while it was set ablaze by the bombing,” he told *Al Jazeera*.

“I’ll do my best,” the official responded. “Praying for you all.”

The strikes nonetheless continued. At 3:10 and 3:14, MSF again called the Pentagon. Finally, sometime around 3:15 a.m., the gunship flew off and the strikes were over.

With the operating rooms destroyed, surviving staff members turned an office desk into a makeshift operating table and attempted to treat a doctor whose leg had been blown off. Lajos Zoltan Jecs, a nurse, helped with the surgery. The doctor, he recalled, died atop that desk. “We did our best,” he wrote later, “but it wasn’t enough.”

The staff were in shock. Many were crying. Jecs and others went to check on the damage in the intensive care unit only to find six patients burning in their beds.

In all, 30 people died: 13 staff members, 10 patients, and seven bodies so badly burned that, more than a month later, the remains have not yet been identified.

The hospital closed that same day. About two weeks later, a U.S. tank rammed into the shell of the charred building, possibly destroying evidence of what that AC-130 had done. All told, MSF General Director Christopher Stokes concluded: “The view from inside the hospital is that this attack was conducted with a purpose to kill and destroy. But we don’t know why.”

Another Version of the Story

That’s one version of the story, based on a Doctors Without Borders preliminary report on the destruction of their hospital, released on November 5th, as well as on articles published by Reuters, the Associated Press, the *Washington Post*, the *New York Times*, and *Al Jazeera*, the testimonies of medical staff published by MSF, and a *Democracy Now!* interview with the executive director of MSF USA.

Here's the second version of the story, the one we in the United States are meant to believe. It's far more confusing and lacking in details, but don't worry, it's much shorter.

On October 3rd, an American AC-130 gunship "mistakenly struck" a hospital run by Doctors Without Borders in Kunduz. The attack was ordered by U.S. Special Operations forces, possibly at the behest of the Afghan army (or maybe not).

Earlier contradictory accounts, all issued within the span of four days, go as follows: (1) it may not have been an American air strike; (2) the U.S. launched airstrikes in the neighborhood of the hospital and the facility was hit by accident; (3) the hospital was hit because American Special Operations forces were under fire near the hospital and called in the strikes in their own defense; (4) the facility was hit because Afghan forces supported by that Special Ops unit "advised that they were taking fire from enemy positions and asked for air support from U.S. forces."

As the story changed, culpability shifted back and forth. The Afghans, not the Americans, had called in the attack. No, the Afghans never directly called in the attack. The Americans called in the attack from within the U.S. chain of command.

In the end, the bottom line from Washington was: we're conducting a full investigation and one of these days we'll get back to you with the details.

This second version of the story (in its many iterations) came from commander of the U.S. mission in Afghanistan General John Campbell, White House spokesperson Josh Earnest, and Pentagon spokesperson Peter Cook. Unnamed sources added some colorful, although unsupported allegations about a Pakistani intelligence agent or armed Taliban fighters being inside the hospital – despite all evidence to the contrary.

Campbell offered his "deepest condolences." President Obama called the head of MSF and personally apologized for the "tragic incident." The Pentagon promised to make "condolence payments" to the families of those killed.

Several investigations into the "incident" were launched by the Pentagon and a joint Afghan-NATO team. However, MSF's repeated call for an independent investigation by the International Humanitarian Fact-Finding Commission, established under the additional protocols to the Geneva Convention, have been ducked or ignored.

There is, at least, one aspect both accounts agree on: the timing.

It's undisputed that the attack occurred on October 3, 2015 – just over nine months *after* President Obama officially declared the ending of the U.S. combat mission in Afghanistan.

All the Unknown Deaths

In the mornings as I scan the news, I'm often overcome by the absurdity of writing about ongoing wars that have officially ended or a hospital that has been "mistakenly" struck with exceptional precision. The U.S. bombing of that trauma center in Kunduz was indisputably

horrific, “one of the worst episodes of civilian casualties in the Afghan war,” as the *New York Times* described it. But its outrageousness comes, in part, because for once we have enough information to piece the story together since that AC-130 attacked a well-known, prize-winning, Western humanitarian organization.

To my mind, however, the truly disconcerting stories are the ones that arrive at my desk with so little information that it’s almost impossible to say or write anything with certainty. And so I can’t really tell you what happened on August 12th, when “a *suspected* U.S. drone strike in Yemen... killed five *suspected* al-Qaida militants,” as the Associated Press reported in the standard language used to obscure attacks for which we, in the United States, have essentially no real information whatsoever.

Who were these five people, I wonder, killed suddenly as they drove along a road somewhere to the east of the city of Mukalla? Statistically speaking, there’s a reasonable likelihood that they were innocent people. As the *Intercept* recently reported, based on leaked secret documents, 90% of those killed during one recent period in the U.S. drone campaign in Afghanistan were not the sought-after targets. Without being there, however, I can’t tell you who those five Yemeni “militants” were, or what lives they led, or how many children they had, or even whether they were children themselves – and the odds are that neither can the Pentagon.

Nor can I tell you what happened when the U.S. launched its first drone strike in Syria on August 4th. I remember scouring different news sources over the following mornings for the most basic piece of information: how many people – if any – had been killed. That was, after all, what I was doing: waking up early and counting the death toll from America’s endless wars.

But in the days and weeks that followed, the Pentagon’s spokesman refused to offer specifics of any sort on this strike. It’s possible he didn’t have any. And so, to this day, even the number of deaths remains unknown.