

1-19-1994

## DDASaccident045

Humanitarian Demining Accident and Incident Database  
*AID*

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# DDAS Accident Report

## Accident details

<b>Report date:</b> 11/03/2004	<b>Accident number:</b> 45
<b>Accident time:</b> 08:00	<b>Accident Date:</b> 19/01/1994
<b>Where it occurred:</b> Mutarara District, Tete Province	<b>Country:</b> Mozambique
<b>Primary cause:</b> Unavoidable (?)	<b>Secondary cause:</b> Victim inattention (?)
<b>Class:</b> Victim inattention	<b>Date of main report:</b> 31/01/1994
<b>ID original source:</b> MB/HB	<b>Name of source:</b> HB/MB
<b>Organisation:</b> [Name removed]	
<b>Mine/device:</b> Type 72 AP blast	<b>Ground condition:</b> not recorded
<b>Date record created:</b> 22/01/2004	<b>Date last modified:</b> 22/01/2004
<b>No of victims:</b> 1	<b>No of documents:</b> 2

## Map details

<b>Longitude:</b>	<b>Latitude:</b>
<b>Alt. coord. system:</b>	<b>Coordinates fixed by:</b>
<b>Map east:</b>	<b>Map north:</b>
<b>Map scale:</b> not recorded	<b>Map series:</b>
<b>Map edition:</b>	<b>Map sheet:</b>
<b>Map name:</b>	

## Accident Notes

victim ill (?)  
inadequate investigation (?)  
no independent investigation available (?)  
inadequate equipment (?)

## Accident report

No formal accident report was available at the Country MAC or the demining group's country office. A brief report (in Norwegian) was obtained from other sources,

The head of the accident investigation was interviewed about the accident in Angola on 9<sup>th</sup> December 1998. He said that during August of 1994 this deminer had fallen into a coma and been treated in a hospital in Malawi. He was in hospital for four weeks but the cause of his

illness was not identified. The only thing wrong with him was that he had very high blood pressure. In September/October he returned to work in the mined areas. His supervisors thought very highly of his work as a deminer.

On the day of the accident the victim felt sick and had fainted previously but had refused to see the medic because he was afraid of losing his job. He became dizzy and stepped in front of his end of lane marking stick. He stepped on a Type 72A and suffered injuries to his toes at 08:00. Immediately after the accident he apologised to those attending him for having stepped over his stick. A fortuitous medevac by helicopter was possible and the victim was picked up at 08:25. At 09:30 he arrived at Chimoio where he was taken by ambulance to the Italian army field hospital (ONUMOZ).

A friend visited him that afternoon and his condition was stable, causing no concern.

At 03:00 a.m. the next morning his condition deteriorated with a blockage in a "vein" (possibly artery). He died at 05:00 a.m.

## Victim Report

<b>Victim number:</b> 64	<b>Name:</b> [Name removed]
<b>Age:</b> 40	<b>Gender:</b> Male
<b>Status:</b> deminer	<b>Fit for work:</b> DECEASED
<b>Compensation:</b> US\$4,500	<b>Time to hospital:</b> 2 hours
<b>Protection issued:</b> Safety spectacles	<b>Protection used:</b> not recorded

### Summary of injuries:

INJURIES

minor Arm

minor Leg

severe Foot

FATAL

COMMENT

See medical report. The victim died 21 hours later of kidney or heart failure.

### Medical report

A doctor concluded that the victim was seriously ill with kidney failure before the accident.

See "Related papers" for a report of the injuries given by the ex-pat supervisor at a later interview.

In a summary of all demining injuries from the group's management in March 2003, it was recorded that the victim suffered "the front part of his left foot... blown off...a cut under his left arm and other minor cuts and bruises". He died from a "blood clot and haemorrhaging that resulted in renal (kidney) failure and heart failure".

Compensation of US\$4,500 was paid to his family.

## **Analysis**

The primary cause of this accident is listed as "*Unavoidable*" because the victim himself made poor judgments about his own health and then accidentally stepped out of the safe area. This was the kind of "human error" than is unavoidable. The secondary cause is listed as "*Victim inattention*" because it seems that the victim had a lapse of concentration.

If the victim he had good reason to think he might lose his job if he reported sick, that might represent a significant management failing. (Incidentally, the oldest deminer among these records was over 60 years old at the time of this accident.)

The "inadequate equipment (?)" noted refers to the issue of industrial safety spectacles as PPE.

## **Related papers**

No documents were made available. The demining group's head office promised assistance in February 1999 but the promise was not honoured.

An ex-pat Technical Advisor with the group at the time of the accident reported (January 1999) that the victim was the oldest deminer employed by the group at the time (over 40 years old). He was cutting vegetation immediately before the accident, stood up and felt dizzy and staggered forward. The doctors at the hospital told him that the victim died of heart failure.

Another ex-pat Technical Advisor gave the name of the victim in July 1999. He also reported that the victim has suffered cerebral malaria when in hospital in Malawi before the accident. He was on site at the time and reported that this victim was working squatting (as approved) and was on a slight downward slope. He suffered minor lower leg/shin injuries on the same leg as his injured toes and a minor upper arm injury.