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Humanitarian Demining Accident and Incident Database

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DDAS Accident Report

Accident details

Report date: 18/05/2006	Accident number: 248
Accident time: 11:20	Accident Date: 05/09/1998
Where it occurred: Amar Khail Village, Ashrow, Wardak Province	Country: Afghanistan
Primary cause: Unavoidable (?)	Secondary cause: Inadequate training (?)
Class: Excavation accident	Date of main report: [No date recorded]
ID original source: none	Name of source: MAPA/UNOCHA
Organisation: Name removed	
Mine/device: grenade	Ground condition: hard rocks/stones
Date record created: 17/02/2004	Date last modified: 17/02/2004
No of victims: 1	No of documents: 1

Map details

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

Accident Notes

inadequate training (?)

Accident report

An investigation on behalf of the UN MAC was carried out and its report made available. The following summarises its content.

At the time of the accident the demining team were using a one-man clearance drill in two-man teams. The victim had been a deminer for four years. He had returned from leave one day before the accident and had last attended a revision course five months previously. The accident occurred on a hillside described as "medium" with rocks and bushes but "suitable for prodding".

The investigators determined that the victim got a detector reading and marked it, then put on his helmet and started to prod. He struck the fuse of a grenade with his bayonet and

heard a "fuse detonation sound" [click of a delay mechanism arming] so was scared. He stood up.

The Section Leader shouted for the Victim to lie down but he did not. The grenade detonated at 11:20 and caused injuries to his "chest, abdomen, thighs, legs and face". The victim's visor and detector "received some slight damage".

The victim was taken to the Field Medical Unit and from there to the ICRC hospital in Kabul. From there he was taken to hospital in Peshawar, Pakistan.

The Team Leader stated that the victim was in the process of lying down when the grenade exploded. He thought that the victim moved the grenade and so inadvertently pulled out the pin with his bayonet. He described the injuries as minor, and included injury to his testes.

The Section Leader reported that he "heard a slight explosion of a fuse" and shouted to the victim to lie down.

The victim's partner said that the victim was lying prone when the accident occurred - and that it was 15 days to his wedding.

Conclusion

The investigators decided that the grenade was "booby trapped" in some way so that it could be pressure initiated. They thought that the victim might have been psychologically "unsuitable" to carry out the task because he was excited by his wedding only two [sic] days away. The victim was not available to be interviewed.

Recommendations

The investigators recommended that all deminers be briefed about the dangers of pressure released booby traps because "booby trapped grenades have been repeatedly found". A "proper pulling drill" should be used if a booby trap is suspected. They also recommended that survey teams make "all possible efforts" to collect information about booby traps during their survey.

Victim Report

Victim number: 322	Name: Name removed
Age:	Gender: Male
Status: deminer	Fit for work: not known
Compensation: not made available	Time to hospital: not recorded
Protection issued: Helmet Thin, short visor	Protection used: Helmet, Thin, short visor

Summary of injuries:

INJURIES

minor Arms

minor Face

severe Body

severe Chest

severe Genitals

severe Legs

COMMENT

See medical report.

Medical report

An original casualty report listed the victim's injuries as:

"penetrated wounds in right chest and abdomen;

lacerated wounds and fragments in scrotum;

multiple injuries both thighs and legs;

simple wounds on face."

The field medic's report included a sketch that showed fragment wounds and lacerations on both legs, the stomach, both arms and the right chest. He rated the injuries as "severe". The victim's vital signs were recorded as pulse 130/min, BP 140/100, Respiration 29/min.

The field doctor described the injuries as:

"Three perforated wounds of abdomen. Two perforated wounds on the chest at right M.C.L. Perforated wounds of scrotum and poly injuries of both legs and arms and forearm."

A photograph of the victim showed multiple superficial leg wounds.

Analysis

The primary cause of this accident is listed as "*Unavoidable*" because the victim came across an unknown device that he had not been prepared to deal with. The secondary cause is listed as "*Inadequate training*".

It may be that he should have been trained to expect it, or to react differently when something unexpected was encountered. The investigators recognised a training lack and suggested covering this issue.

The victim was wearing a helmet mounted visor that may have been raised. However, these short visors stand away from the face and it is possible for fragments to strike the lower face when the visor is down.