Caught in the Crossfire:
The Humanitarian Impacts of Small Arms

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Introduction

Amidst all of the debate about controlling the proliferation and misuse of small arms, there is a glaring, fundamental omission—the human face. Research and policy tends to focus on supply-related issues such as production and the mismanagement of stockpiles, inter-state transfers and the illicit trade, technical aspects of weapons tracing, marking, collection and destruction, and on legal or normative regimes designed to stop the flow of weapons. But missing from all of this is the human dimension—a consideration of how people are affected daily by the presence of these weapons—particularly in regions of armed conflict.

It is essential that we recall the human devastation directly attributable to small arms on an annual basis: more than 200,000 deaths from homicide and suicide in the industrialized world, and at least 300,000 killed during armed conflicts occurring in developing countries. Millions more suffer from non-fatal injuries and crippling disabilities, while the anguish of further untold numbers cannot even be documented.

This chapter considers the plight of the hundreds of thousands of people who are fatally and non-fatally wounded by small arms. It recalls the millions deprived of their homes and assets at gunpoint—whose very livelihoods are threatened by the presence of small arms. It forces the humanitarian advocate and policy-maker to reflect upon the damaged wreaked by a single bullet. It challenges all of us to consider, even before the bullet tears through flesh and splinters bone, how to reduce the humanitarian impacts of small arms.

The chapter also highlights those instances where the humanitarian community has mounted a forceful response to the issue of small arms availability and use. Critical entry-points considered in the chapter include supply-side advocacy and the strengthening of export criteria to ensure the adoption of human rights and humanitarian norms, the application and enforcement of international humanitarian law in war zones, and operational reform among humanitarian agencies themselves.

Key findings of this chapter indicate that:

- The humanitarian impacts of small arms—fatal and non-fatal injury, forced displacement, and declining access to basic needs—are severe, especially in regions affected by armed conflict.
- The impacts are difficult to quantify because of poor or non-existent data collection facilities and insufficient international attention and concern.
- Many humanitarian agencies are reconsidering previously sacrosanct principles of neutrality and impartiality as small arms proliferation endangers their activities and personnel.
- Responding to the humanitarian impact of small arms is a growing priority within the humanitarian sector.
- Strengthening current humanitarian approaches, coupled with the innovative use of international humanitarian law and codes of conduct, offers the best hope for alleviating the humanitarian impacts of small arms.

The *Small Arms Survey 2001* identified the direct and indirect effects of small arms on population, health and criminal activity as well as on relief and development. It compared the consequences of small arms availability and use from different perspectives, examining high- and low-income countries including those at war and peace. This chapter focuses exclusively on the consequences of small arms on individuals and societies in those regions affected by chronic violence and armed conflict. All but a handful of today's armed conflicts take place in developing countries. These are the regions emphasized in this chapter, concentrating on the human cost of small arms for civilians and the responses of predominantly European and North American humanitarian actors. The chapter considers the following three questions:

- **What are the humanitarian impacts of small arms?**
- **Are they getting worse?**
- **How is the humanitarian community responding to the humanitarian impacts?**

The first section introduces a conceptual framework to examine the humanitarian impacts of small arms, which include not only hundreds of thousands of deaths and injuries but also millions of international refugees and internally displaced persons (IDPs). It stresses a range of quantitative and qualitative indicators that can be used to measure the growing human suffering associated with small arms. The section shows how humanitarian and relief agencies and organizations can use evidence of the humanitarian impacts to more effectively influence public opinion and to design more appropriate responses.

The chapter goes on to demonstrate that the humanitarian impacts are escalating in magnitude and severity chiefly as a result of new wars. In contrast to the past, civilians constitute a disproportionate number of both combatants and victims in these conflicts, wars whose dynamics are determined primarily by the availability and use of small arms. Recognition of the persistence of these new wars has triggered a revitalized rights-based response from the human rights and humanitarian community. Humanitarianism is shifting from a primary concern with non-politicized, short-term assistance and protection to a growing preoccupation with the rights of so-called beneficiaries and the responsibilities and obligations of the international community toward those affected by systemic armed violence. The widespread insecurity generated by small arms also presents a direct challenge to the sacrosanct principles of neutrality and impartiality implicit to humanitarian action.

As a result of the significant impacts of armed violence and the enormous challenges associated with controlling small arms, humanitarian actors have started to mount a comprehensive response. The third section charts the emergence of three overlapping, but distinctly humanitarian responses to the availability and use of small arms in areas affected by armed conflict. These include supply-side, legal, and operational perspectives. To be sure, the infusion of principles of human rights and international humanitarian law into multilateral instruments such as codes of conduct and export controls indicates a growing awareness of the humanitarian dimensions of small arms control. The chapter examines the issues involved in these critical debates, considers their strengths and deficits, and highlights the implications of small arms-related insecurity on the future of humanitarian action.

> The widespread insecurity generated by small arms challenges the principles of neutrality and impartiality implicit to humanitarian action.

The humanitarian impacts: Growing dangers and new evidence

There can be no doubt that the human impacts of small arms availability and use are considerable and far-reaching in all corners of the world. More than half a million people are fatally wounded as a result of small arms use every year, whether through intentional violence, such as homicide and suicide, or unintentionally, such as through

accidental shootings. As noted in the *Small Arms Survey 2001* (Small Arms Survey, 2001, p. 236), 'the gross estimate of global deaths from all forms of homicide, war, and suicide in 1998 stood at 2,272,000 ... from war, the number totalled 588,000'. It is estimated that at least 50 per cent of these conflict-related deaths can be attributed to the intentional use of small arms and light weapons. Alarmingly, recent studies of battlefield statistics have indicated that the proportion of people wounded in combat by small-calibre ammunition (as opposed to other types of munitions) frequently rises above 70 per cent (Sellier and Kneubuehl, 2001).

Arguably the most commonly reported, if under-researched, impacts of small arms emerge from armed conflicts and societies struggling to recover from war. The media is saturated with a bewildering array of images depicting the militarization of despair. Headlines concentrate on child soldiers, traumatized refugees, and the apparent senselessness of contemporary war, with accompanying snapshots invariably portraying the familiar silhouette of an AK-47. The United Nations General Assembly (UNGA) has observed how virtually every department of the UN system is exposed to the consequences of armed conflicts, crime, social dislocation, displacement, and human suffering that are directly or indirectly related to the unregulated availability of small arms (UNGA, 2000). In spite of widespread acknowledgement of the problem, humanitarian and relief agencies are only slowly developing an awareness of the specific impacts of small arms.

Humanitarian actors increasingly acknowledge that civilians are more insecure in today's new wars. They also recognize that their staff are regularly exposed to armed violence and criminality and that small arms are frequently a key element in the various safety and security challenges they face. Even so, the scale and dimension of unregulated small arms availability in regions of conflict are consistently under-appreciated (see Box 4.1). This is because the impacts of small arms have until recently been appraised from legal, military, or policy perspectives rather than with a deliberate focus on the human costs.

Efforts by the International Committee of the Red Cross (ICRC) to reorient the small arms debate toward international humanitarian law in the mid-1990s led to wider recognition of the public health perspective on these issues (Coupland and Meddings, 1999; ICRC, 1999; 1997). Some in the medical community, however, are concerned that publicizing medical information from the study of firearm-related injuries in areas of warfare could have the perverse effect of indirectly leading to improvements in the design and development of weapons themselves. While such concerns must be taken seriously, they need to be balanced against experience. As demonstrated by the banning of dum-dum bullets in the late nineteenth century and anti-personnel landmines in the late twentieth, the success of any humanitarian campaign rests on the mobilization of public opinion. Past experience suggests that weapons are more likely to be restrained out of public abhorrence and political expediency than strictly for reasons of public health or military utility.

Introducing the indicators

A first step towards generating public awareness and designing appropriate preventive measures would be the documentation of the humanitarian impacts of small arms on civilians. The humanitarian implications of small arms availability and use are vast, though the research community has yet to appreciate its full dimensions. Recent contributions by public health specialists, criminologists, social scientists, and economists have helped chart a rough path forward. Humanitarian and development personnel exposed to the impacts of small arms in the course of their daily work have also begun to seriously consider the issue and to voice their concerns.

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BOX 4.1   Data collection: Never as easy as it seems

Is the post-Cold War world really a more dangerous place for civilians? With the limited data available, can policy-makers, aid agencies, or the public fully appreciate the scale and costs of fatalities and injuries caused by small arms, let alone their long-term consequences on families and communities and the social and economic environment at large?

Central to the development of basic indicators is reliable and verified data on the number, profile and types of injuries and their causes, and on risk factors associated with small arms and their distribution. There are many challenges associated with collecting statistics on the humanitarian impacts of small arms, not the least of which relate to the lack of humanitarian agency and donor engagement in research itself. Other obstacles include the absence of standardized or comparable definitions and methods for collecting and collating data, logistical barriers and threats to data gatherers, limitations in geographic coverage and consistency among existing surveillance systems, and attitudinal and cultural issues that lead to under and over-reporting. Some specific challenges include:

- *Poor data-collection and monitoring capacities.* A recurring problem for relief agencies and donors relates to the inability of governments and NGOs to determine systematically what is taking place at the global level. On the one hand, firearm-related deaths and injuries often appear to be seriously under-reported where they are caused by warfare or repression. On the other hand, many aid institutions indirectly contribute to the problem by awarding low priority to intelligence—data-collection and evaluation—and limiting their focus only to those areas that are easily accessed. Where research is carried out, it is often tainted by selection bias and poor research methods that favour existing programmes and activities. Furthermore, data is rarely effectively processed or properly maintained and institutional memory is concomitantly limited. On top of this, the novelty of the small arms issue represents a barrier in and of itself, often dismissed as someone else's problem or jurisdiction.

- *The tendency of public or private agencies to exaggerate.* The relief and development communities frequently generate inaccurate and inflated numbers, whether out of ignorance or intentionally, to justify programmatic interventions and to mobilize public opinion. Figures are often cited without any empirical foundation. For example, are 90 per cent of small arms-related casualties in conflict really civilians, as many UN agencies and humanitarian NGOs claim? Are 80 per cent of these really women and children? Are there really 300,000 child soldiers fighting in today's wars? Do we have sufficient or verified data to validate these figures or are they politically expedient estimations? Though potentially useful for advocacy purposes, loose approximations can unintentionally and detrimentally reorient debates from substance to credibility.

- *The importance attached to confidentiality and neutrality.* Confidentiality and neutrality are regarded as mainstays of humanitarian legitimacy. Even where agencies accumulate large reservoirs of data relating to small arms, they are frequently left unused or considered too sensitive because they relate to ostensibly political issues such as military action or human rights violations. Though attitudes are rapidly changing, concerns with the politics of information have led many agencies to withhold data for fear of it being manipulated or abused by other actors. Many humanitarian agencies are reluctant to reveal data on patient injuries or deaths. A few, however, including the ICRC and Médecins Sans Frontières (MSF) occasionally release selected findings.

Rigorous data collection and common definitions are a priority for sound evidence-based policy. Appropriate methods need to be developed and epidemiological surveys administered in order to collect data on the type of deaths and injuries and their causes, and the risk factors and distribution of such deaths and injuries within communities. In this way a baseline for trend analysis and future comparisons can be established. Emergency preparedness and conflict monitoring systems can be developed and improved where they consider small arms. Furthermore, researchers and policy-makers need to be properly trained to generate and assess data on the humanitarian impacts of small arms in order to improve interventions designed to reduce armed violence.

This chapter draws its conceptual approach from a study commissioned by the UN Inter-Agency Standing Committee's Reference Group on Small Arms (RGSA), which described the humanitarian impacts of small arms as 'the short and long term effects of armed violence [on people] carried out with small arms and taking place immediately prior to, during and following from complex, human-made emergencies' (Muggah and Berman, 2001, p. vii). This definition suggests that the humanitarian impacts of small arms are inextricably tied to the human costs. It is less concerned with the policy or distinctly economic consequences of small arms proliferation than with the individual victims and widespread fear made possible by small arms availability. These impacts commonly, but not exclusively, take place during armed conflict and extend to all manner of human rights abuses, including death, torture, rape, recruitment of child soldiers, kidnapping, and forced disappearances (see Table 4.1).[1]

BOX 4.2   Accessibility thesis and the humanitarian impacts

Is the unregulated availability of small arms associated with increases in both unintentional and intentional death and injury, forced displacement, or declining access to basic needs? Evidence drawn together in the *Small Arms Survey 2001* (Small Arms Survey, 2001, pp. 200–5) demonstrated that firearms availability and ownership are a proximate determinant influencing the likelihood of homicide, suicide, and accidental death. In addition to other structural causes, intentional death and injury, involuntary displacement, and rapidly declining access to basic needs can be facilitated by the availability of firearms during conflict.

   While cultural, social, and economic factors are important in determining the likelihood of whether an individual will resort to violence, the presence of a weapon—whether used in criminal violence or in conflict—conditions the severity and magnitude of the humanitarian impacts. A range of direct and indirect factors, from horizontal inequality to cultures of violence and war, all affect the likelihood of mortality and morbidity. Since making the leap from correlation to causation is notoriously difficult in such matters, many scholars have been cautious about establishing causality where small arms are concerned. But when dealing with epidemics that kill or maim—including firearm injuries—the price of inaction is devastatingly high.

The range of impacts of firearm violence on relief and development is very diverse. There is a virtually unlimited array of objective and subjective impacts related to small arms availability and use, most of which are under-appreciated. These often relate to fear—of death, injury, and long-term insecurity—and are difficult to quantify. A major reason why these impacts remain under-analysed is because they can be described only by affected people themselves. Methods aimed at revealing these vital perspectives, including victimization surveys and participatory research, are considered throughout the chapter.

TABLE 4.1   A framework for assessing the humanitarian impacts of small arms

Humanitarian impact	Primary indicators
Firearm-related death and injury	Firearm homicide rates Firearm suicide rates Unintentional firearm injury rates Intentional firearm injury rates Firearm-related disability rates Psychosocial and psychological trauma associated with armed violence
Violence-induced displacement	Number of refugees and internally displaced persons (IDPs) Incidence of firearm-related death and injury among displaced people Incidence of armed intimidation and assault among displaced people Arms availability in refugee/IDP camps Child mortality rates (CMR) among displaced and relocated populations Social and physical welfare of refugees/IDPs (rape, child soldiers, etc.)
Collapsing access to basic needs and declining social capital	Social and physical welfare of women and children Household access to basic needs Community and customary cohesion Declining access to public goods Sexual violence

Objective indicators of the humanitarian impacts of small arms include the health-related effects on civilian populations such as firearm-related death and injury, as well as long-term disability and psychological trauma. Also considered is the destruction of medical services and the vulnerability associated with deteriorating social welfare provision capacities. However severe the immediate human impacts attributed to small arms, it is important to recall that the larger burden of mortality experienced during episodes of armed violence is attributable to the secondary costs of war, such as death from malnutrition, disease, and preventable illness.

The fact that millions of people die each year, not from the direct acts of violence but because the various functions of armed violence deprive them of access to health services, is not a novel finding (Ghobarah *et al.* 2001; Leaning, Briggs, and Chen, 1999). It should be recalled, however, that small arms can also contribute to an increase in the scale and pace of killing, the likelihood of illness, and the possibility of violations of international humanitarian law. The case of Sierra Leone is indicative. Immediately following the invasion of the country's capital, Freetown, by the Revolutionary United Front (RUF) in 1999, a senior government pathologist reported that more than 7,330 people had been shot and killed in a single month: almost one per cent of the city's entire population. Thousands more suffered lacerations, mutilations, and firearm injuries.[2] Additional surveys carried out in Sierra Leone recorded that almost 60 per cent of all war injuries were gunshot-related, that 11 per cent of all victims were under the age of 15, and that 43 per cent were women (Salama, Laurence, and Nolan, 1999).

Another marker of the humanitarian impacts of small arms on civilians is violence-induced displacement. Depending on whether they have crossed an international border, displaced people can be counted as either internally displaced people (IDPs) or international refugees. It is possible to register the number of people forced to leave their homes at gunpoint. For example, spontaneous internal displacement within Colombia is largely due to massacres involving handguns and assault rifles. Surveys administered in IDP and refugee camps in Albania, Uganda, Sri Lanka, and Georgia record systematic shootings, threats at gunpoint, firearm-related homicides, and other violations of human rights and humanitarian law involving military-style weapons. The militarization of refugee camps is also a growing concern. Finally, violence-induced displacement and relocation is associated with dramatic increases in the risk of illness and communicable disease. The threat and use of small arms, therefore, have long-term health consequences for displaced people that extend well beyond the bullets themselves.

Though more difficult to measure or attribute directly to small arms availability, civilian access to basic needs—including food, water, and shelter—is often eroded by the climate of fear generated by the threat and use of small arms. While men are particularly susceptible to firearm death and injury, women and children are also acutely vulnerable to a range of firearm-related insecurities including recruitment as soldiers, sexual violence, and pathological coping strategies during periods of extreme violence, all of which affects their access to basic needs (WHO, 2001a, p. 10). Invariably, livelihoods are reshaped by arms-related insecurity: customary institutions such as pastoral migration patterns and dowry systems are undermined by threats associated with arms availability. For example, in Kenya, Somalia, Ethiopia, the Sudan, and Uganda, pastoral and agrarian communities are regularly terrorized by the presence of AK-47-wielding bandits and cattle-rustlers. In this context, individual perceptions of armed violence can directly influence day-to-day decision-making. These choices will also have tangible implications for household health and well-being, including the decision to take up weapons in self-defence.

Death and injury in conflict

The WHO World Health Report database estimated in 1998 that 2.3 million people died worldwide as a result of intentional violence. This amounts to an overall death rate of 38.4 per 100,000, compared with 19.9 per 100,000 for all road traffic injuries. Importantly, of these 2.3 million deaths 42 per cent were classified as suicide, 32 per cent were homicide, and 26 per cent—588,000—were war-related.[3] According to a subsequent report released by the WHO (2001a, p. 11), trends involving small arms use and intentional violence were similar in 2001 to those in 1998.

Deaths and injuries from war wounds occur predominantly among young men in the South, the part of the world where armed conflicts are most prolific and precisely where death and injury data is weakest.[4] Since the reliability of health statistics frequently mirrors a country's level of development, many deaths and injuries go unreported. Even where criminal or tribunal investigations are conducted, they frequently underestimate the magnitude of deaths and injuries attributable to small arms. Sometimes, the only deaths and injuries recorded are those that occur in hospital for which a death certificate is completed. But the majority of deaths occur away from hospitals and clinics; injured victims often seek health care from alternative sources and the fatally-injured are frequently buried immediately by their families.

In 1998, the international death rate for intentional violence amounted to 38.4 per 100,000, compared with 19.9 per 100,000 for all road traffic injuries.

BOX 4.3 First question: Where are the injured?

A study by Coupland and Meddings (1999, p. 407) attempted to demonstrate the importance of context in relation to assessing the impacts of small arms and light weapons. The authors reviewed firearm incidents involving combatants, paramilitary groups, and civilians stretching back to the 1920s. Their study confirmed the widespread assumption that the number of people injured in conflicts is usually two to three times the number killed though it can increase to as high as 13.0. They also found situations in which the ratio decreases and fatalities can actually outnumber those injured.

The 'injury to killed' ratio can potentially reveal a number of insights into the circumstances of a particular incident. For example, according to Milas (1999), the total number of Croatian army soldiers fatally injured in the period from the beginning of July 1991 until the end of March 1992 was 487, while the number of severely wounded was 2,301. In this case, the injury to killed ratio was 4.72. By way of contrast, during an incident reported by the BBC involving the Sri Lankan army and the Liberation Tigers of Tamil Eelam (LTTE) in 1997, approximately 80 Tamil guerrilla deaths were reported and only 70 wounded: an injury to killed ratio of 0.87.

Where the number killed is greater than the number wounded, such as in situations where firearms are used against people that are immobilized or unable to run away or defend themselves, the injury to killed ratio will shrink to zero. It can be tentatively assumed that fighting was at close range, may have involved execution-style killings, and potentially involved violations of international humanitarian law. Meddings and Coupland (1999, p. 409) conclude that: 'the increased mortality resulting from the use of firearms in situations other than war requires a complex interaction of factors explicable in terms of wound ballistics and the psychology of the user... understanding these factors has implications for the recognition of war crimes'.

War-related shootings: Kill–injury profile

Incident	Date	Killed	Injured	Ratio
Second World War (Italians)	1944–45	27,944	76,351	2.7
Vietnam (Marines)	1965–73	12,944	512,399	39.6
Northern Ireland (British Army)	1970–80	300	1,700	5.7
Former Yugoslavia (FYU) (Croatians)	1991–92	15	78	5.2
Mogadishu raid (US)	1993	18	70	3.9

Source: Coupland and Meddings (1999)

Mass shootings: Kill-injury profile

Incident	Date	Killed	Injured	Ratio
St Valentine's Day Massacre	1929	6	1	0.17
Wah Hee massacre	1983	13	0	0
Port Arthur, Tasmania	1996	35	18	0.51
Dunblane, Scotland	1996	18	15	0.94
Littleton, Colorado	1999	13	23	1.76

Source: Adapted from Coupland and Meddings (1999) with assorted media reports

International firearm-related mortality rates are difficult to compare because the vehicle leading to death—small arms—is rarely included in the International Classification of Disease (ICD) categories of homicide, suicide, unintentional deaths, or deaths of undetermined intent. As noted by Krug, Powell, and Dahlberg (1998, p. 215), 'even within these categories, the information on the firearm components are not separately provided in the World Health Organization's World Health Statistics Annual, the most common source of data for cross-national comparisons of mortality rates'. Official death reports in many war-affected countries must therefore be interpreted with great caution and awareness of the limitations at each step in the recording process. Even at the local level, hospital statistics are frequently misleading as a record of the overall patterns of serious non-fatal injury if the community does not have access to facilities, if public confidence in the health system is low, or if the referral system for transferring injured patients to hospitals is poor. At this stage, it is more instructive to review trends and patterns of deaths and injuries during conflict rather than rendering longitudinal cross-country comparisons.[5]

A basic epidemiological finding is that for every fatal small arms-related injury in armed conflict there are likely to be many more non-fatal injuries. Estimates from non-conflict affected states, such as the United States, indicate a 1:3 ratio of killed to non-fatally injured victims, though rates fluctuate according to circumstances (WHO, 2001a, p. 13). Ratios of injured to killed tend to be lower in situations of underdevelopment and armed conflict, particularly where human rights violations are taking place (Box 4.3).[6] A detailed appreciation of the injury to killed ratio is often confounded by under-reporting, inconsistent monitoring, and the fact that the number of war-wounded who actually receive treatment in clinics and hospitals are not necessarily representative of the total number of people injured in any particular armed confrontation. Although agencies such as the WHO, the ICRC, and MSF document some injury types in their field operations, many do not differentiate statistically between lesions attributable to fragmenting bombs and artillery fire, weapons other than firearms (such as knives or spears), or secondary effects such as malnutrition or disease in their reporting systems.

Fatal and non-fatal injuries: What are the trends?

The fact remains that firearm-related mortality and injury represent objective markers of the humanitarian impacts of small arms. Though not explored in this chapter, the long-term effects of fatal and non-fatal firearm injuries can also be quantitatively measured through the use of composite econometric indexes such as year's of potential life lost (YPLL) and disability-adjusted life years (DALY).[7] Although some situations and societies present more risk than others, the life-, life-years, and disability- adjusted years, lost rates are often proportionately similar. A seminal study produced by Krug, Powell, and Dahlberg (1998, p. 221) concluded that 'war is probably an important factor contributing to firearm mortality... in 1990, war was estimated to be the sixteenth cause of DALY's lost throughout the world, but by 2020, it is projected to be the eighth leading cause of DALYs lost'. Though data is currently limited, it is increasingly clear that the economic costs associated with the death and disability of young men—often at the most productive time of their lives—are potentially calculable.[8]

While estimating the full extent of the financial costs of firearm casualties is possible, it is confounded by a lack of data on the actual number of fatal and non-fatal gunshot injuries and basic denominator data in the regions of greatest concern[9] (Murray *et al., 2002;* Sethi *et al.,* 2000; Zwi *et al.,* 1996; Cummings, Koepsell, and Mueller, 1995). Nevertheless, the level of professional interest is such that, even where mortality data is inadequate, prominent medical journals regularly publish studies of the number of civilians shot and killed or injured and disabled by firearms. The value of consistent and widely disseminated data on firearm death and injury can extend beyond awareness-building in the public domain to the elaboration of practical preventive health interventions and the protection of civilians more generally.

Who gets hurt?

Though the impacts of armed combat on soldiers have been studied since the American War of Independence (1775–83), the medical literature on the consequences of small arms on civilians has burgeoned only in the past two decades. The ICRC (1999), for example, has assembled an injury database that consists of systematic data on almost 28,000 patients—combatants

Non-fatal small arms injuries leave a legacy of suffering, including disability, psychological trauma, and lost productivity.

and non-combatants—admitted between 1991 and 1998 from its field hospitals in Afghanistan, Rwanda, Chechnya, and the border regions of Kenya and Cambodia. Almost 70 per cent of all admitted patients were wounded by bullets, bombs, shells, mortars, or mines; the rest were treated for burns, for blunt trauma wounds, or for reconstructive surgery. Contrary to popular belief, fewer than half of the weapons-wounded were civilians (see Box 4.4).

BOX 4.4   Are 90 per cent of war-related victims really civilian?

There is a common perception that 90 per cent of all casualties in armed conflict are civilian and that 80 per cent of all war-wounded are women and children. These two statistics were widely cited in the mid-1990s without reference to a methodology describing how the figure was actually determined.

The wound database of the ICRC was installed in January 1991. It includes records on all patients wounded in war who have been admitted to the Red Cross hospitals on the Afghan border of Pakistan, as well as in Kabul and Khandahar, in Khao I Dang on the Cambodian border of Thailand, in Butare in Rwanda, in Novi Atagi in Chechenya, and also in Lokichokkio on the Sudanese border of Kenya. Between January 1991 and July 1998, 18,877 of the 27,825 admitted patients registered sustained injuries relating to bullets, bombs, shells, and mines, while the rest were admitted as a result of burns, blunt trauma wounds, or for reconstructive surgery.

The ICRC does not request information on combatant status but rather on the sex and age of patients. A follow-up analysis of approximately half of the victims reported since 1991 noted that only 35 per cent were female, male and aged under 16, or male aged 50 and above: that is, civilian.

Source: Coupland and Meddings (1999), updated following interviews with ICRC personnel in Geneva, October 2001.

Surprisingly, arms-related death and injury do not necessarily decrease dramatically when wars come to an end. Two seminal studies by teams of epidemiologists and surgeons at the ICRC provide a more textured analysis of the potential humanitarian impacts of arms saturation on civilians.[10] One study reveals that, during some armed conflicts, mines and fragmenting munitions—for example, mortars, bombs, and shells—are more likely than bullets to cause civilian casualties. Analysing patient data from Afghanistan, the research indicates that weapons-related casualties decreased by less than 35 per cent during the 18 months following the cessation of hostilities in war-torn areas where large numbers of arms remained in circulation (Michaels *et al.,* 1999; Coupland and Samnegaard, 1999).

The other study, drawing on field hospital data from Cambodia, notes that civilians accounted for over 40 per cent of combat-related casualties and over 70 per cent of all non-combat weapon casualties (Meddings and O'Connor, 1999). The study reveals that the threat of arms-related death or injury to civilians in non-combat settings can surpass rates experienced during conflict periods if weapons remain diffused in society. As noted below with the example of the Republic of Congo, these trends hold elsewhere (see Box 4.5).

A disturbing feature of contemporary conflict is the ease with which the most basic human rights of combatants and non-combatants, particularly women and children, are violated. In virtually every war-torn country, many of these violations can be traced to the availability and use of small arms. For example, of the estimated 2.5 million civilians believed to have died between 1998 and 2001 in the Democratic Republic of Congo (DRC), more than ten per cent are estimated to have been shot outright. The targeting of pregnant women is reportedly common (Les *et al.,* 2001; MSF, 2001).

The effects of small arms availability on specific groups can vary dramatically. At the height of the fighting in Chechnya, almost one half of civilian casualties were reported to be children (United Nations, 1999; UNSG, 1996). In Colombia's southern Putumayo Department in 1998, the firearm homicide rate among males rose above 1,900 per 100,000, compared to a national rate of 53.99 per 100,000. Local health officials have aptly described Putumayo as 'one of the most violent places on the planet' (Departamento Administrativo de Salud, 1999). By way of contrast, the firearm homicide rate for Brazil was recorded at 25.78 per 100,000, and for comparatively safe Costa Rica it was 2.57 in the mid 1990s.

Often overlooked is the fact that warfare can result in an even greater number of civilian disabilities from firearm injury. These injuries carry a disproportionately high cost, even if they are difficult to quantify using conventional methods (see Box 4.6). If properly funded, the cost of physical rehabilitation and prosthetic limbs alone could easily absorb the entire health budget of a nation (Handicap International, 2000). Firearm injury and disability rates are particularly compelling measurements of the humanitarian impacts of small arms on civilians. According to the WHO (2001b), interpersonal violence, self-inflicted injuries, and war injuries are among the top five largest contributors to global

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BOX 4.5   Who gets hurt? Evidence from hospitals in Congo-Brazzaville

In a study commissioned by the International Organization of Migration (IOM) and the United Nations Development Program (UNDP) of small arms use during the conflict and post-conflict period in the Republic of Congo, a Small Arms Survey research team assessed the impacts of firearm violence during 1998–2000 in the capital, Brazzaville. Examination of admittance records from three hospitals with broadly similar numbers of patients revealed that male youth were acutely predisposed to firearm-related injuries both during and following the civil war. Though the study is descriptive—and vital denominator data could not be established due to poor record-keeping (and the absence of data during the conflict periods)—it yielded a number of revealing trends.

Reported firearm casualties in Brazzaville, 1998–2000

Type of weapon	Districts of Brazzaville/Reported cases							Total
	Makélékélé	Bacongo	Poto Poto	Moungali	Ouenze	Talangai	Mfilou	
Small arm	131	75	219	238	220	471	0	1,354
Blade	17	3	0	3	0	6	1	30
Grenade	6	3	0	0	0	33	0	42
Rocket-propelled grenade (RPG)/mortar	0	0	0	0	0	1	0	1
Other	0	0	0	0	0	0	0	0
Total	154	81	219	241	220	511	1	1,427

Source: Demetriou, Muggah, and Biddle (2001)

Of the estimated 1,354 men who were injured with firearms (95 per cent of all casualties listed above) approximately one-quarter were under 20 years old. More than 40 per cent were between the ages of 21 and 30. Among admitted female patients, the majority of reported firearm injuries were experienced by adolescents and women between the ages of 11 and 30. Overall, the proportion of those injured that were almost certainly civilian casualties—namely, under the age of ten, over the age of 50, or female—was approximately 38 per cent.

health burdens among people aged 15–44. Though only a preliminary estimate, the WHO contends that 0.7 per cent of the global burden of disease in 2000 was attributed to war, including years of life lost and DALYs.

According to Murray *et al.* (2002, p. 348): 'The ratio of years to life lost due to premature mortality caused by conflict to years lived with disability from conflict is 4.75.' Not surprisingly, this burden is distributed across regions in similar proportions to direct deaths from conflict.

Firearm-related disabilities are prevalent in both conflict and post-conflict affected societies. For example, in El Salvador, Honduras, and Guatemala the abundance of leftover small arms coupled with endemic cultures of violence and high levels of inequality are believed to have resulted in a high injury burden (WEAPONS COLLECTION). Rough estimates indicate that for every 1,000 weapons collected from former combatants in the region there are approximately 100,000 unaccounted for in circulation (Godnick, 2001). It is perhaps no surprise, then, that Central America has a firearm homicide rate that fluctuates between 30 and 50 per 100,000 which, in spite of latent crime reporting, is equal to those of some of the most volatile war zones on the planet (Fajnzylber, Lederman, and Loazya, 2000). As illustrated in Figures 4.1 and 4.2, and Appendix 4.1, the firearms injury rate is much higher.

The countries of Central America have firearm homicide rates equal to those in some of the most volatile war zones on the planet.

BOX 4.6   The Intifada: Behind the headlines

Since the second *Intifada* began in September 2000, some 1,500 Palestinians, mostly young men, have been left with permanent crippling injuries. Lethal fire comes from M16 rifles and M24 sniper weapons, as well as from higher-calibre munitions. Some of the worst injuries come from the fragmenting bullets of M16s. Designed for maximum stopping power, the M16 bullet can tumble or break into pieces after penetration, causing multiple internal injuries and massive exit wounds, much like those of the internationally banned dum-dum bullets. Ballistics studies have indicated that the wounding potential of a fragmenting bullet is far higher than that of a regular bullet. Such bullets have a 90 per cent likelihood of leading to a loss of a limb—including by amputation—as opposed to only ten per cent among victims injured by a traditional full metal-jacketed bullet.

But even the more benign ammunition designed for riot control, like so-called rubber bullets—actually rubber-coated steel—can be fatal at short range. According to Dr Jihad Marshal: 'They are the nightmare of the neurosurgeon... Every time the patient moves his head, it's like a marble moving in jelly. There's nothing you can do about it' (Andoni and Tolan, 2001). This situation reveals the impacts of both the discriminate and the indiscriminate usage of small arms to specifically maim, disable, and kill. In a letter written by General Giora Eiland to a prominent Israeli human rights lawyer, it was suggested that '[a] large part of those wounded by live bullets are those we indeed wanted to not only injure but kill... The fact that most of them are wounded in the upper body or head is a positive thing'. After a flurry of international condemnation, the rate of head and chest injuries dropped, replaced by devastating leg and abdomen wounds. But according to Dr Robert Kirschner who works for Physicians for Human Rights: '[s]hooting people with high-velocity bullets to wound them is a form of summary punishment being inflicted in the field' (Andoni and Tolan, 2001).

Limited health services further exacerbate the possibility of permanent injury and death. For example, after being shot, Fouad Mahed had to be taken to Amman for surgery, where he still lost his right leg. Doctors in Gaza gave him 17 pints of blood to replace what was pouring from the wound. Skin graft complications forced doctors to send him to Amman because he could not get adequate treatment in Gaza hospitals. At the age of 17, Ibrahim Mustafa Darwish has also undergone multiple surgeries to remove a metre of intestines after being shot in the abdomen. This occurred during protests at a checkpoint dividing Gaza from Israel, when Israeli soldiers were firing at the group of stone-throwers from a distance of 15 metres.
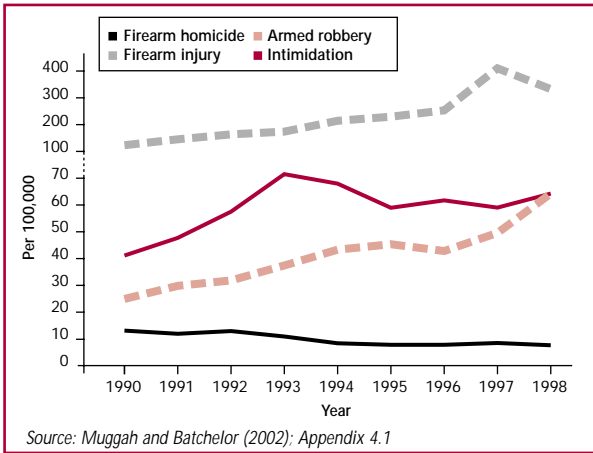
Source: Andoni and Tolan (2001)

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In the war of adults, children are often victims. If violence begets still more violence, what lies ahead for these children?

Similar trends are apparent in both conflict-affected and peaceful regions of east Africa. Studies carried out in clusters of districts in Uganda, Sudan, and Kenya have noted disproportionately high levels of firearm-related injuries in comparison with national averages.[11] An ICRC field hospital in Lokichokkio (Kenya) and a public hospital in Uganda registered between 40 per cent and 65 per cent of all monthly in-patients with firearm injuries from automatic weapons (Kobusingye *et al.,* 2002; Muggah and Berman, 2001).

FIGURE 4.1   Insecurity in Nicaragua

Source: Muggah and Batchelor (2002); Appendix 4.1

Even for those victims able to reach clinics in war-torn countries, the most elementary instruments, medicines, and services are lacking. The physical and human capacities of such facilities are often severely overstretched. They can even be deliberately targeted with small arms during complex humanitarian emergencies. Particularly among afflicted African countries, hospitals and staff are overwhelmed and ill-equipped to treat firearm injuries. One Ugandan surgeon implore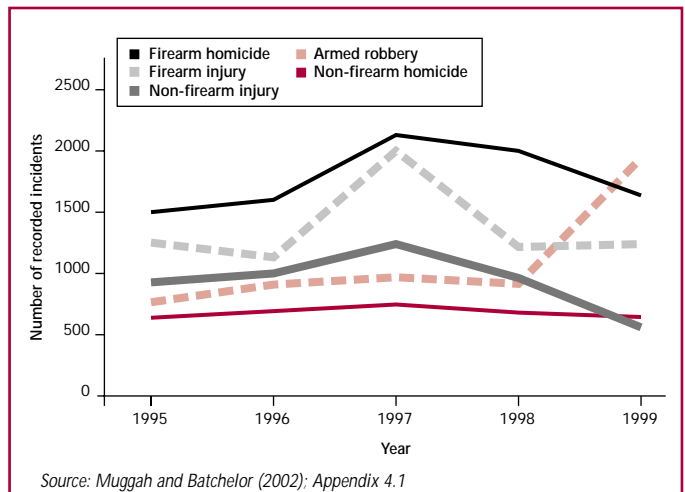s: 'How can you triage when faced with a five-year-old with a bullet hole in his chest and a three-year-old with her leg blown off by a landmine... it's simply ridiculous.'[12]

The systemic under-capacities of hospitals and the limited access of civilians to facilities also heighten the risk of infection. A surgeon contracted by Oxfam-GB (2001b, p. 29) to assess the impacts of small arms in the Democratic Republic of Congo (DRC) described the situation thus: 'Bullet wounds, if treated without proper surgical debridement, rapidly develop into deep festering wounds and bone infections (osteomyelitis). Many of the wounded admitted... had been in hiding for weeks before being able to seek refuge and care in the hospital. Others were treated in health posts that had already been looted or burnt.'

Psychological effects

Though armed conflicts lead to a tremendous number of civilian deaths and disabilities, the humanitarian impacts of small arms are not restricted to fatalities and physical lesions. The health-related implications of small arms use on psychosocial and psychological well-being must be considered as well. Even with well-functioning trauma systems that maximize survival from devastating injuries, considerable long-term morbidity and disability persists. As has been extensively discussed by military psychologists and war historians, psychological stress associated with armed conflict ordinarily accounts for the larger share of population health impacts. During the Second World War, for example,

FIGURE 4.2   Insecurity in Honduras

Source: Muggah and Batchelor (2002); Appendix 4.1

'America's armed forces lost... 504,000 men from the fighting effort because of psychiatric collapse... by the 1974 Arab-Israeli war, almost a third of all Israeli casualties were due to psychiatric causes' (Grossman, 1995, p. 43).

Post-traumatic stress disorder (PTSD), for example, is described by the American Psychological Association's (2000) *Diagnostic and Statistical Manual of Mental Disorders* as a reaction to a psychologically traumatic event outside the range of normal experience. It is characterized by, among other things, emotional blunting and detachment, social withdrawal, extreme suspicion of others, and recurrent nightmares.[13] Approximately 15 per cent of the 2.8 million American Vietnam war veterans were diagnosed as suffering from PTSD; and almost 150,000 are affected to the extent that they are still unable to lead a normal life without extensive medication and therapy (Dumas 2001; Slaby 1989). Given that PTSD is a long-term disorder and that the majority of the world's small arms victims do not have access to sustained treatment, medical facilities or counselling, the implications are sobering.

It is important to also consider that *personal* recovery from physical and psychological firearm injuries is to a large extent grounded in *social* recovery. Where societies continue to be plagued with armed violence and cultural, political, and economic livelihoods are systematically undermined, the prospects for recovery are bleak. This is because psychological trauma is unlike physical trauma: 'People do not passively register the impact of external forces (unlike a leg hit by a bullet) but engage with them in an active and social way' (Summerfield, 2000). Community studies in El Salvador have documented increased psychosocial stress that is correlated with increased collective exposure to armed violence. High levels of direct exposure to violence and psychological effects have been reported among Kosovar Albanians and in Sri Lanka and Vietnam (Cardozo *et al.,* 2000; Ugalde *et al.,* 2000). Effective treatment therefore requires, in many cases, a reduction in exposure to prolonged armed violence. In the view of some health specialists, 'the psychological effects of [complex humanitarian emergencies] on victims have not begun to be fathomed' (Leaning, Briggs, and Chen, 1999, p. 10).

Intimidated by a gun: Forced displacement

By the end of the 1990s, up to 40 million people had been violently forced to leave their homes, either crossing a border and officially documented as a refugee or, more likely, internally displaced within their own borders. The United Nations High Commissioner for Refugees (UNHCR) (2001a) estimates the number of refugees at 12.8 million and the Representative of the Secretary-General for Internally Displaced People estimates the number of IDPs at between 20 million and 25 million. Millions more fled who were not counted, eschewing, in some cases, assistance and protection for fear of violent recrimination and social or economic marginalization. To be sure, 'refugees are only the tip of the iceberg of human suffering—at least twice the number of refugees are typically either internally displaced or trapped at home' (Leaning, Briggs, and Chen, 1999, p. xvi) (see Map 4.1 and Appendix 4.2).

One in every 120 people is designated as either internally displaced or refugee, and small arms-related intimidation represents a critical factor inhibiting sustainable repatriation or resettlement. Most refugees and IDPs appreciate the persuasive power of a single weapon. Agencies such as the UNHCR (2001a, p. 283) have also recently noted that 'armed conflict is now the driving force behind most refugee flows'. The United Nations (1999, p. 2) has repeatedly observed that 'in many recent and current internal armed conflicts, combatants deliberately intimidate, attack, and displace local populations to further their pursuit of economic control over natural resources. In such cases combatants rely on, and indeed profit from, civilian displacement.'

One in every 120 people is designated as either internally displaced or as a refugee.

For example, in 1999 widespread violations of human rights occurred against ethnic Albanian Kosovars in the course of mass deportations by the Serbian army, leading to NATO's 78-day air war. A survey carried out by Iacopino and Waldman (1999) notes that more than 30 per cent of all Kosovar households reported at least one of the following abuses among members: shooting, threat at gunpoint, firearm homicide, torture, beating, separation,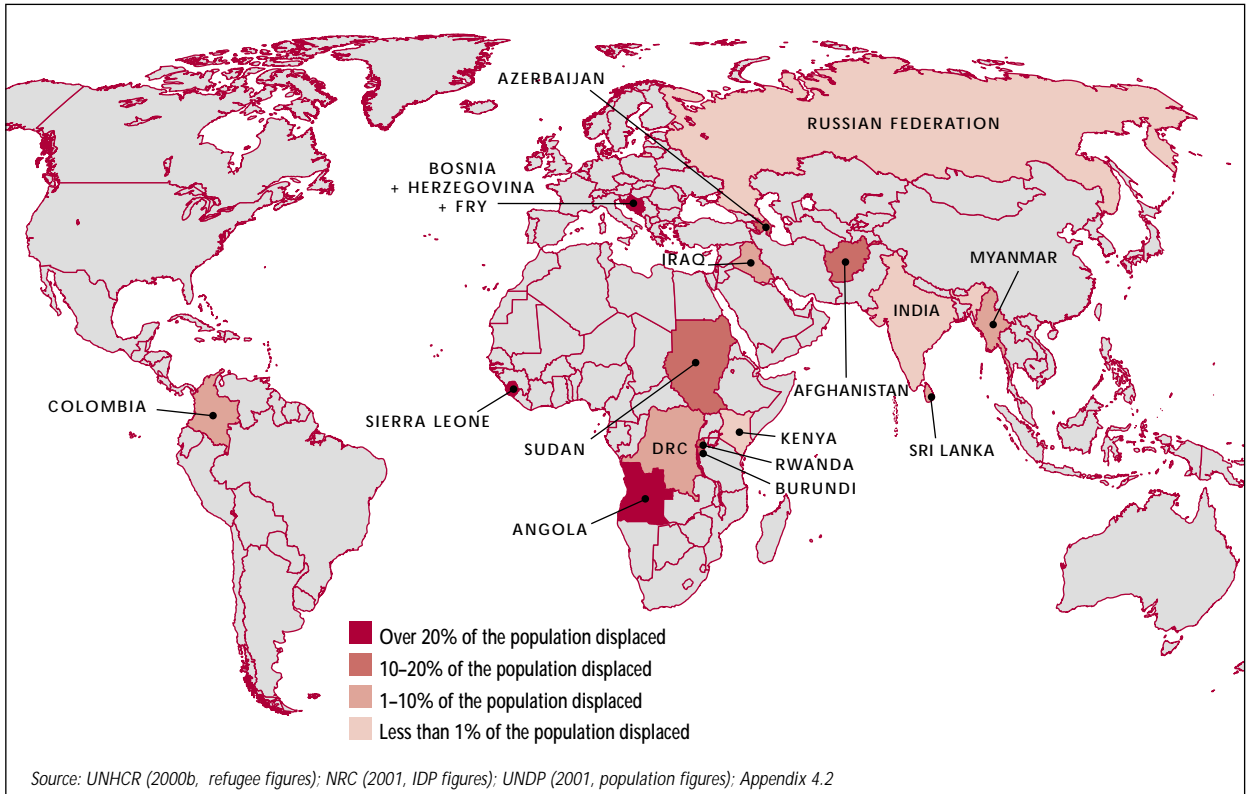 disappearance, and sexual assault. Similarly, as a result of the sheer scale and lethality of armed violence in Rwanda, between 25 and 40 per cent of the Rwandan population was displaced and more than 500,000 refugees spilled across the country's borders following the genocide (Melvern 2000; Human Rights Watch, 1994). The violence there has not stopped. In Rwanda, testimonial evidence documents how groups of armed men massacre civilian refugees in clinics and makeshift hospitals across the border in (the former) Zaire (Minorisa, 2001).

When considering the viability of international humanitarian law in protracted wars, such as in Congo-Brazzaville, the question remains: are new warriors fighting by old rules?

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Armed danger in the camps

From Srebrenica to Goma, some of the worst small arms-related violations against civilians have taken place against refugees and IDPs during transit or in safe-areas. This is largely because settlements populated by displaced people are highly insecure. They are typically close to an international border or located on desolate or isolated tracts of land. A large part of the humanitarian response to complex emergencies, such as those in Colombia, Sudan, and Sri Lanka, is devoted to ensuring the safety of displaced people who are frequently vulnerable to rampant crime and violence after they have temporarily resettled. In Colombia, estimates of the IDP population range from 400,000 to 2.2 million (CONPES, 1999; NRC, 2001). Disputes over the actual number of IDPs reveal just how inadequate surveillance capacities can be, as well as the state's political reluctance to respond. A large proportion of Colombian displacement can be attributed to massacres; 90 per cent of atrocities committed by the military, paramilitary, or guerrilla actors are reportedly carried out with small arms (Muggah and Berman, 2001). IDPs continue to be targeted long after being displaced, often coerced into precarious and arms-saturated settlements to face destitution, continued persecution, or a life of crime (Crisp, 1999).

It is well-known that locating a refugee or IDP camp near a border conflict zone will never allow the settlement to be permanent and free of refugee warriors or armed actors. The case of Kenya is illustrative. In both of Kenya's 'official' refugee camps—Dadaab and Kakuma—over 200,000 Sudanese, Ethiopian, Somali, and Central African refugees are subjected to armed violence on a daily basis (see Figure 4.3 and Appendix 4.3). According to the Integrated Regional Information Network (IRIN, 2000b), there is a very strong possibility that the camps are being used to traffic arms: 'There have been shooting incidents in the camps... it is easy for people to move around with arms on that border [with Somalia]

MAP 4.1   Far from home: A sample of displaced populations around the world

AZERBAIJAN

RUSSIAN FEDERATION

BOSNIA
+ HERZEGOVINA
+ FRY

IRAQ

MYANMAR

INDIA

AFGHANISTAN

COLOMBIA

SIERRA LEONE

KENYA

SUDAN

DRC

RWANDA

SRI LANKA

BURUNDI

ANGOLA

Over 20% of the population displaced

10–20% of the population displaced

1–10% of the population displaced

Less than 1% of the population displaced

Source: UNHCR (2000b, refugee figures); NRC (2001, IDP figures); UNDP (2001, population figures); Appendix 4.2

because there is no control [in Somalia]'. A study commissioned by UNHCR observed that a large proportion of women collecting firewood out of the Dadaab refugee camp are raped at gunpoint by armed assailants. UNHCR has managed to reduce the number of rapes by having wood trucked into the camps. In 2000, there were an estimated 72 reported rape cases compared with 142 in 1998.[14] But only an estimated 30 per cent of firewood needs are being met. Women remain vulnerable to armed attack and more than 150 informal police reservists have been deployed to police the camp.

These risks have hastened a shift in strategy by humanitarian and development agencies. Though many have refused to engage in military protection, others felt no other solution was viable. For example, in response to increasing camp militarization, key interventions called for by the UNHCR (2000, pp. 1–2) include 'disarming exiled groups who have access to weapons and curtailing any flow of arms into refugee populated areas... [and] disarming exiled soldiers and other armed elements, and ensuring their effective re-absorption into civilian society'. In Tanzania, for example, the UNHCR has begun experimenting with community policing. In areas where it has introduced armed security guards, such as Dadaab (Kenya), it has been criticized for favouring wartime economic activities over peacetime ones and rewarding those in control of a wartime economy.
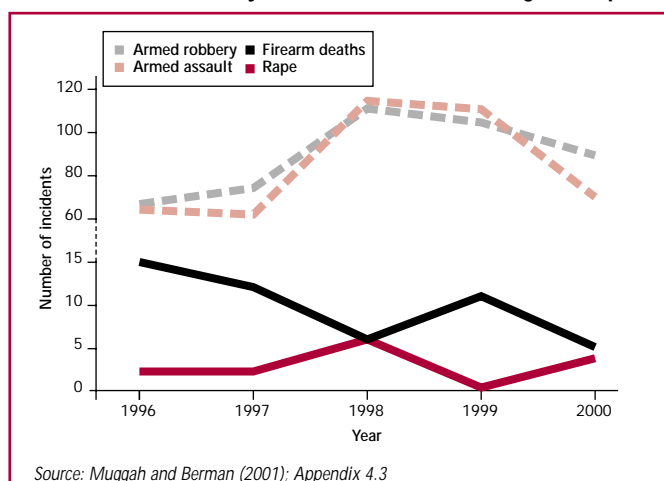
Indirect impact on displaced people

Small arms proliferation indirectly causes suffering from poor conditions in and around the camps. The mobility of refugees and IDPs, and therefore their capacity to trade and collect food or fuel, are often severely constrained. Malnourishment is frequently a consequence of arms related insecurity. As a result, violently displaced people are prone

A large proportion of Colombian displacement can be attributed to massacres; 90 per cent of atrocities committed by the military, paramilitary, or guerrilla actors are reportedly carried out with small arms.

to acute morbidity from disease such as measles, respiratory infections, and malaria. This is most severe among young children, as documented below. Nor are adults immune. A recent study of IDPs in Guinea Bissau discovered that patients with tuberculosis whose treatment was disrupted because of war were three times as likely to die as those who were fully treated in peacetime (Gustafson *et al.*, 2001).

Other diseases have re-emerged as a result of arms-related violence. Sleeping sickness (trypanosomiasis) was thought to

FIGURE 4.3   Security incidents in Kakuma refugee camp, 1996–2000

Source: Muggah and Berman (2001); Appendix 4.3

have been eliminated in the 1960s, but population displacement and the collapse of health systems as a result of civil wars have caused a resurgence of the disease. It is precisely those countries affected by protracted armed violence—southern Sudan, Sierra Leone, and the DRC—that are reported to be among the worst affected areas: more than 150,591 new cases of sleeping sickness have been detected during the past decade (Dobson, 2001). Internal conflicts, such as those that have taken place in the Balkans and Angola, also threaten the eradication of poliomyelitis (Bush, 2000; Ebersole, 2000).

BOX 4.7   Waving the white flag: Cease-fires and immunization

Despite the overwhelming threats presented to health workers during armed conflict, health interventions such as national immunization days (NIDs) have been successfully implemented and generated creative opportunities for peace-building. One of the first efforts to employ an NID during a conflict situation took place in El Salvador during the 1980s; a three-day cease-fire was agreed among armed combatants so that the United Nations Children's Fund (UNICEF), the Roman Catholic Church, the ICRC, and others could immunize some 400,000 children against polio.

Since then, cease-fires designed to ease the humanitarian impacts of small arms have been carried out in Afghanistan, Angola, DRC, Lebanon, Liberia, Nicaragua, Sierra Leone, and Sudan. In addition to the measurable health impacts of such programmes, the full value of cease-fires extends well beyond the specific health intervention. Cease-fires can be conceived as turning points for generating the trust necessary for underpinning local and national peace. Such initiatives can usefully reduce the 'habit' of fighting and allow the necessary space for combatants to savour the benefits of peace over war. The termination of hostilities among combatants does not have to be a precondition for what have been labelled humanitarian cease-fires, but the humanitarian impacts of small arms can nevertheless be mitigated.

Source: Ebersole (2000)

According to reports by UNICEF (2001), 'polio immunization campaigns have been hampered because of the conflict... Records have been lost and people have been constantly on the move. The whole infrastructure is having to be replaced.' In Somalia, despite being selected according to clan loyalty, 650 vaccinators taking part in a WHO/UNICEF campaign failed to successfully immunize the population: 'In one area, the chief of the subsection said he would shoot any vaccinators who came because we hadn't recruited anyone from his sub-district' (IRIN, 2000b). The introduction of humanitarian cease-fire represents one innovative response undertaken by the UN to allow for increased immunization and vaccination of children in conflict (see Box 4.7).

Basic needs and faltering rights

The humanitarian effects of small arms are not necessarily short-term or even immediately visible. Even in non-conflict affected societies, rampant small arms availability and use can generate a climate of fear among ordinary citizens and in some cases, a culture of violence that can last for generations. Among civilians, perceptions of insecurity influence household decision-making, access to food, water, and shelter, mobility and commerce, and investment of productive resources in labour and land (Muggah and Batchelor, 2002). Pervasive insecurity, both real and perceived, continues even after the formal cessation of hostilities. For example, in Nicaragua, El Salvador, and Honduras, the number of violent deaths in 1998–99 was higher than the number of people known to have died during the wars. It is not surprising, then, that perception surveys from Guatemala to Sri Lanka suggest that many urban residents feel more insecure today than during the war.[15]

The low cost and accessibility of weapons make them particularly attractive commodities to otherwise unemployed, humiliated, or disenfranchised youth. Adolescents are forcibly recruited into the ranks of gangs or informal armies; and many lose access to a range of entitlements, including formal education or access to health care. While the militarization of despair is particularly strong among adolescent boys and young men, it is growing among girls and women. Women are simultaneously recruited at gunpoint into armed factions such as the Revolutionary Armed Forces of Colombia (FARC), the Liberation Tigers of Tamil Eelam (LTTE), or Sierra Leone's Revolutionary United Front (RUF), targeted for sexual abuse and ritual humiliation, and put into situations of extreme insecurity. Women and children feel the humanitarian impacts acutely because they have limited access to basic services. Though the humanitarian impacts of small arms on the basic needs and rights of civilians are manifold, three deserve special attention: child soldiers, sexual violence, and child mortality.

In Nicaragua, El Salvador, and Honduras, more people died violent deaths in 1998–99 than during the wars. Many urban residents feel more insecure today than during the war.

Small arms and child soldiers

The access of children to their basic needs is frequently curtailed where they are recruited at gunpoint into armed groups. Children are often violently seized from elementary schools and orphanages or off the street to serve as combatants on the frontlines, domestic labourers, or sexual slaves to formal and informal armies alike. Though some of these children may benefit from a new range of entitlements made accessible by armed violence, their rights and long-term health and welfare are invariably compromised by a life of informal soldiering.

The Coalition to Stop the Use of Child Soldiers and the Save the Children Fund (SCF) estimate that some 300,000 child soldiers, as young as seven years old, are actively fighting in about 41 countries.[16] An additional 500,000 are reportedly recruited into paramilitary organizations, guerrilla groups, and civil militias. Where there is an abundance of small arms in today's wars, there are armed children: whether suicide bombers in Sri Lanka, soldiers in Myanmar, guerrillas in Colombia, or militia in Sierra Leone. The technology of weaponry only aggravates the problem: 'The availability of modern lightweight weapons is exacerbating the problem because even small children can become killers' (Inocenti, 2001).

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In places like Sierra Leone, small arms and ammunition have become integral to the symbolic functions of warfare.

While the number of child soldiers is indicative of the magnitude of the humanitarian impacts of small arms, it is the exposure of children to firearm violence that yields long-term consequences (Machel, 2000). In many countries, small arms and ammunition have become an essential part of the coercive and symbolic functions of warfare. In Congo, for example, a concoction of gunpowder, narcotics, and alcohol was provided to child combatants that was purported to enhance their strength and invulnerability. Virtually all over the world, weapons—from Makarov pistols to RPG-launchers—are openly flaunted as status symbols, much like a cellular phone or a designer label (STOCKPILES). Such relationships are fostered early on and are difficult to reverse, bringing with them long-term generational and developmental challenges.[17]

Small arms and sexual violence

The documented experiences of women in war since Ghengis Khan and the Thirty Years War leave little doubt about the prevalence of rape in warfare. Small arms have facilitated gender-specific atrocities and raised the risk threshold for women (Dybdhal and Pasagic, 2000). For example, Olujic (1998) reported that some 20,000 women were raped at gunpoint, by Bosnian Serb soldiers as part of a deliberate pattern of abuse where sexual violence fulfilled a strategic purpose. Weapons therefore assume a symbolic role in the violent repression of women (Cock, 2000; Fitamant, 1999). Significant under-reporting and concealing of the problem, however, have limited our awareness of it.

Women also suffer from a long-term decline in their access to basic needs through loss of husbands and children to massacres, leading to dramatic transformations in their earning power and social status that extends well beyond the individual to the social and communal realm. These changes can distort the access of household members to basic needs such as adequate nutrition, housing or shelter, health, and education. Humanitarian workers have noted persistent food insecurity among households in arms-saturated areas even in those locations benefiting from substantial agricultural and food aid, indicating a relationship between systematic armed violence and reduced access to basic entitlements (Muggah and Berman, 2001).

BOX 4.8   Measuring terror in Abkhazia

Ritual humiliation and terror carried out on a daily basis with guns may be measured by the number and intensity of acts, but the true extent of its impacts cannot be converted into hard figures. Though a recent study carried out by the Small Arms Survey sought to empirically measure the impacts of small arms availability in the region (Demetriou, 2001), it is worth quoting a Human Rights Watch Report (1995, p. 5) at length to illustrate how small arms were used to terrorize civilians in Abkhazia:

> In a typical scenario, reportedly practised by both Georgian and Abkhaz forces against civilians, a man would be stopped on the street by armed men and asked his identity or place of residence. If he identified himself as from an enemy group, the men would humiliate him, threaten and beat him with fists and rifle butts. Then they would force him to take them to his home, where they would beat and intimidate the family, including children, and sometimes subject one or all to mock executions in front of the others. They would then typically rob the family, and sometimes take the male members, sometimes to terrorize them and their families and sometimes to torture and execute them. Often these visits were repeated. Such ethnically-oriented abuse forced much population displacement.

Small arms and child mortality

Small arms availability disrupts referrals, immunization programmes, and monitoring and surveillance, resulting in some cases, in an increased dependency on foreign aid and personnel (WHO, 2001a; Ugalde *et al.,* 2000). Such disruptions generate a host of secondary consequences including high mortality rates among young children.

Small arms can have devastating effects on the vulnerable who are unable or too afraid to access essential services.

There is a strong correlation between high rates of armed violence, deteriorating public services, and proportionately higher death rates for children from non-violent causes. Extreme variations can occur within states and even between communities and households. A recent International Rescue Committee (IRC) study (Les *et al.,* 2001) on violence in the DRC confirms this association: 'While only ten per cent of all deaths, or 14 per cent of the excess deaths, were attributed to violence, there is a strong association (across both time and space) between higher violence rates and higher death rates from infectious disease... In Mboa and Kalemie, it is estimated that 75 per cent of children born during this war have died or will die before their second birthday.' Displaced children suffer from malnutrition because of scarcity of food in the area and armed insecurity (MSF, 2001).

A child mortality rate (CMR) of ten per 100,000 per day is regarded as an emergency. In Rwandan refugee camps, for example, child mortality escalated to more than 250 and 300 per 100,000 per day. By way of comparison, in the district of Mindanao (Philippines), UNICEF has reported that the CMR exceeds 310 per 100,000, whereas the CMR for the country as a whole is significantly less (HAIN, 2001). While a high CMR can be attributed to a host of variables including communicable disease, malnutrition, and armed conflict more generally, it is well known that gun violence and armed confrontations have also increased in Mindanao during the period in question, restricting the mobility and access of civilians to health services.

In many violence-affected societies, conventional humanitarian indicators and rates do not reflect the full damages attributable to small arms. For example, in El Salvador's civil war (1980–92), fought primarily with light weaponry, it is estimated that there were approximately 80,000 war-related deaths and up to 19,000 people disabled (Godnick, 2001). But conventional indicators hide the more subtle degradation of El Salvadorian health services. Due to decreases in the health and maintenance budgets, the quality of public services—for example, water supply, sewerage, refuse disposal— deteriorated. Street violence, alcoholism, and drug addition, coupled with the widespread availability of small arms, has resulted in one of the highest firearms homicide rates in the world in the late 1990s (Ugalde *et al.,* 2000).

The source of humanitarian chaos: New wars and small arms

Why are the humanitarian impacts of small arms worsening in particular areas? Much of the change has to do with the dynamics of today's new wars, which take place within rather than between states. Even where other countries have an interest in an internal conflict, virtually all the fighting and social violence is home-grown. Nevertheless, as Nobel Laureate Amartya Sen (2001, p. 50) reminds us: 'Local wars and military conflicts draw not only on regional tensions, but also on the global trade in arms and weapons'.

Though long appreciated by humanitarian field workers, there is growing recognition in the research and policy-making communities that these new conflicts cannot be regarded as temporary aberrations or short-term interruptions of established developmental paths. Analysts are coming to recognize that many of today's wars are protracted affairs not readily amenable to the conventional dose of short-term humanitarian assistance, diplomatic intervention, and reconstruction and development. Particularly worrying for many donors and analysts is the ease with which so-called post-conflict countries are slipping repeatedly back into war or widespread social violence (Muggah and Batchelor, 2002).

After the horrors of the Second World War, the four Geneva Conventions were adopted in 1949 to assure the protection of civilians through the distinction between civilian and military targets. Protocol 1 (1977) additional to the Geneva Conventions extended the narrow definition of international armed conflicts to include armed conflicts in which people are fighting against colonial domination, alien occupation, and racist regimes in the exercise of their right to self-determination whereas Common Article 3 and Additional Protocol 2 apply to non-international armed conflicts. The basic supposition underpinning international humanitarian law is that military interest is best served by attacking other military opponents and not civilians. The effectiveness of humanitarian law is contingent, then, on four key pillars—that:

- military interest is aimed at 'winning the war' and targeting military assets;
- military opponents are clearly recognizable and homogenous groups;
- military opponents have a legitimate monopoly over military-style weapons; and
- civilians are not an explicit target.

Each of these conventional suppositions is undermined by the logic of what have been elsewhere described as the 'new wars' (Duffield, 2001; Kaldor, 1999). The lines between armed conflict and criminality are more ambiguous and unclear than ever. Today's internal conflicts are predicated less on military and political advantage between two warring groups than on the outright collapse of states, the collusion of warring parties, and the access of certain sectors to resources and the free exchange of 'conflict goods' (TRANSFERS).

Some theorists have described these new wars as emanating from clusters of grievances left unresolved following the end of the Cold War. Others have described the new wars in rational utility-maximizing terms, with clear 'winners' and 'losers', sustained by self-interested warlords, political elites, and predatory firms (Collier and Hoeffler, 2000; Berdal and Malone, 2000; Reno, 1998). Paraphrasing Karl von Clausewitz, Keen (2001) argues that war is in many cases less about a continuation of politics and more about the continuation of economics by other means. The ends are frequently short-term and profit-oriented, while the means are nasty and brutish (see Box 4.9).

These new wars are fought not by clearly defined armies but by opportunistic and frequently self-interested armed factions. These factions commonly lack even rudimentary military discipline and are rarely, if ever, trained in the humanitarian laws that inculcate respect for civilian or unarmed populations and the

War is less about a continuation of politics and more about the continuation of economics by other means.

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Today's warriors include men, women and children, blurring the distinction between combatants and non-combatants.

'proportional' or balanced use of force. As a result, atrocities—the killing of non-combatants such as erstwhile fighters, surrendering combatants or civilians—are more common. Due to the longevity and ferocity of today's conflicts, these factional fighters have few of the reservations that marked soldiers during the First and Second World Wars.

BOX 4.9   Co-operative conflict: Economics by other means

In many countries, armed conflict is more common than peace. Even in those countries where conflict appears to have ended, such as Cambodia, El Salvador, and Mozambique, warlike conditions persist. Their protractedness has defied analysis, as have the absence of political programmes, the proliferation of factions, and ferocious attacks against civilians.

But, protracted internal conflict and social violence can be interpreted as a rational process rather than just chaotic breakdown. Analysts have described today's wars as an extension of economics by other means: the creation of an alternative system of profit, power, and even protection. What may have initially begun with political aspirations mutates into conflicts prioritizing short-term economic benefits. While ideology, identity, and ethnicity remain vital elements, undue focus on them may disguise the real political and economic agendas that sustain war.

At one level, war can be perpetuated and even motivated by the trade in conflict goods. Even more nihilistic, the short-term gains from conflict—such as protection money, the appropriation of labour and land, and the stealing of aid supplies and military benefits—have promoted a new form of co-operative conflict. This involves avoidance of pitched battles, co-ordination of movements in and out of villages, trading arrangements, ransoms for fighters, or even stranger possibilities. In Sudan, government soldiers are known to sell arms and ammunition on the open market, some of which find their way into the hands of the rebel Sudanese Peoples Liberation Army (SPLA). Government troops in Sierra Leone frequently avoided pitched battles with the RUF, opting instead to sell their arms, ammunition, and uniforms (Keen, 1998, p. 20).

The spread of powerful and cheap light weapons makes it particularly important to understand grassroots violence. As societies become better armed, warfare is more likely to involve an arrangement between elites and the civilians they wish to recruit. Violence will increasingly serve a purpose for those at the bottom of a society as well as those at the top. When ordinary people actively embrace violence, they may be seeking revolutionary political change or venting ethnic hatred. They may also be trying to meet other, more immediate or mundane needs, or to preserve their physical security; they may be looking for excitement or for the immediate rectification of a perceived wrong. They may also be following their own economic agendas.

Source: Keen (2001)

This new brand of conflict is waged by life-style warriors: young men who soldier by day and return to their fields and families at night. An extreme example emerges from Congo's capital Brazzaville, where competing militia factions that traded gunfire and mortar fire during weekdays would decamp across the river to Kinshasa for shared weekend festivities. Also common are civilians who actively aid—or are coerced into supporting—insurgents, such as in acutely militarized parts of Colombia or Sri Lanka. The collusion between civilians and insurgents has prompted governments to suspend civilians' basic rights under the guise of internal emergencies and to target entire populations outright. In a number of cases, governments have themselves indirectly recruited paramilitary or militia groups to target suspected conspirators, thereby abdicating their responsibilities under the Geneva Conventions.

The casualties of today's new wars are overwhelmingly a consequence not of heavy conventional weapons, missiles, or even landmines, but rather of lightweight and highly mobile small arms. The virulence of armed conflict and criminal violence is increasing as a result of newly introduced technology and the cascading of older stockpiled weapons (Homer-Dixon, 2001). For example, military-style rifles—mostly AK-47s, G-3s, and the Fusil Automatique Léger (FAL)—are among the most common weapons used by armed criminals in Kenya and within the Greater Horn of Africa and Great Lakes region, while handguns, such as .32s, .38s, and 9mm pistols, revolvers, and grenades, are the most commonly used in atrocities and common crime in Colombia, and throughout Latin America and the Caribbean.

The fact that these weapons are so readily accessed by civilians, criminals, and combatants indicates an alarming failure of the state's theoretical monopoly of violence. In the context of war-affected states, the continued availability

of weapons provides a means of resolving differences through armed violence—particularly in the aftermath of armed conflict—contributing to an environment of impunity.

Civilians serve as cover for the operations of rebel movements, as targets for reprisals, as shields against air or artillery attacks, as political tools for international assistance, and as a principal target of ethnic cleansing and genocide. The belief that civilian casualties are not 'collateral damage' but strategic targets finds its antecedents in the treatment of civilians by belligerents in Ethiopia, Mozambique, Angola, and other Cold War theatres. In its extreme form, as in Rwanda in 1994, Bosnia-Herzegovina in 1992–94, and Kosovo in 1998, entire segments of the civilian population have been targeted with small arms. But these conflicts could also be compared to earlier wars in Biafra (Nigeria) in 1967–70, Vietnam in 1965–73, and Afghanistan in 1979–89, where civilian deaths amounted to well over 1.5 million, far more than the estimated military toll (Frohardt, Paul, and Minear, 1999, p. 17).

All of this might seem to paint a pessimistic picture of the prospects for enforcing international humanitarian law and human rights with respect to small arms availability and use in conflict. But systemic violations of humanitarian law, whether in relation to the illegal supply of weapons to regimes abusing human rights, indiscriminate attacks on civilians, or the lack of protection to relief operations, do not mean the obsolescence of humanitarianism. On the contrary, 'international humanitarian law remains highly relevant in contemporary conflicts (such as instances of ethnic cleansing and failed states) and serves to mobilize considerable efforts to further its application' (Bruderlein and Leaning, 1999, p. 432). The development of the International Criminal Court, the *ad hoc* tribunals for the former Yugoslavia and Rwanda, and the banning of anti-personnel landmines are recent examples.

BOX 4.10   A UN response to the humanitarian impacts of small arms?

When planning began for the 2001 UN Small Arms Conference, there were serious misgivings among humanitarian activists. With government disarmament experts clearly in charge, it seemed as if little attention would be given to humanitarian priorities. While these concerns were largely proven prescient, there is some limited language in the *Programme of Action* reaffirming the importance of humanitarian perspectives.

Humanitarian priorities are acknowledged in Preambular paragraph 2, where it is noted that states are 'gravely concerned at... the excessive accumulation and uncontrolled spread [of small arms]... which have a wide range of humanitarian and socio-economic consequences...' (UNGA, 2001). The following paragraph 3 observes that 'small arms and light weapons... sustain conflicts, exacerbate violence, contribute to the displacement of civilians, undermine respect for international humanitarian law [and] impede the provision of humanitarian assistance to victims of armed conflict'. Nevertheless the UN *Programme of Action* still views small arms primarily through a traditional arms control lens.

A few days after the close of the conference, the Security Council met to consider the issue as well. The president of the meeting, Colombia's Ambassador Camillo Reyes, noted that the illicit trade in small arms is 'a challenge that involves security, humanitarian and development dimensions' (United Nations, 2001, p. 1). Although humanitarian perspectives were reaffirmed in the UN process by most operational agencies, in the absence of clear direction from global and regional organizations above, humanitarian agencies are starting to respond with their own approaches from below.

Humanitarian perspectives on arms-related violence

The remainder of the chapter examines the emerging relevance of international humanitarian law and human rights law for dealing with the challenge of small arms in new wars. But it is important first to ask what a humanitarian approach to small arms might actually look like. It is also useful to consider why it has emerged, and to review its strengths and weaknesses.

The international security landscape is shifting. Previously conceived as marginal or soft, issues such as child soldiers, anti-personnel landmines, and small arms are receiving more attention. Though complex and evolving, international

humanitarian law and human rights law also are developing to respond more proactively to the small arms issue. Already many countries have self-imposed restrictions on arms exports to countries at war, have supported the evolution of international codes of conduct, and have encouraged NGOs to spread awareness of the Geneva Conventions to warring factions. The initiation of the War Tribunals for Rwanda and the former Yugoslavia, and the International Criminal Court, is another sign of the expansion of humanitarian priorities. Within national civil jurisdictions, the consideration of international humanitarian law with respect to domestic production and trade signals a growing concern with the humanitarian impacts of small arms.

While the climate may be ripening for a humanitarian approach to small arms there are still a great many challenges ahead. Chief among them is the tenacity of traditional notions of security. It has a rival, though, in the growing popularity of the concept of human security: a security strategy that puts human beings' freedom from fear above a more realist approach to security between states.[18] Human rights and humanitarian law are the normative basis for human security, a concept initially designed to expand the notion of security beyond a militarist perspective.

Among an increasing number of governments, there is a growing conviction that the protection of people irrespective of their nationality does not hinge exclusively on the protection of the territorial frontiers of states. National security remains a necessary, albeit insufficient, criterion of ensuring the protection and welfare of people. Just as the nature of war has undergone a perceptible transformation, so too have international responses to war. While the sovereignty and integrity of borders remain vitally important, a number of like-minded states, the United Nations, and the humanitarian community are forcing a new approach to ensuring international security.

Although the UN's primary purpose under Article 1.1 of the Charter is to ensure global peace and security with due respect to the borders of states,[19] a palpable shift was signalled by Boutros Boutros Ghali's observation in 1992 that 'the time of absolute and exclusive sovereignty has passed' (United Nations, 1992). The then-Secretary-General's statement signalled a new age in cross-border interventions ostensibly to preserve humanitarian ideals. Proponents of these principles such as Frohardt, Paul, and Minear (1999, p. 19) optimistically asserted that 'state sovereignty... is now less impenetrable and more infused with humanitarian obligation'. The new spirit of interventionism was reflected in military-style campaigns undertaken in Bosnia, Somalia, Kosovo, and northern Iraq that were labelled—controversially—humanitarian by those who carried them out.

Speaking of the emerging dual sovereignty of the state and individual, UN Secretary-General Kofi Annan noted that today's conflicts 'demand of us a willingness to think anew: about how the UN responds to humanitarian crises affecting so much of the world; and about our willingness to act in some areas of conflict'. He explained that 'intervention must be based on legitimate and universal principles if it is to enjoy the sustained support of the world's peoples. This developing international norm in favor of intervention to protect civilians from wholesale slaughter will no doubt continue to pose profound challenges to the international community' (Annan, 1999). While lofty in ambition, this new spirit of engagement has been half-hearted in practice. Given the indecisive action of the international community in the former Yugoslavia and Rwanda, and the dramatic humiliation of the US Army in Somalia, and its current role in Afghanistan, the future role of humanitarian intervention is unclear.

A humanitarian perspective on small arms

What exactly is a humanitarian perspective on small arms? The word 'humanitarian' is derived from *humanitas*, a Latin equivalent of *paideia*, a concept developed by Greek sophists who debated the place of reason as

humankind's key distinguishing feature. In the nineteenth century, the notion of humanity, and to a lesser extent that of humanitarianism, came to be associated with notions of philanthropy and altruism as a moral force (Coupland, 2001a).[20] Seen by the founder of the International Committee of the Red Cross (ICRC) as an inevitable process, humanitarianism was put into practice in the twentieth century as a neutral and impartial exercise in alleviating the suffering of victims of armed conflict, irrespective of their nationality.[21] In the latter part of the last century, however, the meaning of humanitarianism once again expanded to accommodate collective assistance programmes under the mantle of the international community and international humanitarian law.

At the end of the twentieth century, the term 'humanitarian international' was coined to capture the essential failure of philanthropic humanitarianism and its dangerous reliance on technical approaches to ensuring protection. Instead, a new ethos that promoted a rights-based approach to protection and assistance gained currency among scholars, policy-makers and practitioners. Michael Ignatieff (1997, p. 22) called this shift in thinking a revolution that signalled the refurbishment of an Enlightenment heritage of universal human rights and the growth of a 'vast constituency of human rights activists, development workers and aid workers whose moral rationale is the indivisibility of human interests and needs'. Hugo Slim (2001, p. 3) confirms that in the last decade the humanitarian community has witnessed a 'swing away from a sentimental, paternalistic and privileged discourse of philanthropy and charity to a more political, egalitarian and empowering ideology of rights and duties in war'.

Where a rights-based approach is adopted, it is also possible to agree on fundamental notions of what constitutes humane and inhumane. In the context of small arms, it becomes possible to elaborate human rights and health criteria to determine when small arms use reaches a level deemed inhumane or constitutes crimes against humanity. These standards are of direct relevance in international legal and political discourse whenever small arms, their effects, or their regulation are under discussion (Coupland, 2001a).

> 'The humanitarian community has witnessed a swing away from a sentimental, paternalistic, and privileged discourse of philanthropy and charity to a more political, egalitarian, and empowering ideology of rights and duties in war.'

But humanitarians committed to the defence of rights in war and armed conflict need to engage much more with international humanitarian law as the main guarantor of human rights in war. Alongside the ICRC, NGOs and United Nations agencies must know the law and share it with civilians in war, with combatants, with politicians, and with civil society. They must take risks to put it into practice and to normalize it (Slim, 2001, p. 10). The rights of civilians and the obligations of all parties in conflict need to be made intelligible, to be brought down from the mountain and made accessible to humanitarians and civilians alike.

The spread and application of international humanitarian law is now more important than ever.

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International humanitarian law, human rights law, and small arms

The primary purpose of international law, including treaties and customary law, is to lay down rules prescribing the conduct of states, not to regulate the behaviour of individuals. That said, international law is also evolving to account for individuals or non-state actors, as has been recently illustrated by trials for war crimes in the *ad hoc* tribunals established by the United Nations Security Council and the recently adopted statute of the International Criminal Court (ICC). As a subset of international law, the objectives of *international humanitarian law*—also known as the Laws of War—are to impose limits on how weapons are used in conflict and prohibitions on the use of certain weapons in war (see Box 4.11). International humanitarian law encompasses the rules which in times of war aim to protect persons and property affected by armed conflict and to restrict the methods and means of warfare (Levie, 2000; De Mulinen, 1987).

The main sources of international humanitarian law that relate to small arms are the St Petersburg Declaration of 1868, the Hague Conventions of 1899, the four Geneva Conventions adopted by 1949, and the two Additional Protocols adopted in 1966 and entered into force in 1977. The four Geneva conventions relate to: (1) the amelioration of the condition of the sick and wounded armed forces in the field (1864); (2) the sick, wounded and shipwrecked members of the armed forces at sea (1899); (3) the relative treatment of prisoners of war (1929); and (4) the relative protection of civilians during times of war (1949). The Protocols (1977) relate to (1) the protection of victims of international armed conflict, and (2) the protection of victims of non-international armed conflicts. Also included in the corpus of international humanitarian law are customary laws of war and treaties prohibiting certain weapons such as the 1980 UN Convention on Certain Conventional Weapons[22] and the Anti-Personnel Land Mines Convention or so-called 'Ottawa Treaty'.

Though initially designed for inter-state conflict between state parties, international humanitarian law has also adapted to reflect contemporary internal conflicts. According to Emanuela-Chiara Gillard (2000, p. 45) this shift was necessary, since 'legal practice must adapt to the changing dynamics of conflict if it is to have any realistic expectations of protecting civilians'. These changes are also reflected in the findings of the Yugoslavia Tribunal,[23] where it was noted that 'if international law, while of course duly safeguarding the legitimate interests of States, must gradually turn to the protection of human beings, it is only natural that the aforementioned dichotomy should gradually lose its weight' (International Tribunal, 1997, para. 97).

By contrast, *human rights law* seeks to preserve and protect the physical integrity and human dignity of the governed from their governments. It is based principally on the 1948 Universal Declaration of Human Rights. Although the Declaration does not enjoy treaty status, together with the International Covenant on Civil and Political Rights, its Optional Protocol, and the International Covenant on Economic, Social, and Cultural Rights, which both came into force in 1976, it is generally accepted as a means of judging compliance with human rights obligations under the UN Charter.[24] In contrast to international humanitarian law, the case for tying human rights to small arms-related violations during war is currently limited to production and trade—though some have begun to focus on the use of excessive force in the security sector. These limitations exist because, in spite of the unassailable core rights of human beings under the Charter, certain provisions of human rights treaties are regularly suspended during periods of armed conflict.

The small arms field is being challenged further by a new convergence between international humanitarian law and human rights law. Commonly referred to as the humanization of humanitarian law, the union is partly attributable to the considerable influence of the human rights movement on the Laws of War, particularly with respect to customary rules of international humanitarian law. This trend is reflected in the jurisprudence of international courts and tribunals as well as normative instruments adopted by international organizations and their acceptance by states

'Legal practice must adapt to the changing dynamics of conflict if it is to have any realistic expectations of protecting civilians.'

BOX 4.11   International humanitarian law: But can you enforce it?

The consequences of war are mitigated by the application of the rules of international humanitarian law. This is achieved through the regulation of the conduct of hostilities and protecting people who take no part in the conflict. The two major areas of regulation relate to (1) the of type of weapon, and (2) the choice of targets.

First, the use and transfer of certain types of small arms, light weapons, and ammunition are prohibited or restricted by international humanitarian law. A number of the treaties which constitute the cornerstones of international humanitarian law prohibit not only the use of particular weapons but also their transfer. As it is the more recent instruments that include additional prohibitions relating to transfers, they can be seen as reflecting a development of the law and, consequently, can be read into earlier treaties.

A second broader limitation relates to the state's duty to respect international humanitarian law and ensure its respect by other states and parties to conflict. From this broad and customary duty one could infer a prohibition on states them-selves transferring or authorizing the transfer of weapons to states or armed opposition groups who are likely to use them in violation of international humanitarian law. These prohibitions are applicable in international and civil armed conflicts, and are binding on both states and armed opposition groups.

International humanitarian law is part of public international law and, accordingly, can be enforced by the imposition of sanctions or by proceedings between states before international tribunals. To date, no such international proceedings have been invoked on the basis of transfers of small arms—for example, in violation of treaty prohibitions—or in situations where it was foreseeable that the weapons would be used to violate international humanitarian law. Ultimately, the transfer of weapons in violation of a treaty or customary prohibition does not necessarily give rise to criminal responsibility; and a per-son who transfers or authorizes the transfer of weapons used to commit violations of international humanitarian law would be an accomplice only if he or she had the intention to commit the violation himself or herself. The same holds true for individual criminal responsibility for transferring weapons used to perpetrate genocide. It is unlikely that those accused of authorizing small arms transfers would have the intent to 'destroy in whole or in part a national, ethnic, racial or religious group' required by the 1948 Convention on the Prevention and Punishment of the Crime of Genocide for their actions to amount to complicity in genocide.

Human rights law also imposes important constraints on a state's freedom to transfer small arms or to authorize their transfer. A state that does so in circumstances in which the weapons will be used to commit violations of human rights can be considered as participating in the wrongdoing of the recipient state, whether used by its officials to commit extra-legal or arbitrary executions, to torture or to submit individuals to other forms of cruel, inhuman, or degrading treatment or punishment, or to detain individuals in violation of human rights standards.

A prohibition of transfers would be applicable where, rather than committing human rights violations itself through its agents, the recipient state is unable to control the private actors who have control of the weapons. Such a situation would amount to a violation of the state's duty to protect the right to life. In this instance, states should refrain from supplying weapons to states where it is likely that they will fall into the hands of individuals over whom the government is incapable of exercising authority and control. Traditionally, human rights law has been considered as singularly binding on states. The traditional view is being increasingly challenged and the law is developing towards holding organized groups, including non-state actors, responsible for violations of human rights.

The limitations imposed by human rights are wider in scope than those derived from international humanitarian law as they are applicable in times of both peace and war. As human rights law is also part of public international law, it can be enforced by means of inter-state litigation. While this has been fairly limited in practice, there are a number of universal or regional judicial or quasi-judicial bodies with jurisdiction over claims of violations brought by individuals against state par-ties to the various human rights treaties. Although no complaints have been brought to date against states that have trans-ferred or authorized the transfer of small arms used to commit violations of human rights, such proceedings could be employed to obtain a ruling that such transfers violate international law. Finally, in certain national jurisdictions, most notably the United States, it is possible to bring civil proceedings against individuals or companies for compensation for vio-lations of international law, including international humanitarian law and human rights. Although the US 1789 Alien Tort Claims Act has not been used in the context of transfers of small arms, it may prove a valuable avenue in the future.

Source: Gillard (2001)

(Meron, 2000). As noted by Doswald-Beck and Vite (1993), 'the provisions of international humanitarian law cover the greater part of civil, political, economic, social and cultural rights as represented in UN Human Rights law, but they do so in a way that speaks in terms of the specific duties of fighters'. In this way, 'it is not alien to military thinking and has the advantage of being a realistic code for military behavior as well as protecting human rights to the maximum degree possible in the circumstances'. The confluence between the two streams has instilled a growing realization that people affected by armed violence and war are legally entitled to the very same rights as civilians living in peace.

In spite of attempts by some humanitarian actors to codify key aspects of human rights law with respect to particularly vulnerable groups—for example, IDPs and children—existing laws do not take sufficient account of the rights and needs of the internally displaced, forcibly relocated populations or the right of access for humanitarian organizations. For this reason, a number of key provisions of humanitarian law are potentially more appropriate to protect civilians caught in internal conflict.[25] These laws expressly prohibit killing, summary executions, physical and mental torture, mutilation and corporal punishment, rape, enforced prostitution, indecent assault, pillage, and the taking of hostages.

Even if precepts of human rights and international humanitarian law are accepted as the cornerstone of a humanitarian approach to small arms, a fundamental question remains: Is the existing framework of law suited for today's new wars? As Michael Ignatieff (1997, p. 124) asks, 'Are the new warriors fighting by the old rules?' Many argue that, for the Geneva Conventions to function, there have to be disciplined armies, that distinguish between civilians and combatants. While the debate over the relevance and application of human rights and international humanitarian law to today's new wars is unresolved, the humanitarian community has nonetheless evolved a set of approaches for dealing with the threat of small arms:

- *a supply-side approach* that focuses on constraining the transfer of weapons to regimes that violate human rights and international humanitarian law;
- *a new humanitarian approach* that aims to mitigate the impacts of weapons on civilians through the application of international humanitarian law and demand-related incentives; and,
- *an operational perspective* that stresses the consequences of arms availability on relief workers and peacekeepers, and aims to harden or soften humanitarian targets.

Even if human rights and international humanitarian law are the cornerstone of a humanitarian approach to small arms, are the new warriors fighting by the old rules?

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Awareness of the rules of humanitarian law among combatants might reduce the humanitarian impacts of small arms.

Supply-side humanitarianism: Controls and advocacy

The supply-side approach focuses on strengthening supplier controls and end-user conditionality in order to prevent the export of small arms to regimes associated with violations of human rights or humanitarian law. Though Article 51 of the UN Charter recognizes the right of states to self-defence and the acquisition of weapons for military and police forces, Article 1 of the Geneva Conventions (1949) and Protocols (1977) emphasizes the obligation to respect and ensure respect for international humanitarian law. In particular, it states that 'the knowing provision of arms into situations where serious violations of international humanitarian law occur or are likely to occur should be considered a matter of grave concern'. In its strongest form, advocates of this approach contend that countries supplying weapons are accessories to the abuses committed with them, even genocide. The perspective is captured particularly well by the Chair of a recent inquiry in South Africa: 'If [arms supplier] states deliberately or carelessly sell weapons to repressive or aggressive regimes, they bear a measure of culpability for the use to which their weapons are put' (Cameron Commission, 1995).

A persistent concern among advocates of the supply-side approach is whether to focus campaign efforts on black and grey markets or on legally transferred weapons. The question is relevant because 'it is unknown whether, in general, the legal or the illegal small arms trade contributes more directly to ongoing warfare and repression around the world' (Lumpe 2000, p. 2). A humanitarian focus is a reminder that the impacts of small arms on human health are the same regardless of the source. Furthermore, increased availability of both licit and illicit small arms and light weapons are attributed to rising numbers of civilian casualties. Rapid arms build-ups appear to be positively correlated with a surge in violations of humanitarian law and civilian casualties. Human Rights Watch (HRW) has documented the relationship between illicit arms acquisition and civilian impacts in countries such as Angola, Burundi, Cambodia, Colombia, Georgia, India, Israel, Rwanda, Sierra Leone, Sudan, and Turkey.

BOX 4.12   But will they work? Codes of conduct for the small arms trade

The supply-side approach aims to prevent small arms transfers to states likely to commit serious breaches of fundamental human rights and humanitarian law. Violations of humanitarian norms can range from torture and arbitrary executions to violations of international law on the protection of civilians applicable in international and non-international armed conflict. The prohibition of arms transfers might also apply where small arms could fall into the hands of individuals over whom the government is incapable of exercising authority or control. Such a situation would represent a violation of the state's duty to protect the right to life.

Both the European Code of Conduct on Arms Exports and the Organization for Security and Cooperation in Europe's (OSCE) *Document on Small Arms and Light Weapons* initially sought to ensure that recipient states would comply with international humanitarian law and human rights criteria prior to the granting of export licences (CONFERENCE). The European Code was adopted in 1998. The 55 countries of the OSCE (comprising all of Europe, Canada, the United States, and five Central Asian states), have adopted its code, but only after its strongest language was removed.

While the codes demand that human rights and international humanitarian law should be taken into account, there are no specific obligations with respect to the transfer of small arms to abusive regimes. Significant gaps remain regarding coverage of brokering and licensed production, effectively leaving back doors open for evasion. With problems like this in mind, in 1998 Canada proposed a convention prohibiting the international transfer of small arms to non-state actors, but this proposal did not receive broad support either at the time or at the 2001 UN Small Arms Conference.

An international code of conduct has been proposed by a group of Nobel Peace laureates led by former Costa Rican President Oscar Arias, and working with an international coalition of NGOs. Their Framework Convention on International Arms Transfers would establish a legally binding text making arms exports contingent on principles of human rights, humanitarian law, sustainable development, and peace and stability.

Proponents of the supply-side approach call for increased accountability and government scrutiny of small arms from the point of production to end-use certification. Advocacy networks such as the International Action Network on Small Arms (IANSA) and the Humanitarian Coalition on Small Arms, the UN High Commissioner for Human Rights, and Amnesty International have called for stringent codes of conduct for the small arms trade. Such codes would aim to improve transparency, limit the list of permissible recipients based on ethical criteria, and strengthen post-transfer oversight.[26]

Concerted pressure on governments by proponents of the supply-side approach has yielded the adoption of codes at the national level, notably in South Africa and the United States.[27] The US export control system is considered by many to be one of the world's best, and efforts have been made to reinforce it with a formal code of conduct.[28] In Western Europe, both Germany and the United Kingdom have also recently undertaken to impose controls on the transfer of weapons to rights-abusing regimes.[29]

Humanitarian actors have demanded greater commitment to implement and enforce related measures such as UN Security Council arms embargoes. This approach relocates the debate within the wider framework of states' human rights obligations. But among existing export codes and national legislation relating to small arms, only the European Union Code of Conduct explicitly mentions respect for international humanitarian law as a basis for decisions on arms transfers (see Box 4.12).

The first attempt to infuse a humanitarian ethos in a code of conduct for arms exports emerged during independent talks by the five permanent members of the UN Security Council in 1991. Among the many issues considered was a code prohibiting transfers that might prolong or exacerbate armed conflict and the need for member states to ensure compliance with embargoes. Their inability to agree on basic criteria, as well as other underlying concerns such as the Chinese furore over US arms sales to Taiwan, led to the collapse of the talks in 1992. Despite tentative measures by the OSCE in 1993 and the UN Disarmament Commission in 1996, it was not until 1998 that a genuine multilateral effort to improve accountability in export criteria was established in the form of the European Union code. NATO and the OSCE have lauded the principles in the EU code and have noted the need to strengthen provisions for humanitarian law.[30]

From codes of conduct to advocacy

Recognition of the limitations of international humanitarian and human rights law with respect to controlling the legitimate production and trade in small arms has prompted the development of a host of alternative strategies to reduce small arms transfers to abusive regimes and non-state actors. A prominent tool commonly used bilaterally by states and multilaterally by the UN is that of *sanctions*. Needless to say, even after decades of experience in their design and application, sanctions remain extremely controversial. One school prefers targeted or 'smart' sanctions to minimize the disproportionately negative impacts on ordinary civilians rather than the intended targets (BICC, 2001). But critics have insisted that embargoes are a substitute for more resolute action, excusing states from their legal and moral obligations to actively punish abusive regimes.

Other proponents of the supply-side approach have sought to 'name, blame, and shame' actors that are known to violate human rights. Both HRW and Amnesty International (2001) have exhaustively documented illicit small arms transfers to abusive states and armed groups, identifying perpetrators and publicly denouncing those responsible. They highlight the 'morally unconscionable' actions of states that arm rights abusers. By harnessing the media, such

approaches have served to embarrass violating parties, tarnishing their images, and encouraging a change in behaviour. The UN (2000) tried the same approach through investigations like the Fowler Report on assistance to UNITA in Angola. By focusing on a 'surrogate villain'—the political sponsor or the arms supplier—human rights organizations seek to call attention to abuses and exert pressure. It is worth recalling, however, that the key policy instrument of these efforts—stigmatization—is useless against perpetrators who are independent of major powers or act outside of customary networks susceptible to economic or political leverage (Leaning, Briggs, and Chen, 1999, p. 199). Often such approaches are rendered impotent if a 'surrogate villain' cannot be identified.

New humanitarianism: Protecting civilians

A second broad approach, adopted by key agencies of the UN, the ICRC, and major international relief agencies, aims to heighten international and domestic consciousness of the impacts of armed violence on non-combatants and vulnerable groups. Referred to here as the 'new humanitarian approach', its proponents acknowledge that countries at war are saturated with small arms and aim to reorient attention downstream, to more operational and demand-driven field activities focused on affected civilians and ill-informed combatants.

Humanitarian agencies are alarmed at the legal and operational implications of civilian small arms possession and the fact that they are often primary targets in armed conflict. They are concerned that the availability of small arms, particularly in the hands of poorly-trained and undisciplined civilians and combatants, acts as a multiplier of violence and threatens the foundations of international humanitarian law (ICRC, 1999). They also recognize that international humanitarian law 'is often the body of law most relevant to the stated purpose for which military arms and ammunition are transferred—to fight an armed conflict' (Herby, 1998, p. 60).

With new wars frequently characterized by a lack of discipline among belligerents and blurred lines between combatants and non-combatants, there seems to be little purchase for the rule of law. Paradoxically, a heightened awareness of the dynamics of these wars has increased consciousness of the need to enforce and reinforce Common Article 3 of the Geneva Conventions and its Additional Protocol 2, which apply to internal armed conflicts requiring all parties to respect those who have laid down their arms and those, such as civilians, who are not taking part in hostilities. Supporters of the new humanitarian approach are adamant that even where a state's justice system is undermined there should not be a legal vacuum with respect to international law. On the contrary, although it is difficult to apply humanitarian law in such contexts, they believe it is precisely in such situations that humanitarian law is most urgently needed.

Application of the rules of law alone will not solve the underlying causes of conflict but it can help minimize the humanitarian tragedy of small arms. To reduce the vulnerability of civilians, humanitarian agencies seek to disseminate information to warring state and paramilitary forces in an attempt to influence their behaviour. The ICRC, for example, has recommended education of armed forces about the basic norms of international humanitarian law as a vital first step to reducing civilian casualties. They have also sought to better apprehend the underlying causes of atrocities against civilians in order to improve their own interventions. Even as they acknowledge the complex motives underpinning small arms use, some development agencies have tried practical interventions, combining awareness and development incentives with voluntary disarmament programmes (WEAPONS COLLECTION). With combatants ignorant or deliberately contemptuous of international humanitarian law, the role of education is potentially far-reaching.

Protecting civilians from small arms-related violence relies in large measure on the ability of the international community to adapt its normative basis for action to the changing reality of conflict. Growth of humanitarian interventions

COMMENTARY 4.1   The limits of humanitarian responses to small arms

Once upon a time, humanitarian action was predicated on the Laws of War. The control of weapons was dominated by the lawful forces of order. Politics was moderated by decisions about insiders and outsiders. Religious or charitable organizations dealt with the ravages of those decisions. Even if this nostalgia for a simpler time isn't entirely accurate, it reflects what was once a clear division of labour. Just as NATO was not established with a mandate to build or protect refugee camps, so UNHCR's mandate was for the legal protection of refugees rather than operational intervention. The lines were drawn; soldiers and lawyers were clearly demarcated.

The old division of labour is gone. Not only are the lines between combatant and non-combatant blurred, so are the differences between war and criminality. As a result, the humanitarian space has become at once confused and expanded. The word 'humanitarian' has two meanings: the first deals explicitly with the laws of war, the second with humanizing and redressing acts of violence. But the twin objectives aimed at ensuring that the laws of war are followed and the rendering of violence more humane have brought humanitarianism and human rights together. Distinctions between human rights and humanitarianism have become minute: the High Commissioner for Human Rights and the High Commissioner for Refugees talk of complementary mandates.

Partially as a result of these changes, humanitarian protection has evolved from being driven by international humanitarian law to being motivated by the needs of specific groups of victims. Humanitarian protection is understood to go beyond the narrow role provided for in the Geneva Conventions, from protection mandated by law to protection based on perceived need. Perhaps prematurely, the humanitarian community has become involved in conflict prevention and small arms regulation, just as UNHCR increasingly become more involved in the provision of physical protection, assistance, and development for refugees and internally displaced people.

These observations give warning that the relationships between small arms availability, humanitarianism, and human rights are not obvious. To say that the availability and use of small arms threatens communities and human security is not the same thing as saying that the humanitarian or human rights community is competent to regulate those weapons. For most of the twentieth century, impartiality and independence have been core to humanitarian action. These principles were relatively easily applicable to treaty-based organizations like the ICRC in traditional contexts, but the current politicization of violence also includes the politicization of those organizations dealing with violence. If we assume that impartiality and independence should remain cornerstones of humanitarian action, one of today's challenges is to preserve their relevance against modern violence. Can humanitarian agencies get fully involved in small arms issues without taking sides? If they refuse to take sides, can they be effective?

Adding the issue of small arms to the humanitarian agenda could catalyse an important re-evaluation. What are the political implications of linking humanitarianism and small arms? More than 100 years ago there was a political decision to split humanitarianism from politics. On what basis was that decision made? Today, we sense a concerted movement toward combining humanitarianism with the use of force: from preventive diplomacy and conflict prevention to the regulation of arms in post-conflict environments. Until we have a better handle on the politics of this shift and the consequences of these decisions, the presumed relationships will remain naive and simplistic. Until then, to say that the humanitarian community should play a central role in small arms regulation is neither necessary nor sufficient.

Source: Warner (2001)

in the 1990s was a product of what has been called an 'Age of Innocence', when optimism peaked following the end of the Cold War with a deepening conviction in the broadening possibilities for humanitarian action. This brief era came to an end with genocide in Rwanda, ethnic cleansing as in Srebrenica (Bosnia), and other horrific tragedies of the 1990s.

But as the nature of human confrontation changed so too have the means by which outside actors respond to inhumanity. At the beginning of the twentieth century, humanitarian action was an impartial exercise epitomized by the ICRC. It started the twenty-first century as a political process in which the effectiveness of short-term humanitarian interventions was measured against the extent to which they contributed to the protection and promotion of human rights in the long term (see Commentary 4.1). These changes were partly a response to accusations of letting war crimes take place and the belief that aid often did more harm than good. Some agencies, however, are

less inclined to adopt the new agenda. Michael Ignatieff (1997, p.127) reminds us that 'the ICRC cannot end the flow of arms from Pakistan and Russia [into Afghanistan]; and can't enforce a cease-fire—it can only get factions to observe some basic rules'. These rules include (1) not shooting at the wounded, (2) not attacking ambulances, (3) not targeting hospitals, (4) not attacking civilians, and (5) not torturing prisoners.

Though the ICRC is not in a position to adapt its mandate—it exists to enforce the laws of war and not human rights—other humanitarian actors have taken up a more political agenda. The politicization of humanitarian action has occurred amid considerable controversy: attempts to deliver assistance and publicize atrocities have rendered the act of assistance more difficult. It has become dangerous for many organizations to simultaneously obtain access to victims of small arms abuses while denouncing those who hold the keys to their right of entry.

It is important to stress the radical departure of this new humanitarian agenda from traditional approaches to providing assistance and protection. Notions of aid conditionality and political management mean taking sides, with profound implications for humanitarian assistance generally. The approach took shape in Afghanistan in the 1990s, where assistance was withdrawn as a result of the Taliban's denial of women's rights. It also took place in the Great Lakes region of Africa, where aid agencies withdrew from refugee camps because of the way 'genocidaires' were being assisted to re-invade Rwanda. At the most extreme, it has also resulted in some agencies abandoning a pretence of impartiality, even expediting the arming of non-state actors.

The diversion of small arms and ammunition through relief activities is not new. Accusations have been levied by governments against religious and special interest NGOs from Central America (e.g. the Catholic Church) and west Africa (e.g. World Vision), to the Balkans (e.g. Serbian Red Cross), and the Horn of Africa (e.g. Norwegian Church Aid). Burundian rebels in Tanzania often drew on aid to fund or support their cause. Aid workers in the region admitted that '[their] infrastructure improvements... had become a vector for all kinds of transport... [they were] aware that arms traffickers used [their] UN routes' (Muggah and Berman, 2001). As a result of the threats posed by small arms, a fundamentally new chapter in humanitarian action has been opened.

Coping with humanitarian realities in the field

The third humanitarian approach is described here as the operational perspective. It is a reaction to the humanitarian impacts of arms availability on the quality and effectiveness of international relief and development operations. It stresses the need to improve protection for humanitarian and peacekeeping operations within a deteriorating security environment. It also recognizes that relief work takes place amid unprecedented tension and insecurity. Civilians and those sent to protect and assist them are increasingly viewed as legitimate targets for threats, theft, extortion, and assault at the hands of armed attackers. Instead of trying to reform the entire situation, this approach seeks pragmatic, field-level responses to allow the work to go on.

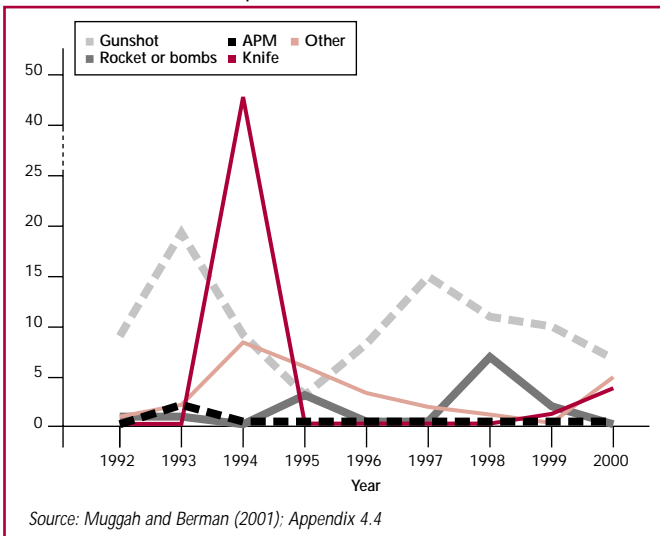#### Risks to humanitarian personnel

Although recognized as a problem for over a decade, many humanitarian organizations have only recently begun documenting and collating information on staff deaths and injuries. The impacts of small arms availability on relief and peacekeeping personnel range from the explicit targeting of staff by warring belligerents and criminals to the opportunity costs attributable to relief aid diversion and unproductive expenditures on security, transport, and logistics. In the early twenty-first century, the UN considered over 50 countries insecure. The number of complex

emergencies had increased fivefold over the two decades. Though annual death rates peaked in 1995, approximately 1,500 international and national peacekeepers have been violently killed since 1945 (Seet and Burnham, 2000). A large number of these deaths have been caused by small arms (see Figure 4.4 and Appendix 4.4).

A retrospective study of death and fatal injuries among humanitarian workers over the last decade observed that among NGO, UN, Red Cross, and ICRC personnel almost 70 per cent of those killed were fatally wounded by 'intentional violence'. These deaths should be compared with the 17 per cent killed in vehicle accidents.[31] Available evidence also shows that the firearm homicide rate for UN civilian staff is between 17 and 25 per 100,000 (Muggah and Berman, 2001).[32] Between 1990 and 2001, over 100 ICRC delegates were violently killed with small arms and more than 280 injured. Trends collated from medical journals suggest that violent deaths among humanitarian workers are increasing and that: 'banditry was an important cause of death [with] most victims dying in crossfire or cold blood' (Sheik *et al.,* 2000).

In an influential study, Martin Sheik *et al.,* (2000) examined the causes of death among aid workers worldwide between 1985 and 1998. Overall, deaths attributable to intentional violence increased while those from vehicle accidents fell. Of the 375 deaths analysed, over half occurred in the Great Lakes and Horn of Africa, peaking in 1994 with the Rwandan genocide. Sheik *et al.* (2000, p. 167) record that the 'numbers of deaths among UN peacekeepers and programme staff broadly follows the changes in the number of refugees and asylum seekers worldwide, providing an indirect measure of the prevalence and violence of conflict'.

FIGURE 4.4   Causes of UN civilian death from hostile actions, 1992–2000

Source: Muggah and Berman (2001); Appendix 4.4

It is important to note, however, that the sheer volume of humanitarian agencies operating in dangerous environments increased over the same period: in Rwanda and Haiti there were more than 200 and 800 NGOs operating respectively (Seet and Burnham, 2000). What is more, an increasing number of missions are operating in conditions of extreme insecurity and without adequate protection ordinarily afforded under international humanitarian law. While these findings highlight the violent circumstances in which humanitarian workers increasingly find themselves, they do not necessarily indicate a growing trend in homicides.

Between 1948 and 1988, at least 744 'blue helmets' lost their lives in UN missions. Over the next decade the total number of peacekeepers killed almost doubled (Seet and Burnham, 2000). Hostile acts reportedly accounted for more than 36 per cent of all deaths. The risk of death from hostile acts increased while that from accidents decreased. Indeed, 'in missions providing or facilitating humanitarian assistance, both the RR [risk rate] of deaths from all causes and deaths from hostile acts increased' (Seet and Burnham, 2000, p. 598). By early 2000 there were more than 30,000 uniformed peacekeepers and civilian UN personnel deployed in 17 peacekeeping missions: '[t]here was a 1.5 times greater risk of death from hostile acts after the cold war; risk factors included African missions, assertive peacekeeping operations and missions involving humanitarian assistance' (Sheik *et al.,* 2001, p. 300).

Over the last decade, almost 70 per cent of UN, Red Cross, UN, and ICRC personnel killed were fatally wounded by 'intentional violence'.

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Small arms are a day-to-day reality in post-conflict environments.

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Personal safety and security is a major preoccupation for expatriate and local staff working in violence-prone areas. The ICRC (1999) estimates that approximately 50 per cent of its international and national staff suffer from emotional and behavioural difficulties during and following their assignment, while an estimated 30 per cent have endured a serious security incident in the field. The stress of working in situations where personal safety is continually jeopardized contributes to the potential for psychological trauma. Whether real or perceived, insecurity adversely influences the productivity of relief and development interventions. Surveys can generate vital data on related risks and vulnerabilities (see Box 4.13).[33]

TABLE 4.2   A sample of violent deaths among peacekeeping and civilian personnel and its distribution

Region	Peacekeeping (1948–98)*	UN civilian (1992–98)
Africa	279	128
East Europe	88	14
Middle East	165	9
Asia	31	20
The Americas	0	5
Total	563	176

* A sample of peacekeeping deaths drawn together by Seet and Burnham (2000).
Sources: Muggah and Berman (2001); Seet and Burnham (2000)

Ensuring the safety of humanitarian personnel

If the safety of personnel cannot be adequately ensured, assistance and protection cannot be effectively provided. According to a UNSG report (2000), there are shared security threats to all humanitarian actors working in the field: 'Threats against NGO staff can... directly affect UN humanitarian and assistance programmes, especially since conflicting parties often do not distinguish between UN and NGO personnel'. This reality has spurred the UN and the ICRC into responding to the humanitarian impacts of small arms at the field level. But the extent to which all relief and development aid agencies are genuinely acting to reduce security risks is debatable.

Some aid organizations are moving quickly to improve their safety and security management (see Box 4.14). There are a variety of internal initiatives and a few inter-agency projects under way, mostly related to incident reporting, research, training, advocacy, and inter-agency co-ordination. The fact remains that there are still far too many aid agencies where senior management fail to see the problem or do not feel responsible (Van Brabant, 2001a, p. 17).
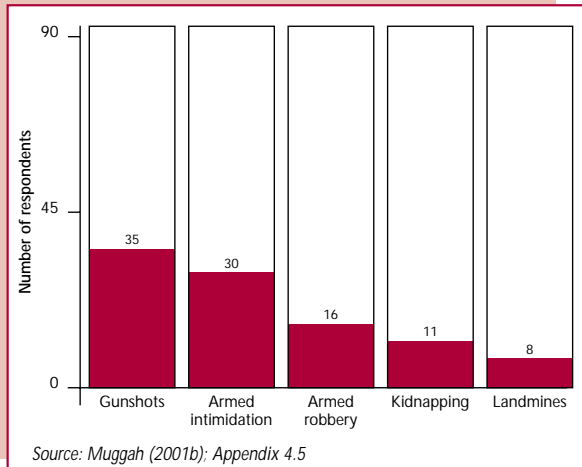
While most of these initiatives are well conceived and executed, too many are *ad hoc* and improvised. In most cases, they do not build on problem analysis, evidence-based management, or sophisticated advocacy planning. As a result, there are critical weaknesses, confusion, and unnecessary duplication in many agency approaches. Many NGOs often confuse security management with the production of a security plan that in practice is little more than an evacuation strategy (Van Brabant, 1997).

BOX 4.13   Opinion surveys among Oxfam field workers

Between December 2000 and February 2001, the Small Arms Survey and Oxfam-GB conducted a pilot survey of small arms-related risks to Oxfam field staff in over 20 countries. Sixty per cent of the 94 respondents described their place of work as 'severely affected by systemic violence'. Field staff were keenly aware of the insecurity generated by small arms, whether by reducing personal mobility or by reversing relief and development interventions in the field.

Small arms were viewed by many as ubiquitous in their areas of operation and correlated with an increased exposure of civilians and personnel to violent threats; automatic rifles and handguns were identified as the single largest contributor to death and injury among civilians. What is more, over 40 per cent of all responding Oxfam-GB staff claimed to have themselves experienced a security incident involving a weapon: whether a non-fatal injury, armed intimidation, banditry, or kidnapping at gunpoint.

The Small Arms Survey, together with the Centre for Humanitarian Dialogue in Geneva and the John Hopkins University's Centre for Refugee and Disaster Studies, will be extending the survey to an internationally representative sample of humanitarian and development agencies during 2002–06.[34]

Threats to Oxfam-GB staff involving small arms

Number of respondents

Gunshots	35
Armed intimidation	30
Armed robbery	16
Kidnapping	11
Landmines	8

Source: Muggah (2001b); Appendix 4.5

What next: Military protection?

Whereas during the Cold War aid agencies accommodated national militaries or insurgent groups, a shift has taken place, as humanitarian agencies debate their relationships with peace-support operations. These new operations represent an extreme departure from the humanitarian principles of neutrality and impartiality, and have been labelled active humanitarianism and even partisan humanitarianism.

Roberts (1998) identifies three motives for ensuring military protection or military involvement in humanitarian operations: (1) murder and deliberate infliction of suffering on civilians, prisoners, and others; (2) refusal of parties to a conflict to allow access or assist humanitarian relief activities; and (3) violence and threats of violence against humanitarian workers. While this chapter does not explore in great detail the controversial debates over military intervention in humanitarian emergencies, it will briefly review the relationships between the use of military protection and humanitarian mandates.

Aid organizations are divided on whether to use military protection. UN agencies are generally more prepared to co-operate with national or international security organs and operations (see Box 4.15). Peacekeeping is, after all, a political action: deployed on the basis of UN resolutions agreed by governments and mandated to take explicit political action against parties to a conflict. The ICRC, on the other hand, prefers distant engagement with military actors. The organization needs to actively engage with the armed forces as part of its efforts to disseminate and strengthen respect for international humanitarian law. It rarely dwells on the politics that condition military deployments or operations and seeks to maintain a clear and perceivable distance to safeguard its own image of impartiality and neutrality. Though it has been forced to use armed protection in regions such as Somalia, it nevertheless remains committed to the principle that guns draw gunfire (see Box 4.16).

By contrast, international NGOs have been more opportunistic and *ad hoc* in their dealings with the institutions of the military. In some cases, NGOs have called for international military interventions to re-establish security in a bandit-infested country—such as Somalia in 1992—or to separate armed elements from refugee populations—as in eastern

BOX 4.14   Safety, security, and protection

For the purposes of managing field operations, it is useful to distinguish between safety, security, and protection. *Safety* is used here to mean dealing with risks from accidents and disease. *Security* relates to the threat of acts of violence against aid agency staff and assets. *Protection* refers to the threat of acts of violence against civilian populations and non-combatants. Safety and security management is a concern for all organizations, including humanitarian and development agencies. This often is under-appreciated. Development organizations tend to lag in awareness and actions to manage staff safety and security. Multi-mandate organizations that have both relief and development objectives tend to locate the security competence within their emergency or disasters departments. This approach seems outdated now that crime accounts for almost 50 per cent of all violent incidents, and is a risk in many settings where there is no active war-type conflict.

Security management is not an exact science: it is about reducing risk by reducing the threat and/or reducing the impact. There is a tendency to seek guidance for good security management in the form of a security plan, a security checklist, or standard operating procedures. This is partially valid—but also misplaced. There are some relatively straightforward dos and don'ts in security management, such as seeking solid cover when caught in the crossfire—car doors are solid only in Hollywood—or never handling a suspected mine or object that might be booby-trapped.

Security management in violent environments is predominantly about building relationships and accessing information, continuous monitoring, analysis, and interpretation of an evolving scenario, and situational judgement when a threat presents itself. Nothing can be quite as dangerous as failing to scan your environment because you have developed a security plan and are adhering to it.

It is a serious misconception to believe that individuals with police or military experience are always the most qualified to manage the security of aid agencies. It would also be a misconception to hold that they have nothing to offer. People with a background in security forces often have a sense of awareness, discipline, and rigour in how they approach security management that is lacking among civilian aid workers. Aid agency security requires a comprehensive and holistic approach. It stands to reason that a person with a military background may be more effective in dealing with Russian forces in the Caucasus but at a loss when confronted with the dynamics of a tribal segmentary lineage system, as in Somalia.

Source: Van Brabant (2001a)

Zaire, 1994–95. They have called for a more assertive role among military peacekeepers to provide protection to civilian populations under armed attack from brutal militias—as in Bosnia and Sierra Leone. In other cases, some NGOs have used the military, particularly their logistical capabilities, for transport or evacuation, as well as for protection (Van Brabant, 2001b).

Many NGO staff are not only critical of but outwardly hostile towards the military. Discomfort with the use of force is frequently a product of latent anti-militarism. Often, however, these criticisms emerge from a legitimate criticism of the political and economic agendas of internationally deployed soldiers. For example, it is no secret that most humanitarian agencies were deeply uncomfortable

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The question is not **if** *humanitarian agencies should engage with armed actors, but how and when.*

with NATO's war against Serbia in 1999. Extensive criticism preceded and followed the war for several reasons: it had not been authorized by the UN Security Council; it had provided ineffective and uneven protection for Albanian Kosovars; and it had more to do with avoiding refugee flows into the West and the stability of south-eastern Europe than with the protection of human rights. Other criticisms have addressed the misconduct of national and international military, including their use of torture (in Somalia), rape (Guinea), smuggling of drugs (Afghanistan), hardwoods and antiques (from Cambodia and Myanmar through Thailand), extra-judicial executions (West Africa's Economic Community Monitoring Group, ECOMOG, in Sierra Leone) and their lack of discipline or accountability.

BOX 4.15   Cops and humanitarians: Uneasy bedfellows

Faced with increased threat of armed attack, almost always from small arms, humanitarian agencies have resorted to armed protection, military guards, and private security company services to reduce risk. All of these actors are potentially uneasy bedfellows for aid agencies. What impact does their participation have on how humanitarian agencies or actions are perceived? By hiring these agencies, are humanitarian actors contributing to the proliferation of arms and the privatization of violence?

Not surprisingly, these developments have generated a vociferous debate within the humanitarian aid community about the circumstances in which such strategies would be acceptable and to what degree. No common position can be discerned between aid agencies. Furthermore, the debate is likely to continue because risk patterns on the ground are evolving, as are the politics and doctrines of peace-support operations, codes of conduct, and legislation pertaining to private security companies.

One way of systematically thinking through the decision of whether or not to obtain armed protection would be to consider sequentially: principles, context, and management questions. In the case of armed protection, key principles are raised by the following questions: (1) Can the use of force be justified under certain conditions? (2) Does armed protection run against the basic principles of humanitarian action, or is it only an inevitable response to the conditions in which humanitarian action has to take place? (3) Would armed protection contribute to an arms race? (4) Can paying for armed protection be justified?

While it is possible to defend absolute non-violence, others credibly argue that force used in a principled, targeted, measured, and accountable manner can be justified against a direct violent threat or to obtain compliance with basic standards of human rights and international humanitarian law. Even stable, secure, and democratic societies have police forces, armies, and reserves. If it is acceptable to pay for these services through tax contributions, it might also be acceptable to pay for armed protection where the official law and order forces are non-existent or unable or unwilling to carry out their responsibilities. Force, then, can be for the public good and enhance not only the security of aid workers but also the protection of civilians.

There is little doubt that aid agencies prefer to totally avoid armed protection and need to explore all other means of securing access and providing assistance and protection before resorting to armed protection. But extreme situations may arise where many lives are at risk because insecurity prevents the delivery of assistance. At this stage, the choice is between resorting to armed protection to deliver assistance or preserving the unarmed image of humanitarian intervention. In practice, this can be a difficult judgement call.

These arguments demonstrate that, whereas there is some latitude for decisions on the basis of principle, *contextual* considerations are particularly relevant. A first question to consider is whether one should even remain in a particular environment if one feels threatened to the extent that armed protection is considered. But if one wants to stay, out of a sense of mandate or solidarity, the key questions become: (1) Who provides the armed protection? (2) Does armed protection reduce or increase risk? (3) Who benefits from armed protection?

The question of the provider is very important: Will it be the national police or army, an insurgent group or militia, armed guards hired directly by the agency, tribal warriors, members of an international peacekeeping force, or personnel provided by a private security company? All of these actors have a particular image in any given context and, like the aid agencies, are part of its political economy. How will an association with one or other provider be perceived by other actors in any particular context? In other words, what will it do to one's image and reputation? What is more, armed protection needs to provide an effective deterrent. Being seen to be carrying arms is likely to escalate a situation: bandits shoot before they loot. If you are likely to be outnumbered and out-gunned, armed protection is likely to increase risk rather than provide adequate protection.

Finally, is it only the agency that benefits from armed protection, or is there a significant public good to be gained from it? Does its enabling effect on humanitarian assistance provide benefits to a substantial number of people? Can the armed protection be used to serve a broader public good, for example by being deployed to provide security to a refugee camp rather than just an agency compound or warehouse, or to secure safe passage for all on a given road rather than just an agency convoy?

If the conditional use of force is acceptable in principle—and careful analysis has indicated that armed protection is the only means left to maintain a humanitarian operation on which a significant number of civilians are dependent, and an acceptable provider is available—there remains the question of its management. Whether armed guards come under the direct management control of an aid organization, or whether they are provided by external security forces with their own command and control procedures, fundamental management questions must be resolved. For example: (1) Who has authority and responsibility for what, notably with regard to the selection of armed guards, the choice of weaponry, rules of engagement, supervision, and disciplinary action? (2) What ethical and legal framework will apply to the armed guards and what personal code of conduct? (3) Who provides the armed guards with their equipment and who is responsible for their food, accommodation, and transport?

Source: Van Brabant (2001b)

> **Box 4.16   Humanitarian security threats in Somalia**
>
> … Following the firing of AK-47s on a single-engine 9-seater Caravan (with no injuries or damage sustained to the aircraft), plans to resume work in Kismayo anytime soon are severely curtailed... Kismayo is off-limits for all UN operations until it becomes clear who carried out the attack and until the threat has been removed. Elsewhere, in Merka (70 km south of Mogadishu), the UN has also been forced to suspend flights. (IRIN, 2000a).
>
> In September 2000, security officers in Somalia, conducting a survey to determine whether UN agencies could resume humanitarian operations after a six-month suspension, 'were attacked at the UN WHO compound by a group of 30–40 men bearing small arms... UN programmes had ceased after unidentified militiamen sprayed gunfire at a European Community humanitarian plane.' Other incidents in Merka include a bomb discovered on the roof of the WHO compound, a grenade attack at both the WHO compound and the offices of the Coordinating Committee of the Organization for Voluntary Services, an Italian Agency. According to IRIN (2000c), 'attempts to impose curfews, gun control and disarmament have been limited—as "there is no authority here" '.

Conclusion

Small arms availability is not the exclusive cause of conflict. It is, however, the primary mechanism by which combatants and civilians violate international humanitarian law and human rights law on a massive scale. Evidence from many peaceful, conflict-affected, and post-conflict societies suggests that armed violence, criminality, and displacement increase where there is an abundance of small arms. Every year, at least 500,000 men, women, and children are violently killed as a result of small arms; many millions more die from their untreated injuries and secondary illnesses. The devastating toll of recent internal wars has prompted much discussion of the nature of post-Cold War conflict and the relative contribution of small arms. As these types of weapons become more readily available, complex emergencies, internal conflicts, and state collapse have exacerbated the scale and pace of human suffering. The growing availability of such weapons in societies embroiled in or emerging from war poses a long-term challenge to the humanitarian community.

The humanitarian impacts of small arms are much more significant than current data and research indicate. Recording the humanitarian impacts of small arms on death and injury rates, on expanding patterns of forced displacement, and on the eroding access of civilians to their basic needs, is an urgent priority. These impacts are significant for, as Albert Schweitzer reminded us almost 40 years ago, pain and suffering constitute a bigger burden than even death itself (Anderson, 1965).

The unregulated availability of small arms threatens the physical safety and security of humanitarian personnel and agencies working in the field. Due to the increasing perception of risk in the field, already scarce resources have to be diverted to security management, logistics, monitoring, and evaluation. The presence of large quantities of small arms also contributes indirectly to a culture of intimidation, violence and, consequently, humanitarian withdrawal. Pervasive arms-related insecurity hampers a return to stability or human security, let alone an environment conducive for reconstruction or development.

States have primary responsibility for preventing violations of international humanitarian law. To reduce such violations, armies need to be under the command of trained and disciplined leaders. Furthermore, militias must be disarmed, unregulated weapons must be collected, and the violence that has spread through the social fabric must be tamed. The development of norms with respect to international humanitarian law and the formulation of international standards are necessary first steps to make states and non-state actors more accountable in relation to the flow of these weapons. But as Chapter 6 (CONTROLS) demonstrates, legislation to control unrestrained small arms flows is still missing, or in the early stages of development, in many parts of the world.

Many NGO staff are not only critical of but outwardly hostile towards the military.

A humanitarian approach to small arms demands that activities be initiated both at the top of the policy-making spectrum and in the field where aid operations take place. On the one hand, states need to adopt more stringent codes of conduct on small arms exports, especially to governments with poor human rights records and to non-state actors. On the other hand, the new humanitarians must intensify their efforts to protect the rights of civilians whose lives have been disrupted by the spread of small arms. It is also critical for humanitarian actors to collect more evidence of the impacts of small arms from their work in the field. While new humanitarians recognize that their work has shifted from a charitable or philanthropic effort to one that acknowledges the role of politics and the centrality of humanitarian law, they must also balance their approach to small arms with goals that can realistically be achieved.

A humanitarian perspective on small arms provides a critical space for achieving consensus in an otherwise politicized arena, in which disarmament groups, gun lobbyists, and international lawyers argue against each another. Though disagreements over how best to approach the issue of campaigning action on small arms persist within the humanitarian sector, all parties basically agree that a humane approach to small arms is desirable. Such an approach would aim to reduce the risk to civilians of the humanitarian impacts of armed violence and reduce or eliminate their exposure to violations of their basic rights with these weapons. In essence, a humanitarian perspective enables us to focus on the practice of warfare rather than the narrative of war. It compels producer states to account for the legal or illicit transfers of weapons to those regimes violating the basic human rights of civilians or to countries affected by conflict. It also usefully focuses attention on the needs and rights of all people who face arms-related violence on a daily basis, whether in situations of war or of peace.

4. List of Abbreviations

ADOL	Action for the Development of Local Communities
APM	Anti-personnel landmine
CMR	Child mortality rate
DALY	Disability-adjusted life years
DRC	Democratic Republic of Congo
ECOMOG	Economic Community of West African States' Cease-fire Monitoring Group
FAL	Fusil Automatique Leger
FARC	Revolutionary Armed Forces of Colombia
FYU	Former Yugoslavia
HPCR	(Program on) Humanitarian Policy and Conflict Research
HRW	Human Rights Watch
IANSA	International Action Network on Small Arms
ICC	International Criminal Court
ICD	International Classification of Disease
ICECI	Injury Classification of External Causes of Injury
ICRC	International Committee of the Red Cross
IDP	Internally displaced person
IOM	International Organization of Migration
IPIFA	Injury Prevention Initiative for Africa
IRC	International Rescue Committee
ITAR	International Traffic in Arms Regulation
LTTE	Liberation Tigers of Tamil Eelam
MSF	Médecins Sans Frontières
NATO	North Atlantic Treaty Organisation
NID	National immunization day

OSCE	Organization for Security and Co-operation in Europe
PTSD	Post-traumatic stress disorder
RGSA	Reference Group on Small Arms
RUF	Revolutionary United Front
SCF	Save the Children Fund
SPLA	Sudanese Peoples Liberation Army
UNSECOORD	UN Security Coordinator
UNDP	United Nations Development Program
UNGA	United Nations General Assembly
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNITA	União Nacional para a Independência Total de Angola
VIP	Violence and Injury Prevention Programme
WHO	World Health Organisation
YPLL	Years of potential life lost

4. Endnotes

1 The variables highlighted in Table 4.1 were judged priority issues during consultations with literally hundreds of victims of armed violence, relief and development personnel, policy-makers, and researchers. Objective criteria are important in order to provide a basis for their application in relation to humanitarian law and to inform practical and appropriate humanitarian intervention.

2 A US Department of State (2000) report noted that an estimated 200,000 persons in and near Freetown were made homeless in the January fighting. It also claimed that 3,800 children went missing or were abducted and that by November there were 2,400 still registered as unaccounted. The United Nations stated in the same report that rebel forces abducted approximately 20,000 persons throughout Sierra Leone between 1991 and 1999.

3 According to WHO (1999), the mortality rates for suicide, homicide and war were 16.1, 12.5 and 10 per 100,000 respectively. For more detail, consult the WHO *World Health Report* web site <http://www.who.int/whr>

4 The issue of data availability in countries at war is treated by Murray *et al.* (2002). See also the work of SIPRI (2001), Monty Marshall at the Center for Systemic Peace (2001), the International Peace Research Institute (2001), and the Post-Conflict Unit (2001).

5 In order to bridge gaps in national health data, the Small Arms Survey and the World Health Organization's Department of Violence and Injury Prevention Programme (VIP) have obtained support to launch a substantial three-year initiative in 2002 to generate high quality surveillance and survey data on firearm mortality and morbidity in ten developing countries.

6 Kill–injury ratios are low in developing countries because of the absence, limited access to, and poor quality of existing medical care available to those who are wounded by small arms. It is therefore more likely that a greater proportion of those injured by firearms will die as a consequence of their injuries.

7 YPPL relates to the loss of individual and household productivity associated with firearm injuries. It is calculated by multiplying the number of deaths at a given age by the years that persons of that age would be expected to live and summing the total number of years lost. A broader spectrum of morbidity costs can be determined by costing rates and duration of hospitalization, emergency room visits, and temporary and permanent disabilities. See Ordog *et al.* (1995) and Max and Rice (1993) for more on applying different economic methods—for example, human capital or incidence prevalence approaches—to costing the impacts of injury.

8 Beginning in January 2002, the Small Arms Survey will be carrying out two separate projects on fatal and non-fatal injury attributed to small arms. Together with the Injury Prevention Initiative for Africa (IPIFA), the Survey will be assessing the economic costs of firearm injuries in a representative sample of urban and rural clinics in Kenya, Uganda, and Ethiopia. Starting in the middle of 2002 and in partnership with the WHO's VIP, the Survey will also be assessing the social and economic costs of small arms-related injury over a three-year period in ten developing countries.

9 No study has yet sought to systematically review the costs of war on public health through the International Classification of Diseases (ICV) categories of homicide (ICV 960–969) and the operations of war (ICV 990–999). For a review of different approaches to measuring injury, whether through death certificates or in-patient and physician data, consult the Injury Classification of External Causes of Injury (ICECI) <http://www.iceci.org>

10 Garfield (2000: 2) has criticized these two ICRC studies for methodological limitations and also for their inability to provide conclusive evidence of the level of injuries in the population or their causes. He also notes that 'neither study provides any information on people injured who did not reach an ICRC hospital'.

11 A report released by the Action for the Development of Local Communities (ADOL), an NGO that conducted research on small arms between April and June 2001, indicated that Gulu (Uganda) was a major source of guns and ammunition (IRIN, 2001b).

12 Conversation with Dr Olive Kobusingye of the Injury Control Centre in Uganda.

13 Summerfield (2000), however, mounts a substantive critique of the Western-dominated literature on PTSD. He argues that the relationship between traumatic experience and outcomes is not clear-cut. See also Summerfield (1996).

14 CASA, a Canadian firm, was contracted to carry out an evaluation of UNHCR programmes in Dadaab and Kakuma, Kenya, in 2001.

15 See, for example, Muggah (2001d); Moser and McIlwaine (2000); Moser and Holland (1997); Samaranayake (2001).

16 See, for example, the International Coalition to Stop the Use of Child Soldiers web site <http://www.child-soldiers.org>

17 A new treaty banning the use of children in combat took effect from February 2002. See, for example, <http://www.hrw.org> for details.

18 See, for example, the bibliography on human security prepared by Harvard University's Program on Humanitarian Policy and

Conflict Research (HPCR) <http://www.hsph.harvard.edu/hpcr/events/hsworkshop/bibliography.pdf>

19 The UN Security Council authorizes the use of force across borders only where personal insecurity within a given state is of such a magnitude that it poses a threat to 'international security'.

20 According to Bok (1999, p. 188), in nineteenth-century England the 'adjective "humanitarian" was used... in a manner nearly always contemptuous, connoting one who goes to excess in humane principles. The word conveyed deep-rooted suspicion, unlike such words as "humane", "kindly", or "good".'

21 In the context of humanitarian intervention, neutrality requires that a particular actor is not party to an armed conflict and refrains from taking a position on its causes or the motives of actors. Impartiality mandates that assistance be delivered without discrimination and according to the needs of the victims. These are not necessarily complimentary objectives and indeed, can often be contradictory.

22 Including the 1995 Review Conference of the 1980 UN Convention on Conventional Weapons where battlefield electro-optical devices—that is, blinding laser weapons—were banned.

23 See, for example, the Tribunal web site <http://www.un.org/icty/judgement.htm>

24 With respect to the relationship between human rights and small arms, there is also a range of additional instruments and binding treaties whose provisions apply in armed conflict, including the 1951 Convention Relating to the Status of Refugees, the 1989 Convention on the Elimination of all Forms of Discrimination Against Women, the 1984 Convention Against Torture, and the 1989 Convention on the Rights of the Child.

25 Particularly Common Article 3 of the 1949 Geneva Convention and Additional Protocol.

26 See, for example, Lumpe (2000) <http://www.nisat.org/publications/armsfixers/>

27 South Africa, for example, adopted a revised code of conduct in 1996 that sought to screen exports of weapons in light of human rights and security criteria of the receiving state.

28 In the US, the International Traffic in Arms Regulation (ITAR) includes a list of proscribed destinations, including countries under UN Security Council arms embargoes, or countries where there is chronic warfare, serious human rights abuses, or state sponsorship of terrorist activities. By 1995, a US Code of Conduct and Arms Transfers Bill was introduced to Congress, and, following intense debate, a compromise bill was passed in 1999 by the US House of Representatives that called for stringent human rights criteria in their transfers (US House of Representatives, 1999).

29 Germany's Policy Principles for the Export of War Weapons and Other Military Equipment (January 2000) and the UK's Export Control Bill (introduced to Parliament in June 2001) are two such exercises.

30 See, for example, NATO (2000, p. 8) and OSCE (2000, sec. III).

31 Beginning in February 2002, a five-year prospective study of humanitarian deaths will be co-ordinated by the Small Arms Survey, the Centre for Humanitarian Dialogue and the John Hopkins University's Center for Refugees and Disaster Studies. It will be a prospective study of the rates, profiles, and costs associated with death and injury among humanitarian workers.

32 This is a revised estimate from the homicide rate of 35 per 100,000 reported in the *Small Arms Survey 2001*.

33 The Centre for Humanitarian Dialogue, together with the Small Arms Survey, will be undertaking a large-scale survey of the risks of small arms among personnel of more than a dozen humanitarian agencies. The survey was piloted between September and December 2001, implemented in February 2002 and preliminary findings will be published in late 2002.

34 The survey administrators sought to reduce self-selection and ensure a representative sample. It is expected that the large-scale global survey will address these issues more thoroughly (see endnote 33).

4. Appendices

Appendix 4.1   But are they humanitarian emergencies? (Figures 4.1 and 4.2)

Insecurity in Nicaragua (per 100,000)

Year	1990	1991	1992	1993	1994	1995	1996	1997	1998
Firearm homicide	12.9	12.01	12.36	10.32	9.28	8.9	8.05	9.09	8.02
Firearm injury	119.4	142.2	166.4	174.2	209.1	228.6	255.4	404.4	329.4
Armed robbery	25.2	29.9	31.9	37.8	43.2	45.6	42.7	49.5	64
Intimidation	40.9	47	57	72	68	59	62	59	64

Source: Muggah and Batchelor (2002)

Insecurity in Honduras (number of recorded incidents)

Year	1995	1996	1997	1998	1999
Firearm homicide	1,504	1,655	2,182	2,000	1,677
Firearm injury	1,235	1,130	2,009	1,427	1,244
Armed robbery	731	864	944	856	1,920
Non-firearm homicide	610	680	713	667	634
Non-firearm injury	918	1,008	1,210	983	547

Source: Muggah and Batchelor (2002)

Appendix 4.2   Far from home: A sample of displaced populations around the world (Map 4.1)

	Country	International refugees by country of origin	Internally displaced persons (IDPs) in country of origin	Percentage of population displaced (%)
1	Afghanistan	3,500,000 (2001)	500,000 (November 2001)	16
2	Angola	350,600 (2000)	3,000,000 (Since 1998)	27
3	Azerbaijan	309,400 (2000)	570,000 (October 2001)	11
4	Bosnia and Herzegovina	448,700 (2000)	518,000 (May 2001)	24
5	Burundi	525,700 (2000)	633,000 (October 2001)	18
6	Colombia	2,500 (2000)	2,200,000 (since 1985)	5
7	Democratic Republic of Congo	248,400 (2000)	2,045,000 (October 2001)	5
8	Former Republic of Yugoslavia	121,100 (2000)	510,000 (May 2001)	31
9	India	110 (2000)	507,090 (November 2001)	<1
10	Iraq	572,500 (2000)	700,000 (June 2001)	6
11	Kenya	5,000 (2000)	100,000 (December 2001)	<1
12	Myanmar	127,800 (2000)	1,000,000 (June 2001)	2
13	Russian Federation	16,300 (2000)	500,000 (October 2001)	<1
14	Rwanda	85,500 (2000)	600,000 (May 2001)	10
15	Sierra Leone	487,200 (2000)	1,300,000 (August 2001)	42
16	Sri Lanka	93,200 (2000)	800,000 (June 2001)	5
17	Sudan	467,700 (2000)	4,000,000 (May 2001)	15

Source: NRC (2001, IDP figures); UNDP (2001, population figures); UNHCR (2000b, refugee figures)

Appendix 4.3   Security incidents in Kakuma refugee camp, 1996–2000* (Figure 4.3)

Year	Firearm deaths	Armed assault	Armed robbery	Rape
1996	15	64	67	2
1997	12	61	73	2
1998	6	114	110	6
1999	11	110	104	0
2000	5	70	90	4

*The refugee population in Kakuma has remained relatively steady: between 70,000 and 72,000 refugees.
Source: Muggah and Berman (2001)

Appendix 4.4   Causes of UN civilian death from hostile actions: 1992–2000* (Figure 4.4)

Year	1992	1993	1994	1995	1996	1997	1998	1999	2000	Total
Gunshot**	9	19	9	3	8	15	11	10	7	91
Rockets or bombs	1	1	0	3	0	0	7	2	0	14
APM	0	2	0	0	0	0	0	0	0	2
Knife	0	0	46 ***	0	0	0	0	1	4	51
Other	1	2	8	6	3	2	1	0	5	28
Total	11	24	63	12	11	17	19	13	16	136

*   *UNSECOORD estimates that the UN employed an average of 70,000 staff and dependents per year over the last decade.*
**   *UNSECOORD reported in 2001 that since 1992, 107 staff members had died as a result of fatal firearm injuries. The figure above (excerpted from an internal UNSECOORD report) is missing 16 unexplained firearm-related deaths.*
*** *The majority of these deaths can be attributed to Rwanda.*
  Source: Muggah and Berman (2001)

Appendix 4.5   Threats to Oxfam-GB staff involving small arms* (Box 4.13)

Gunshots	Armed intimidation	Armed robbery	Kidnapping at gunpoint	Landmines
35	30	16	11	8

*Total sample size consisted of 94 respondents (Muggah, 2001b)

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