

APPENDIX 5

AMPUTATIONS IN THE SIERRA LEONE CONFLICT

Click on the section of this Appendix you wish to view
or use the bookmarks on the left to navigate.

[Part One – Amputations Report](#)

[Part Two – Comparison of Data Sets on Amputations](#)

APPENDIX 5 – PART ONE

Amputations in the Sierra Leone Conflict

Artemis Christodoulou¹

Introduction

1. This report examines the causes and influences of intentional amputation perpetrated during the Sierra Leone civil war between 1991 and 2002. It should be noted that both intentional and unintentional (or direct and indirect) amputation took place during the civil war. Of interest to us in this report is *intentional* amputation; that is, amputation not conducted by medical experts as a result of bullet wounds, but, rather, the intentional removal of a limb by perpetrators for the express purpose of removing that limb. When referring to amputation in the remainder of this report, *intentional* amputation is meant.
2. In examining why amputation became a key war-time violation, the report first attempts to establish some basic facts about amputation, including:
 - the numbers of amputations perpetrated;
 - the numbers of survivors of intentional amputation;
 - the circumstances under which amputations were conducted (whether the process of amputation included any ritualistic elements; whether there were any specifications for the details of amputation that were dictated from the top down; the duration of the actual process of amputation along with the details; witness reports on what was said among the perpetrators and whether any documents relating to amputations were present at the scene);
 - details about the perpetrators (whether there was a selection process for the choice of ‘amputators’, whether ‘amputators’ went through any training and whether there was a specific group of trained ‘amputators’, whether there was a target age, whether ‘amputators’ bore any identifiable marks to indicate their role as ‘amputators’, whether they operated under the influence of drugs or threat of torture or death, whether ‘amputator’ behaviour was erratic or determined, whether they acted on their own and at random or as part of a larger concerted effort dictated from the top down, whether choice of target victims and/or limbs to be amputated was specified from the top down, how difficult it was to convince ‘amputators’ to take on this task); and
 - the immediate post-amputation details (what was done with amputated limbs, whether perpetrators left the scene immediately; the state of mind of perpetrators as evinced by their post-amputation behaviour).
3. Understanding the basic facts about amputation is essential before attempting an analysis of the phenomenon. After documenting the phenomenon, the report attempts to understand certain discernible patterns, such as the reasons for the increases and decreases in the numbers of amputations, the reasons for the perpetration of specific kinds of amputations (ears, nose, arm, leg, etc.), and differences in numbers of amputations according to region. Finally, the report attempts to answer the question of whether amputation was a development that took place during the course of the war or whether it was part of a planned strategy. If so, at what point did it become a planned strategy – what sparked the inclusion of amputation into key wartime violations?

¹ Artemis Christodoulou, a PhD student from Yale University, was an intern at the TRC during 2003. In May 2004 she returned to Sierra Leone to promote the National Vision for Sierra Leone. While returning to Freetown from Makeni she was seriously hurt in a car accident. At the time of writing Artemis remains in a coma with severe brain damage. The Commission pays tribute to the selfless dedication that Artemis gave to the people of Sierra Leone. Her work on amputations, memorials and the National Vision for Sierra Leone has advanced the cause of peace and reconciliation in Sierra Leone.

Methodology

4. Research for this appendix was conducted between 26 May and 1 August 2003 in Sierra Leone.² The research commenced with a survey of the **history of amputations** in Sierra Leone and throughout the world. The Sierra Leone collection at Fourah Bay College was consulted. Particular works consulted included: "Sierra Leone: A Description of the Manners and Customs of the Liberated Africans" (Robert Clarke); "The Coming of the Killers" (David Omorc); and "Bush Path to Destruction: Origin and Character of the RUF" (Ibrahim Abdullah); "Traditional Methods of Conflict Management/ Resolution of Possible Complementary Value to the Proposed Sierra Leone Truth and Reconciliation Commission". Email contact was made with Adam Hochschild, author of "Leopold's Ghost", in order to get more information on the Belgian amputations of the Congolese.
5. Since there has not been much work done on the origin and influences of amputations, **statistical data** will provide a good base from which to create hypotheses. Statistical data comes from statements on amputations in the database compiled by the TRC, a registration report of amputees from Handicap International³, data from the WFP⁴ and statements and analytical data from UNAMSIL. Comparative spreadsheets containing this data were created. The TRC data was based on 68 statements of victims of direct, intentional amputation. It should be noted that this portion represents only a cross-section of the statements and should, therefore, not be considered as comprehensive. The UNAMSIL statements come from a study conducted by UNAMSIL between December 2001 and September 2002. Interviews took place at the Amputee and War-Wounded Camp in Freetown, in Bo, Bombali, Kenema, Kono and Port Loko⁵. The UNAMSIL data consisted of 129 statements of victims of direct, intentional amputation. UNAMSIL's Report on Amputees was based on data collected from 154 victims of direct, intentional amputation. See below for constraints and limitations.
6. Three different groups were targeted for **interviews**: commentators on amputation (including professors, psychologists, human rights officers, etc.), amputees and perpetrators. The combination of perspectives on amputation will help us to form as accurate a picture as possible of the motivations behind amputation and its proliferation during the war. Interviews were also conducted with TRC researchers. Persons interviewed included:
 - amputees at the Murray Town Amputee Camp, including Alhaji Lamin Jusu Jaka and David Conteh;
 - Komba Pessima, Program Director at Handicap International;
 - Corinne Dufka, from Human Rights Watch;
 - Andreas Brandstätter, Human Rights Officer at UNAMSIL;
 - Denis Kamara, Chief Agriculturist, Crop Division at the Ministry of Agriculture;
 - Emilie Medeiros, psychologist at Handicap International;
 - Victor Kombah, Manager of Psychology Unit, Handicap International;
 - Allan Quee, Director of PRIDE;
 - Lansana Gberie, political scientist and author;
 - Sahr Sandi, Director of KWAYOR (Knowledge With Action Yields Onward Results) in Kono;
 - Chief Gbekie, Kono Headman, Freetown;
 - Ngauja, popularly known as the first amputee of the war;
 - Rosalind Shaw, Director of the Africa and New World Program at Tufts;
 - Alusine, ex-combatant who fought with AFRC;
 - Usman, an ex-combatant who fought with AFRC;
 - Musa Mansaray, Director of Limb Fitting Centre, Murray Town Amputee Camp;
 - Mohamed, ex-combatant who fought with RUF and AFRC; and
 - Tamba Finnoh, amputee working at the TRC.
7. TRC researchers also attended a class at the Freetown School of Medicine on the psychology of amputations conducted by Emilie Medeiros, Psychologist at Handicap International.

² Daniel Bendix contributed to the background research for this report.

³ With the kind assistance of Komba Pessima.

⁴ With the kind assistance of Michelle Iseminger.

⁵ From the UNAMSIL Amputee Report: "The testimonies were collected on the basis of one-to-one interviews. In cases where the interviewee spoke neither English nor Krio...an interpreter was used if available. In some instances other amputees volunteered to act as interpreters of tales which often already formed part of the shared experience and grisly folklore of their community. The majority of amputees spoke openly and willingly of their ordeal with no apparent fear of reprisal. The less traumatised individuals appeared to be those who had been brought together into a community, such as in the Amputee Camp in Freetown. For some amputees, however, the experience was evidently still too painful to speak about".

Constraints and limitations

8. To a large degree, the scope of this project was much larger than the constraints and limitations allowed. The most significant constraints include:
- *Time.* The project was conducted between 26 May and 1 August 2003. Time constraints did not permit much time to research on site, nor ample time for the author to forge the necessary relationships with individual interviewees. Time constraints also did not allow for follow-up on information gathered.
 - *Unwillingness of people with facts (especially perpetrators) to reveal these for fear of reprisals and / or fear of the Special Court.* Many individuals indicated that many people in the country knew many things they were unwilling to tell, either because the information would implicate people currently in power, or because they were unsure of the stability of the current regime, or because they were afraid of any TRC-Special Court collaboration. As a result, it was extremely difficult to find ex-combatants to interview and, once they were found, it was difficult to get anything out of them, especially anything concerning violations. Ex-combatants have a particular aversion to admitting to any association with amputations, which reveals just how traumatic and powerful a violation amputation was.
 - *Insistence of people with facts (especially perpetrators) to be paid.* All the ex-combatants encountered expected to be paid either in the form of money or in kind (i.e., a SIM card, etc.). Payment went beyond transportation costs – and, in the cases where money was given for future transportation to meeting places, the ex-combatant often did not show up. Truth for money is not an ideal way of proceeding, largely because it may become distorted to ‘more truth for more money’. On the other hand, it is true that many ex-combatants are struggling to make ends meet in a non-combative manner and that ‘their truth’ is the hottest commodity they have.
 - *Many interviewees, especially ex-combatants, are traumatised but not receiving proper treatment.* Three of the four ex-combatants with whom the author had longer conversations showed signs of trauma that interfered with their ability to communicate. One of the ex-combatants would intermittently stop speaking and hold his head, tap his fingers on the table and inform the author that she hated him. After several sessions, the author finally convinced this ex-combatant to talk to one of the social workers at the TRC.
 - *Selectivity of the data used to compile the spreadsheets compromises their use.* The information contained in the spreadsheets is based on amputees who survived – as the UNAMSIL estimates point out, the majority of amputees immediately bled to death as a result of amputation. Unfortunately it is far more difficult, if not impossible, to obtain records of their ordeal – and, even, of their existence. Survival was far more likely in the city than in the bush, so statistical data about the Western Area, for example, is more likely to be accurate than data from the provinces. Furthermore, the spreadsheet data is based in all cases on those who came forward to testify. Once again, city-dwellers are far more likely to do this. As concerns the TRC spreadsheet, the data represents only a cross-section of the Commission’s statements. It can by no means be understood as being comprehensive. In short, while these spreadsheets do give us some guidance in analysing the phenomenon of amputations during the war, they should not serve to validate or dismiss theories without further examination.
 - *Question of accuracy of data reported in statements used to compile the statistical data (comparative analyses of UNAMSIL and TRC data).* Since the dress and actions of different factions of perpetrators was similar, statement-givers could not always distinguish one faction from another. The default faction to which victims often assigned the perpetrator was the RUF, though this may not always have been the case.⁶

⁶ In a press release issued on 15 January 1999, the RUF makes the following claim that after Kabbah asked Northerners to publicly apologise to the Mendes for destroying their villagers, “a series of attacks on Northern towns by people calling themselves ‘RUF rebels’ occurred...However, in a very worthy point of note, the style of amputations was markedly different from the amputations previously done during the elections protest”. The RUF claimed that this new form of amputation, at a point through the palm and not at the wrist, indicated that the RUF had not committed these amputations. According to this same report, 57 men claiming to be ‘RUF assailants’ in Kalangba were identified as well-known Kamajors.

History of the phenomenon of amputation

9. Amputation has a long history and varied causes, including:
- unintentional amputation (gunshot wound/ medical complications/ landmine);
 - amputation as a codified punishment;
 - intentional direct amputation as a non-codified practice; and
 - unintentional direct amputation inflicted during conflict.

Unintentional amputation

10. Unintentional amputation may be the result of a gunshot wound, medical complications such as polio, or landmines. **Angola** and **Cambodia** have some of the highest per capita amputee rates in the world at one in 250, mostly resulting from landmines.

Amputation as a codified punishment

11. Legal codes, dating as far back as Hammurabi's Code in 1700BC, have included amputation as punishment. Under this code of ancient **Babylon**, theft was punishable by amputation of a finger or hand; kissing a married woman by amputation of a man's lower lip; and defamation by amputation of the tongue.
12. The Indian Laws of **Manu**, effective between 1280-880 BC, make similar mention of amputation.
13. In **China's** Book of Punishments, dating to 536 BC, serious crimes were punishable by amputation of the nose and feet.
14. In the ancient Moche culture of **Peru**, theft was punishable by amputation of the hand, but if the thief could prove a motive of hunger, the village chief suffered the punishment. A foot was amputated for laziness and both arms were amputated for rebellion. No form of anaesthesia was employed for judicial amputation performed with an axe.
15. **Gypsies in Spain** in 1499 were ordered to cease travelling and to find a trade. Failure to obey was punishable by lashing and banishment. Repeat offenders suffered amputation of the ears, sixty days in chains, and re-banishment⁷.
16. Amputation is still administered as a punishment today. In several **Arab countries** the punishment for theft is amputation of the right hand. Since the right hand is used for eating and the left for toileting, this practice constitutes a means of excluding offenders from society, as they can no longer eat with others. Beginning in 1994, Saddam Hussein's regime in **Iraq** penalised "criminal" offenders with amputation, cutting off ears of deserters and those who refused to join the army. Those found guilty of slandering the president had their tongue sliced off. According to the Sudanese Victims of Torture Group (SOAT), in 2003 the government of **Sudan** resumed the use of amputations as punishment against those convicted of murder, rape, armed robbery and waging insurrection against the state⁸. One man accused of armed robbery had his right hand and left foot amputated. *Weekly News Issue* reported in September 2002 that harsh criminal punishments including amputation of limbs for theft, have been introduced in many of **Nigeria's** majority Muslim northern states over the past two years⁹.
17. Despite the continued existence of amputation as a codified punishment, it should be noted that amputation as a punishment is in direct contradiction with international covenants, including Article 5 of the Universal Declaration of Human Rights and Article 7 of the International Covenant on Civil and Political Rights.

⁷ http://www.passion-music.co.uk/articles/the_roma_gypsies.htm.

⁸ "Justice Minister Cannot Lift Death and Amputation Sentences", <http://www.africaonline.com/site/Articles>, 7 January 2003.

⁹ http://www.peacelink.it/anb-bia/week_2k2/020117c.htm.

Intentional, direct amputation

18. Amputation has been used as a non-codified punishment and means of terror. After defeating the Acoma Pueblo of **New Mexico** in 1598, Juan de Onate ordered his Spanish army to amputate one foot of each native man and forced them to work for 20 years serving the colonists. Onate hoped by such terror tactics to discourage other pueblos from fighting.
19. Punishment for slaves in the **United States** included the branding of an 'R' on the right cheek, amputation of the ear or legs and castration.
20. In *King Leopold's Ghost*, Adam Hochschild reports that if a Congolese village refused to submit to the "rubber regime" under the colonial rule of the Belgians, state or company troops or their allies sometimes shot everyone as a terror tactic and lesson for nearby villages. Hochschild reports of the burning of 81 right hands by a chief in the Kasai in 1899, the scene of some of the greatest resistance to Leopold's rule. The chief allied with the regime declared to an American Presbyterian, "See! Here is our evidence. I always have to cut off the right hands of those we kill in order to show the State how many we have killed". The first commissioner of the Equator District in the **Congo** wrote to the government, "To gather rubber in the district....one must cut off hands, noses and ears". One officer indicated that soldiers sometimes "shot a cartridge at an animal in hunting, then cut off a hand from a living man". In some military units, there was even a keeper of the hands.¹⁰
21. During colonial rule in **Rwanda**, amputations and other mutilations were standard punishments to suppress Hutu resistance, decreed by the Belgian authorities and administered by Tutsis.¹¹
22. The legal code of **Ghana's** cult of ancestors, the Ashanti faith, stipulates that whoever commits suicide will have his head cut off as a punishment. The principle tenet of the Ashanti legal code is that every offence be punished; if an offence is not punished, according to tradition, the entire clan will face ruin.
23. At Auschwitz during World War II, a young **German** doctor sought out prisoners with ulcerating sores on their limbs, and practised performing amputations on them.¹²
24. During 'La Violence' in **Colombia** between 1945-1958, one commando instructed his gang to bring him "no reports but ears". Through an elaborate classification system, *el corte de franela* (T-shirt cut) referred to instances when the machete sliced deep along the line where the throat joins the chest; *el corte de corbeta* (neck tie cut) referred to instances when the machete cut along the incision under the mandible, through which the tongue of the victim was pulled out and made to hang outside like a neck tie; *el corte de mica* (monkey cut) to instances where the victim had his head cut off and placed on his chest; and *el corte frances* (French cut) to instances where the skin of the victim was pulled back, exposing the skull while the victim was still alive.¹³
25. During the **Vietnam War** American soldiers reportedly sliced off the ears of their enemies, both alive and dead.¹⁴
26. In the 70s and 80s UNITA forces in **Angola** reportedly cut off ears, noses and hands to send a warning to others not to betray UNITA, or to attempt to flee to areas controlled by government forces. It was a response to the rebels' greater isolation and battlefield losses. Civilians were also mutilated if they failed to pay for protection.
27. In **Mozambique** RENAMO became well known for mutilating civilians, by cutting off ears, noses, lips and sexual organs. This was apparently done systematically, to advertise rebels' strength, symbolically weaken authority of government and undermine rural production systems on which Mozambique depended.

¹⁰ Houghton Mifflin Company, 1999, at page 164.

¹¹ Tony Sullivan, "The UN in Rwanda", <http://www.anu.edu.au/polsci/marx/archive/timor/rwanda.htm>.

¹² <http://www.codoh.com/trials/triussr8.html>.

¹³ Carlos Leon, "Unusual Patters of Crime During La Violence in Colombia" *American Journal of Psychiatry* (May 1969).

¹⁴ Email addressed to the author from Adam Hochschild.

28. In the book entitled *We Wish to Inform you that tomorrow we will be killed with our Families*, an account of **Rwanda's** genocide, Philip Gourevitch mentions a report relating to a councilwoman in a Kigali neighbourhood. The woman was said to have offered fifty Rwandan francs apiece in 1994 (about thirty cents at the time) for severed Tutsi heads, a practice the Rwandans even had a term for: "selling cabbages".¹⁵ Gourevitch further reports on a "favourite torture" of Tutsis during the genocide: to cut tall people "down to size" by chopping off their limbs. Crowds apparently gathered to "taunt, laugh, and cheer as the victim writhes to death".¹⁶
29. **Uganda's** Lord's Resistance Army is known for routinely mutilating its victims: practices include cutting off ears, noses and lips.
30. In *Country of My Skull*, Antje Krog reports of a boy in **South Africa** whose hands were cut off so he could not be fingerprinted¹⁷. Krog also records the following comment: "I saw the severed hand of a black activist in a bottle at a Port Elizabeth police station. The police told me it was a baboon's hand. They said to me: "Look here, this is the bottled hand of a Communist'. But I know that Sicelo Mhlawuli, one of the Cradock Four, was buried with his hand missing'.¹⁸
31. In *The Mask of Anarchy*, Stephen Ellis reports of the presentation of bags of severed penises as trophies to commanders in **Liberia**¹⁹. Ellis reports, "during the fighting in Monrovia in April 1996, Monroviens were able to see how combatants 'shamelessly displayed human parts they had extracted from captured or killed fighters'²⁰. The Liberian Council of Churches reports in 2003 the amputation of people, including men, women and children, by belligerent forces. A recent news article reported that many Nigerians had their hands or legs amputated during the most recent armed conflict in Liberia. Rebels would ask if victims wanted long (arm) or short (wrist) sleeves before cutting off limbs with a knife. Liberian rebels allegedly urged victims to show the stumps to Nigerian President Olusegun Obasanjo. Political analysts believe that Nigerians were targeted as a result of their government's stance towards Liberia.²¹
32. In early 2003, the civilian population in and around Bunia in the east of the **Democratic Republic of Congo**, was terrorised by acts of brutality, including amputations and other mutilations, during clashes between Lendu and Hema militias.
33. The *Los Angeles Times* reported in March 2003 that rebels in **Angola** harassed civilians, cutting off ears and noses of those who failed to pay for protection.²²
34. Other causes of direct, intentional amputation include ritual practices and cannibalism. According to anthropologist Rosalind Shaw, during the last quarter of the nineteenth century and the Protectorate era of the twentieth, a series of accusations and confessions were made in **Sierra Leone** "concerning the 'cannibalism' of deadly were-animals – 'human alligators', 'human leopards,' and (later) 'human chimpanzees' – who were described as capturing and ritually slaughtering people in order to make wealth-producing medicines from their victims' vital organs"²³. As MacCormack states in *Human Leopards and Crocodiles*, "Since eating meat implies the destruction of animals...it connects the acquisition of power with the process of destruction, so central to the principle of all religious sacrifice. Eating irreversibly transforms the thing eaten, which is thereby obliterated, but which may also gain an enhanced status due to the transferral of power to an individual or a social group, such as in the act of sacrifice"²⁴. The Leopard Society existed legally in **Liberia** as late as 1912 when the government banned it and similar societies and instituted "draconian punishments" on members.²⁵ Nonetheless, archives of the Liberian government contain reports of the continued existence of secret societies and of groups interested in the acquisition of human body parts. In 1957, the superintendent of Maryland County reported that a dead child had been found 'with parts cut from the body': the tips of one finger on each hand, both ears and parts of the genitals.²⁶

¹⁵ Farrar, Strauss and Giroux, New York, 1998, at page 15.

¹⁶ *Ibid.*, at page 202.

¹⁷ Jonathan Cape, London, 1998, at page 27.

¹⁸ *Ibid.*, at page 32.

¹⁹ Hurst & Company, London, 1999, at pages 116 to 119.

²⁰ *Ibid.*, at page 148.

²¹ *Concord Times*, 6 August 2003, at page 4.

²² "Oil-rich Africa suffers from Bush's misadventures in Iraq", *LA Times*, 16 March 2003.

²³ Rosalind Shaw, *Memories of the Slave Trade*, at page 225. Some critics claim that such accounts demonstrate how relationships of colonial rule could be debated, evaluated, and commented upon. Others see such stories as reworking of earlier stories of European cannibalism.

²⁴ *Ibid.*, at page 56.

²⁵ Ellis, at page 238.

²⁶ Ellis, at page 252.

35. Cutting off and eating body parts is a practice that has persisted, especially in the political realm, in **Liberia**. In 1985, eyewitness accounts tell of Doe's soldiers eating parts of Thomas Quiwonkpa's body²⁷. In early September 1990, Johnson records on camera the carrying out of his order to cut off Doe's ears with a knife. On one version of the video, Johnson appears to be eating part of Doe's severed ear²⁸. In 1996, the US State Department observed that Liberian fighters, "whether AFL, LPC or one of the ULIMO sub-factions – also targeted their enemies, fighters and civilians alike, removed their victims' body parts and ate them in front of civilians"²⁹.
36. As the above examples of direct, intentional amputation demonstrate, reasons for such actions have included discouragement/suppression of resistance (New Mexico, Congo, Rwanda, Angola, DRC, Liberia), punishment of collaborators (Liberia, Angola, South Africa), proof of death (Congo, Liberia), medical experimentation (Nazi Germany), advertisement of rebels' strength and government's weakness (Mozambique), precaution against fingerprinting (South Africa) and ritual/cannibalistic practices (Liberia).

Unintentional, direct amputation

37. Unintentional, direct amputation refers to instances where the amputation is not the intended goal but results at the hands of the perpetrators in the process of hostilities. **Sierra Leone**: *A Description of the Manners and Customs of the Liberated Africans*, published in 1846, reports that "Many Africans, in attempting to pilfer from their neighbours, are severely chopped by the cutlass"³⁰. It is not improbable that during the course of this hacking, limbs would have also been removed. During the **Rwandan** genocide in the mid-1990s, marked by the use of the machete as the primary instrument of death, many Tutsis who had been shot, been targets of grenade attacks or were butchered by the Hutus for the purposes of extermination were often missing arms and/or legs.³¹
38. The above examples indicate that direct, intentional amputation dates at least as far back as 1700 BC and has been inflicted on individuals around the world, including in the Americas, in Europe, in Asia and in Africa. Europe, the Americas, Asia and Africa have all experienced intentional, direct amputation in the twentieth century. The plethora of examples of amputation around the globe and over various historical periods indicates that such violence is not specific to particular races, cultures or tribes. In other words, contrary to many reports referring to the 'peculiar savagery and barbarism' of African wars, the above catalogue underlines the fact that amputation is culturally neutral.
39. This catalogue of amputations (intentional and unintentional, direct and indirect) also begs the question of origins and influences as concerns the intentional amputations that took place in Sierra Leone between 1991 and 2002. In a search for rational explanations, it is easy to point to Sierra Leone's location near countries that practised amputation, the influences of amputations performed during the slave trade and the influence of Europeans who practised amputation as punishment in Africa. Though some of these theories will be explored below under 'field research' and may, in part, contribute to the perpetration of amputations in Sierra Leone, they can by no means stand in for a full explanation of the phenomenon. Luise White argues in her book, *Speaking with Vampires: Rumour and History in East and Central Africa*, that by tracing vampire stories in the Congo to stories of European cannibals during the slave trade, the capacity of vampires to convey heterogeneous local and regional concerns is subordinated to the issue of mere origins.³² Accordingly we must also, in attempting to understand why amputations became a prominent wartime violation in Sierra Leone, resist the urge to explain away the phenomenon by reverting to an explanation through origins and attempt an understanding of the full complexity of the issue.

²⁷ Ellis, at page 255.

²⁸ Mark Huband, *The Liberian Civil War*, Frank Cass, London, 1998, at page 193.

²⁹ US Dept of State, *Liberia Country Report on Human Rights Practices for 1996*, Wash, DC, 1997.

³⁰ Robert Clarke, MRCS, at page 92.

³¹ Philip Gourevitch, *We Wish to Inform you that Tomorrow We Will be Killed with our Families*, Farrar, Straus & Giroux, New York, 1998, at page 27.

³² 2000, at pages 15-16. See also Rosalind Shaw, *Memories of the Slave Trade: Ritual and the Historical Imagination in Sierra Leone*.

Field research

Summary: Amputations in Sierra Leone

Pre-war amputations in Sierra Leone

40. The earliest word-of-mouth reference to amputations in Sierra Leone appears to date back to the **slave trade**, when captured runaway slaves were allegedly amputated. Such amputation of slaves would not be improbable; known cases of amputation of slaves as punishment occurred in the ancient world, in the United States during the slave trade, and during the colonial period in Africa (Congo).
41. Chief Gbekie, the Kono Tribal Headman in Freetown, claimed in an interview that before the Sierra Leone war of the 1990s, amputation in Sierra Leone was only associated with **accidents**. Emilie Medeiros and Victor Mondeh of the Psychology Unit of Handicap International supported his claim, specifying that amputations had often resulted from **snakebites**. According to the psychologists, people amputated in Sierra Leone before the war had much support from family and community.

Popular beliefs about the war and amputations

42. Popular opinion has played an interesting role in Sierra Leone. Many Sierra Leoneans expressed the sentiments of one civilian when he said: "When I was a young boy, I used to hear people saying, if we don't fight in this country, this country will never straight, if we don't fight in this country, this country will never improve"³³. Several others, including Francis Momoh Musah, from the Internal Defence Unit for Kailahun District for the RUF³⁴, have testified: "I want the whole world and the Sierra Leone people to know that there is no war without atrocities". An ex-combatant of the SLA put it this way: "For any war there must be an atrocity for the outside world to know there is something wrong in the place". The declarative way in which all of these statements are phrased indicates that they represent popular beliefs held at least by one group of which the individuals are members. Both that there must be a **civil war** before Sierra Leone can improve and that this war must involve **atrocities** reflect beliefs, then, to which people ascribe and which simultaneously create public opinion, especially as concerns younger generations who grow up in these norm systems.
43. Popular belief about the occurrence of **amputations** during the war appears to be somewhat uniform. Interviewees, including amputees and Chief Gbekie of the Kono, refer to Tamba Ngauja as the first amputee, though they usually are off about the year of his amputation (often indicating that it occurred in 1994, 1995 or 1996 instead of in 1992) and they point to 1998 as the year when the phenomenon of intentional war-time amputation began in Sierra Leone.
44. As concerns the **initiators of this phenomenon**, the RUF is generally blamed, though some individuals insist that the initial perpetrators were members of the SLA.

Kinds of amputations perpetrated and instruments of amputation during the war

45. Intentional amputation of the **following body parts** occurred during Sierra Leone's civil war according to the evidence I scanned: arms, ears, legs, fingers, toes, lips, noses, genitalia, cheek, and Achilles tendons. Victor Mondeh, Manager of the Psychology Unit at Handicap International (HI), indicates that most of the **leg amputations** were indirect and resulted from gunshot wounds. Arm amputations were often referred to by the perpetrators as long sleeve (amputation above the elbow) or short sleeve (amputation below the elbow).
46. **Instruments of amputation** included machetes, widely referred to as cutlasses in Sierra Leone, axes and knives. Musa Mansaray, Director of the Limb Fitting Centre of HI at Murray Town Amputee Camp, says that 90% of amputations he has seen were carried out with machete and were of the upper limbs.
47. The **cutlass** is a popular agricultural tool in Sierra Leone and was ubiquitous in the country even before the war. As Chief Gbekie of the Kono reported in his interview with the Commission, "everyone has a cutlass... boys of seven and eight years old fetch wood with cutlasses. I sleep with a cutlass next to my bed".

³³ Another Sierra Leonean put it in this way: "Since I was young, if war did not come to Sierra Leone, Sierra Leone would not be better, would not have peace... So now, we have prayed for war, the war has been to Sierra Leone. We have prayed for peace, peace came to Sierra Leone. Now we are praying for the future".

³⁴ TRC statement recorded on 2 May 2003.

Numbers of amputations perpetrated during the war

48. The **precise number** of intentional amputations that occurred during the war is not known since no systematic attempt to register the amputees has as of yet taken place on a national level. Even if such a registration were to take place, it would be very difficult at this point for that attempt to be accurate since a large number of victims died after amputation in the bush. When registration attempts are undertaken, there is often no distinction made between intentional/direct and unintentional amputees, largely because of political reasons³⁵.
49. An obituary for Foday Sankoh published in *The Times* on 31 July 2003 claimed that 10,000 people suffered some form of intentional amputation during the war. This figure is most likely an exaggeration and may include unintentional amputees. Handicap International and Médecins sans Frontières **estimate** that at least 4,000 individuals, including women and children, were deliberately amputated and that three out of four of the victims probably died as a consequence of that amputation. Recent figures from the Norwegian Refugee Council, now involved in organising many of the Amputee Resettlement Areas, estimate that 1,600 amputees are alive today.
50. Today, the largest **amputee camp** is in Aberdeen, Freetown: Murray Town Amputee Camp. This was the only camp established in 1999 and, according to the Chairman of the Amputees, Alhaji Jusu Jaka, this camp was the residence of 230 amputees at the time of its opening. Other **amputee organisations** in the provinces include the Co-dependence Welfare Amputee Association in Bo, the Kenema War Wounded Association, and the War Wounded and Amputee Association in Kono. According to Victor Mondeh of HI, today almost 75% of amputees live in Kono.

Circumstances of the act and details about the perpetrators

51. The statements and interviews with individuals such as Victor Mondeh of HI, who has worked in all amputee camps since 1990, indicate that most amputations were, as he put it, “crudely and violently committed” and appear to be inflicted at random. The **structure** or process of amputations appears to have the following scheme: the commander orders a designated amputator to chop off a specific limb. One amputee reports that the commander said to the boy who chopped off his hand: “go and perform your duty”. Amputations were reportedly regularly performed by young boys, often in their teens, though on occasion children were also used. The similarity of the structure points to a systematic strategy on the part of the perpetrators as concerns amputations – this point will be explored below. At this point, the details differ much more. Jusu Jaka, the Chairman of the amputees, reported that there was one queue for amputation of one hand and another for the amputation of both. Some perpetrators asked if the victim preferred a leg or arm amputation. Victims were also sometimes asked if they preferred to be killed or amputated. Many amputees and researchers, including Corinne Dufka of Human Rights Watch, claim that there were special units devoted to cutting off hands. Dufka further reports that she interviewed members of cut-hands gangs and one of them told her that he got a promotion when he brought back a rice bag full of hands. The UNAMSIL report also alleges that special amputation squads were formed, especially during 1999.
52. The **affiliation of perpetrators** was often unclear as it was hard to distinguish between rebel and government forces according to their dress and conduct. The SLA reportedly grew from 3,000 in 1991 to 16,000 by 1994 and many of these soldiers were poorly paid and ill-trained recruits some of whom came to be known as “sobels” (soldier-rebels) as they resorted to banditry and looting. One ex-combatant who was among those imprisoned in 1998 told me in an interview that the government began soliciting prisoners to help them fight against the rebels. He said that they first took Liberian members of the Special Task Force. The ex-combatant went on: “They did not want to do it but they want to get out of prison so they can go, when they see their brothers, they join their brothers to come to Freetown. That was the game they were playing. As you send them in front to go and fight, they go and join their brothers. AFRC and RUF”. It appears that ex-combatants were often fighting without a particular ideology, but rather with their own interests in mind. One ex-combatant explained that when ECOMOG came to Freetown, they said they wanted to find all soldiers, so after 5 years of being out of service, this particular ex-combatant felt he had to go back to fighting so that he would not be targeted. Another ex-combatant advised that he changed affiliations according to who offered him the best chances of survival. In other words, the affiliation of the perpetrators was often unclear not only to the victims but also to the fighters and factions, and it often depended on the specific circumstance of the combatant and what affiliation would offer the best ‘deal’, often with a view to survival, at that specific time and place.

³⁵ Many organisations are concerned that if such a distinction were to be made, one of the groups – most probably the unintentional amputees – might be discriminated against and prevented from receiving the same benefits from government and other institutions.

53. Reference is often made to the **presence of foreigners** among rebel groups, especially Liberians and Burkinabes, and they are often blamed as being the instigators and/or greatest supporters of amputation. Reference is also often made to the use and abuse of **drugs and alcohol** by the perpetrators. Both these allegations will be explored below.

Trends indicated by the data analyses and graphs

Gender, age, tribal affiliation, religion of victims

54. According to the UNAMSIL data set, 78% of the amputees screened were male and more than 50% of these were over 40. The ages of the women are more evenly spread. The TRC data set includes 76% males. According to the UNAMSIL data, 8% of amputees screened are over 60. Tribal affiliation and religion seem to play no role.

Data and trends according to dates

55. Registered amputations on the UNAMSIL data set range from 1 January 1992 to July 2001. The TRC data set ranges from 1 July 1991 to April 1999. UNAMSIL and TRC data sets both indicate that significant clusters of amputations occurred during three periods: 1) late 1995/early 1996 during the presidential and parliamentary elections; 2) early to mid 1998 during 'Operation No Living Thing'; and 3) during the January 1999 invasion of Freetown.

Perpetrators

56. The UNAMSIL report alleges that during the 1995/1996 amputations, both RUF and SLA were implicated; in 1998, ex-SLA were mostly implicated; and in 1999, ex-SLA were mostly implicated. Keeping in mind that identification of rebels was not always accurate, both the UNAMSIL and TRC spreadsheets indicate that the majority of amputations where perpetrators were identified were largely allegedly committed by the RUF up until about 1996/1997. After 1998, the UNAMSIL data set shows higher levels of RUF/AFRC and ex-SLA involvement in amputations, and the TRC data set shows higher levels of AFRC, SLA, RUF/SLA and Kamajor involvement. The UNAMSIL report alleges further that, based on the data, while the RUF may have started this practice, ex-SLA made it into a tool of terror. The comparative graphic analysis supports the claim that the RUF began the practice.

Amputation of limbs

57. The highest levels of amputations throughout the conflict were those of arms, followed by ears, fingers and legs in no particular order. The graphs indicate further that the RUF, AFRC, SLA, etc. mostly amputated arms while the Kamajors/CDF predominately amputated ears, toes and fingers. It should be noted, however, that reports of Kamajors amputating are very few, especially in comparison to the others; more data would be necessary to draw more conclusive trends.

Amputation according to district

58. The graphs indicate that amputations were mostly perpetrated in the south and east before about 1997/1998. In 1998, there is a shift to the North and occurrences in the east increase.

Target groups

59. Although members of all tribal affiliations, ages, sexes, religions became victims of deliberate amputation in Sierra Leone during the conflict, there is a significant group in Sierra Leone that does not seem to have suffered from this violation: the **Lebanese** community. The Lebanese, did, however become the targets of other violations. According to the "Situation Report on Human Rights Abuses and Violations in and around Makeni Town in the Northern province of Sierra Leone, West Africa" prepared by KWAYOR of Kono District, in Makeni, combatants in Makeni mainly targeted houses of the Lebanese and other foreigners for forceful eviction. Why the Lebanese did not suffer from deliberate amputations is an interesting question.

60. Many of the more vulnerable members of the Lebanese community (women and children) left Sierra Leone during the conflict, leaving behind husbands and older sons involved in business who took (and were able to financially take) protective measures against the rebels generally (further secure doors, hire guards for the gates to their houses, buy weapons and, of course, capitalise on the fact that the Lebanese community is very close-knit). The fact, however, that members of the Lebanese community were not deliberately amputated may also reveal something about the nature of this violation. Perhaps the message contained in deliberate amputations was not meant for or could not be expressed through a Lebanese victim. According to Musa Mansaray, Director of the Limb Fitting Centre of HI, Sierra Leoneans were not, however, the only victims of amputations. He maintains that **Guineans** were also amputated, especially in 1998. They look different to Sierra Leoneans, so it would have been easy to distinguish them according to Mansaray. Perhaps, then, the amputations were meant to address an African problem, to which the rebels did not see the Lebanese as privy on a social or political level.

Reasons for amputations according to spreadsheets

61. Before, during and after the amputation, perpetrators often said something to the victims or to each other that could be construed as a reason for amputating the victim. In the statements given to the TRC and UNAMSIL, such reasons were recorded and they can be found analytically on the spreadsheets. In the UNAMSIL spreadsheet, what may be construed as reasons are reported in 50% of the statements. In the TRC spreadsheet, possible reasons are reported in 40% of the statements. These statements have been divided into categories. It should be noted that many of the statements could fit into multiple categories. The categories, in order of prevalence, are followed by the date of amputation, also signifying the number of occurrences of this statement, and examples from the spreadsheets and (P = perpetrator / V = victim).

Victim is used as “messenger”

TRC Spreadsheet

- o V sent back to report on death of other, 93
- o V accused of trying to escape, 95
- o V refused to sit on ground naked, 96
- o V accused of voting for Kabbah and not killed so he could deliver message to Kabbah, 97
- o Note hung around V's neck stated: “Whatever state you find him in, know RUF did this”, 92
- o AFRC gave V a letter for ECOMOG, 98
- o Tell people that rebels are in the area, 94
- o P gives V letter for Kabbah, 96, 98
- o V to take letter to Kabbah to ask for new limb, 98, 98
- o Never vote for Kabbah again, 96
- o “Go see Kabbah and get other hand”, 98
- o Tell Kabbah to “fight for more power”, 99

UNAMSIL Spreadsheet

- o P decides to mark V, (94)
- o Hand used to vote will be cut, 96
- o P said amputation was sign that victims still around, 98
- o Note around V's neck states: “We are sending you as our messenger”, 98
- o Note around V's neck states: P (AFRC-RUF) would take Kabala-Makeni Highway, 98
- o Note around V's neck states: P (Ex-SLA) announced attack on Kambia Town, 98
- o V sent with letter to Kabbah to get new hand, 98, 98
- o “Go show it in Bo”, 95, 96
- o Tell what we did to your family, 96
- o Go to Freetown and say that P don't want elections, 96
- o Go to Kabbah, 96, 98, 98, 98, 98, 99
- o Ask Kabbah for hands back, 95, 96, 98, 98, 98, 98, 98, 98, 98, 99, 99, 99, 99, 99, 99, 99, 99, 99, 99
- o Go tell Kabbah we are here, 96
- o Tell Kabbah that we are still here, 98
- o Tell them we are coming, 98, 98, 98
- o P asked V if she knew God; P said he was God since he could decide to kill or amputate her, 99
- o P allegedly amputated to ensure that victim would never vote for Kabbah again, 98, 99, 99
- o “People who will see you will realise that this is a fearful war”, 99
- o Tell others that the AFRC did this to you, Freetown is where we belong, 99
- o Give Kabbah amputated hand, 99, 99
- o Tell ECOMOG and the President to come see P so P could also chop off their hands, 99
- o P wanted to show hands to Sankoh, 96

Victim is allegedly punished (most often for being associated with enemy faction)

TRC Spreadsheet

- V alleged to be one of Momoh's soldiers, 91
- V allegedly accompanied rebels, 91
- V allegedly passed info to soldiers, 94
- V allegedly offered up prayers for Kabbah, 95
- V accused of not supporting P, 95
- V accused of being rebel, 97
- V accused of being Kamajor, 98
- V accused of having hidden weapons, 98
- V did not have rice, salt, soup to give P, 98
- V refused to take P to thieves hideout, 99
- V refused to give up his daughter to P, 99
- V refused to sleep with P since she was pregnant, 99

UNAMSIL Spreadsheet

- V accused of being a Kamajor, 95, 96, 99, 01
- V accused of liking ECOMOG, 98
- V accused of supporting Kabbah, 98
- V accused of supporting civilian government, 98
- V accused of supporting democracy, 99
- V accused of helping ECOMOG, 99
- V is amputated since others in his group fled, 94
- V allegedly made P run too far, 96
- V accused of having govt cash and trying to escape, 96
- V to be punished for voting for Kabbah, 98, 98
- V had no diamonds, 98
- V refused to sleep with rebel, 98, 99
- V refused to give P his money, 98
- V allegedly made P suffer, 98

Amputation is direct but not intentional in the FIRST instance

UNAMSIL Spreadsheet

- "I had a cutlass in my hand from rice cutting which one of them used to chop me all over my body", 94
- V's fingers cut while protecting head, 95, 98
- V's arm amputated while protecting head, 96
- V's arm amputated as result of hacking with knives and cutlasses, 96, 96
- V's fingers amputated as result of hacking with machete, 96, 98, 98
- P said didn't want to waste more bullets, 98
- P going to chop off son's head, but V stopped axe with palm of hand, 99

62. Keeping in mind that these statements were not given by the statement-giver under the assumption that they would be understood as possible reasons for the amputation; that, especially the statements reportedly stated by the amputator may not represent the actual reason for amputation; and that the statements represent material reported in only about half the cases that analysed in the TRC and UNAMSIL spreadsheets, also only representing a cross-section of the amputee population, the possible reasons noted above are the following in order of prevalence:

- a. the victim is used as a messenger;
- b. the victim is punished; and
- c. amputation is direct but not intentional in the FIRST instance.

63. These statements, if they may at all be construed as reasons for amputation and as representative of the amputations committed more generally, provide an interesting window into the nature of this violation. The most prevalent statements that may be understood as a reason for amputation involve the victim as **messenger**, sometimes with a particular message (specifying an upcoming attack) but usually with a general message to other factions and to the government in power. In these cases, the amputation is not victim-specific; the victim is used as an instrument by which to instil terror in the civilian population and express power through terror with a view to the other factions and to the government in power. Interestingly, according to the above data, victims were used as messengers increasingly in 1998 and 1999, when it was clear that many of the rebel groups were losing. Amputation became, therefore, a last and desperate show of power.
64. In the next most prevalent category, the victim is allegedly **punished**, usually for being associated with the enemy faction (as a member or supporter). Whether punishment is anything more than the explicitly stated purpose is difficult to know; it may reveal a psychological need on part of the perpetrator to have a specific reason for committing this violation; it may reflect a more wide-spread frustration on the part of the perpetrating faction for not having enough support in the country to be victorious.
65. In many cases, the victim is amputated **directly but not necessarily intentionally** in the first instance; amputation of a limb may be the result of hacking or a consequence of a dearth of bullets that has resulted in hacking and, therefore, amputation. In a country where cutlasses are so ubiquitous, it is not surprising that hacking and even direct, unintentional amputation would result in battle. The reasons for hacking may include that the victim is used as a messenger and/or that the victim is punished.

Possible explanations for amputation as a prominent wartime violation

66. With the above summary and data from the spreadsheets and graphs in mind, a series of possible explanations for why amputations became a key war-time violation during Sierra Leone's armed conflict was considered.

Allegations of external influence in the emergence of amputations

67. Many claim that the **Liberians** introduced this specific kind of brutality into the Sierra Leonean civil war of the 1990s. Francis Momoh Musah, of the RUF's Internal Defence Unit for Kailahun District, claimed in his testimony to the TRC that "there was a separation between the Liberian rebels and the Sierra Leonean rebels". Musah alleges that while the Sierra Leoneans were in favour of actions he took to discipline those who committed human rights violations, "the Liberian rebels who were the trouble makers were not happy with the action taken by me and my boss". Musah went on in his testimony to say that Liberians committed many human rights abuses, including cannibalising.³⁶
68. Liberian involvement in the amputation of the so-called "first amputee", Tamba Ngauja, is also telling. Amputated on 21 November 1992 by the RUF in Kono, Ngauja saw two victims preceding him beheaded with a machete. "The Killer", a confident 25-year-old man in charge of cutting off heads, got into an argument with another man who claimed that it was his turn to kill. The commander allegedly said: "you go there, you go there – I will find a solution". The Sierra Leonean commander, "Scare the Baby", declared that this man should not be killed. The commander then allegedly told the secretary to write a letter to this effect: "in whatever condition you find this man, know it is the RUF who did this. We did this to show the government that we are strong and that we will fight till we conquer". The rebels then hung this letter around Ngauja's neck. The commander then allegedly looked at Ngauja. While he was suffering this brutality, Ngauja heard rebels with Liberian accents saying, "ma man, cut his ears"; "cut off his private"; "cut off his legs". After two or three minutes, in which the commander contemplated and the rebels debated what should happen to Ngauja, the commander allegedly said that Ngauja's hand should be cut. The Killer protested saying "Why are you allowing this man not to be killed?" and insisted that he should be killed, but the commander persisted in his view. Then, the commander had to leave to tend to other prisoners. The Killer told Ngauja to put his hand down and began using the machete to cut off Ngauja's hand, but he said, "ma man, this bone too strong, let me go get stick". While the Killer looked for a stick, the Liberians apparently started licking the blood on the machete, saying "this papaya blood is good". The Killer then returned with a stick, put the hand perpendicular to it, and smashed the bone. After that, he cut off the flesh with a knife. Ngauja fainted; when he woke up, he was missing both hands. He believes the Killer amputated both hands purposefully in defiance of the commander who did not let him kill Ngauja.

³⁶ TRC statement recorded on 2 May 2003.

69. The story of Tamba Ngauja is instructive on several counts. It indicates that:
1. the rebels did not intend to amputate him;
 2. the commander may never before have ordered an amputation. The commander accepted various suggestions and none of them, according to Ngauja, involved amputation of the hand. Only after some time thinking did he come up with the idea of amputating the hand;
 3. the Killer may never before have committed an amputation; the name itself is revealing. In fact, it is not clear that the Killer even knew how to amputate: he found the bone too hard and had to think of an alternative tactic to simply chopping. He also was visibly frustrated with the commander that 'all he was doing' was amputating a limb and not beheading and thereby killing the victim.
70. If the details of this story are credible and if they are representative of the actions of other RUF rebels at least, then we may conclude that the Liberians did, in fact, influence the Sierra Leoneans to commit amputations (the history of amputations in Liberia lends further credence to this view) and that the Sierra Leoneans, as represented by this commander, willingly accepted the suggestion and made it into their own. We may also conclude, on the basis of this testimony, that, at least at this point in the war (November 1992), the RUF did not have a planned strategy to amputate, but that amputation resulted instead from improvisation on the field. According to Ngauja, all the fighters had either guns or cutlasses.
71. One should, however, be wary of putting all the blame on the Liberians. Musa Mansaray, Manager of the Limb Fitting Centre at HI, claims that amputators put on masks so as not to be identifiable; part of this making was their impersonation of Liberian accents. Mansaray claims that Sierra Leoneans were more afraid of Liberians than of other Sierra Leoneans, so impersonation of a Liberian accent also instilled more fear in the victims, and, by extension, attributed more power to the perpetrators. Mansaray claims that such impersonation took place especially between 1996 and 1999. Another ex-combatant says that residents of Pujehun have much in common with Liberians and even use Liberian dollars. He claims that it is easy for them to pass as Liberians.
72. Whether we may assign any kind of responsibility to Liberians, either for the introduction of amputations to the Sierra Leonean conflict or for the instigation of such violations during the conflict, it should be noted that the scale of amputations in Sierra Leone was far greater than that of amputations in other African countries and that, by many accounts, many of those involved in amputations were Sierra Leonean. Furthermore, as noted at the end of section IV.3. above, any attempt to trace amputation in the Sierra Leonean conflict to a specific origin will compromise the capacity of the nature of amputations to convey information about the nature of the conflict and regional/national/social concerns in Sierra Leone. Though the Liberians may have contributed to the perpetration of amputations in Sierra Leone, amputation was by no means only a Liberian violation.

Foday Sankoh and the Congo

73. Foday Sankoh served as a UN peacekeeper in Sierra Leone's contingent to the Congo in the early 1960s when memories of the amputations of King Leopold's agents in the Congo were a powerful force behind calls for nationalism in the Congo. The question arises of whether Sankoh learned of the efficacy of amputation as a terror tactic while in the Congo and then applied it to the war in Sierra Leone. While Sankoh consistently denied sanctioning the perpetration of amputations, he is reported as saying in response to a question about atrocities: "When two elephants are fighting, who is going to suffer? The grass, of course. I cannot deny it."³⁷

Psychological significance of amputation

74. When one rebel insisted that the other finish off an amputated victim, according to Jusu Jaka's testimony, the rebel responded, "He is already a finished man". Victor Mondeh and Emilie Medeiros of HI state that amputation was part of a planned strategy to break the social links in communities. These links are especially important in African communities, where social links are what define one's place in society³⁸. Loss of important limbs in a society where work is largely manual almost ensure that the individual will not be able to carry out his duties as a father, brother, cousin, uncle, grandfather, and so on. Whether intentional or not, then, one result of amputation is the necessary reconstitution of the individual's identity vis-à-vis society – and, almost certainly, this redefinition will compromise the individual's earlier position.

³⁷ Howard French, "African rebel with room service," *New York Times*, 23 June 1996.

³⁸ Archbishop Desmond Tutu, Chairman of the South African Truth and Reconciliation Commission, refers to this aspect as part of the African *Weltanschauung*: "In the African *Weltanschauung* a person is not basically an independent, solitary entity. A person is human precisely in being enveloped in the community of other human beings, in being caught up in the bundle of life. To be... is to participate". *Country of My Skull*, Antje Krog (London 1998), at page 110.

75. Perhaps more importantly for this report, amputation has significant psychological consequences as concerns the amputator. Paul Richards notes astutely in *Conflict in Africa*: “Villagers report being required to witness the terrifying spectacle of public beheadings in which the victim’s neck, working from back to front with a blunt knife. The purpose of these atrocities seems to have been to bring about the irrevocable break between conscripts and their communities. Subsequently, youth conscripts could not escape for fear of reprisals”. Amputation, then, used as an **assurance of the conscripts’ long-term commitment to the faction**, ensures not only that the amputator cannot logistically return to the community for fear of reprisal; it also disrupts the social links, alienating the community from the amputator and rendering it psychologically very difficult for the perpetrator to return to the community and re-establish those social links.

Criminal Expropriation

76. An RUF statement issued on January 15, 1999 states, “Fighters tend to use this breakdown in law and order to unleash their angry negative emotions by committing untold atrocities”. Though the collapse of supervisory institutions, like the police and the army cannot account for the perpetration of amputations, especially on a large scale, it can, in part, perhaps, account for the conditions that made such violations possible.

Drugs and alcohol

77. Many ex-combatants asserted that they were encouraged to take drugs by their commanders, and, that especially the amputators were under the influence of drugs and alcohol. One ex-combatant of AFRC says that field commanders supplied faction with guns and alcohol: “it was a morale booster together with the guns, they say logistics, logistics to the front line soldiers”. This ex-combatant claims that he was given **rubber**, a hard rum, to drink; this alcohol was apparently so strong that he could only drink half a glass at a time. He also asserts that Adama Cut-Hand and a Liberian, known as “the Devil”, introduced amputations into the war and that the amputators were under the influence of drugs and alcohol.
78. Another ex-combatant of the AFRC claims that many took drugs and got them at the clinic in Kissy. He claims they used **brown-brown** and **cocaine**. Cocaine was a grey or brown powder. Combatants also allegedly used **ash** – “a black thing that you put in foil”. This man says of friend who was taking ash: “he blow it out, pull some of the smoke. After that, he became wild. He will be wild like a lion. He will be hungry to do things that it’s not possible. If he want this (tape recorder), he will come here, he will break that window and come and take this one tape”. This ex-combatant claimed there were many drugs that came from Nigerian soldiers and were sold on the streets. One match-size piece of cocaine, brown-brown or ash cost one thousand Leones. Jamba cost 200 Leones. This ex-combatant also referred to high levels of drinking. He claims the rebels drank omole, a very strong hash rum, called pasiste in English, made from fruits such as orange, pineapple and sugarcane, and boiled.
79. Dr Edward Nahim, a Freetown-based psychiatrist who heads the Children with War (CAW) project and one of oldest psychiatric hospitals in West Africa located at Kissy, told a British newspaper in 1995: “It is usually a combination of marijuana, alcohol and gunpowder. Over time the soldiers become delirious. They don’t know what they are doing”³⁹. One ex-boy RUF soldier said: “Our superiors put gunpowder in our food and gave us brown pills that they called cocaine to take with our meal. The drugs make your heart strong, make you feel that you are not afraid of anything”. Another interviewed in the Sunday Times said: “We killed many. When we were afraid, we smoked cannabis mixed with the residue of gunpowder from bullets. It made us brave and we didn’t care about killing.”⁴⁰

Copy-cat trajectory

80. In 1997, President Kabbah was reported as saying that Northerners should apologise to Mendes because it was the Northerners who destroyed the Mende’s villages and towns. Shortly thereafter, according to an RUF statement issued on 15 January 1999, a series of attacks took place in the north by people calling themselves ‘RUF rebels’. The RUF claimed that those who committed the attacks were from the Mende tribal Kamajor militia from the South, impersonating the RUF. The RUF further claimed that it was very active in the South and East, but that the only reports of amputation that came during this time were from north of a horizontal line drawn through the tip of Freetown to just below Sefadu. The graphic analyses support this claim.

³⁹ *The Independent*, “Boys in arms find peace a trial,” 28 September 1995.

⁴⁰ *The Sunday Times*, “Machete rule makes hell of Sierra Leone,” 31 December 1995.

81. Whether this claim supports the allegation that the Kamajors impersonated RUF amputators is unclear. What may, however, be remarked on is what Martin van Creveld has termed the 'copy-cat trajectory of wars': "War being the most imitative of all human activities, the very process of combating low-intensity conflicts will cause both sides to look alike, unless it can be brought to a quick end"⁴¹. In fact, regardless of who the initial instigators of the amputations was, the data reveals that all factions (SLA, ex-SLA, RUF, AFRC, Kamajors, ECOMOG) perpetrated amputations. One may argue that, to some degree, the perpetration of amputations fuelled further amputations.

Weapons and Ammunition Shortage

82. Perpetrators often claimed they did not have enough ammunition and, therefore, resorted to using the cutlass; as already stated, cutlasses are ubiquitous in Sierra Leone as farming instruments.. One former member of CDF stated that ECOMOG, short of weapons and ammunition, gave civil defence bows, arrows, sticks and cut glass to defend themselves. RUF member Francis Momoh Musah in his testimony to the TRC and an ex-combatant of the SLA in a TRC interview claimed that their respective factions were short of ammunition.

Evolution of the causes of amputation according to the course of the conflict

Early stages

83. It has been claimed by Paul Richards and others that mass amputations did not begin until the Kamajors started posing a serious challenge to the RUF around the mid-1990s. At that point, an 'enclavist mentality' emerged among the RUF. The graphs and data confirm that mass amputations did not begin until 1996. The Kamajors were a grassroots militia that operated on their own terrain. Lansana Gberie claims that Kamajors were therefore hard to distinguish. Gberie states further that RUF commanders who denied the perpetration of amputations, admitted their frustrations at countering Kamajor attacks and said that this led to more violent and indiscriminate attacks by the RUF against villagers.

1996: "Operation Stop Elections"

84. The RUF's Francis Momoh Musah claims in his testimony to the TRC that the RUF tried to stop the 1996 elections by cutting off the right thumb of any civilian who wanted to vote – an ironic response to one of the campaign slogans: 'let's put our hands together to create a new future'. Musah alleges that this operation was headed by Mohamed Tarawallie alias Zino and that it was part of "Operation Stop Election". Musah asserts that this operation did not go down well with Foday Sankoh. Although the spreadsheets include testimonies of people with missing fingers, this particular data set does not include individuals with missing thumbs. This may be mere coincidence. Of special interest, however, is Musah's claim that amputations were part of the **planned strategy** of "Operation Stop Elections".
85. An RUF statement issued on January 15, 1999 addresses the issue of election amputations: "A few RUF fighters in the bush went on the rampage and as their own way of stating their objection to the planned elections, they proceeded on a campaign to cut off the hands of innocent villagers as a message that no voting should occur. This is how amputation of hands started in Sierra Leone by desperate RUF men. These men decided to apply the tactics of APC men like Thaimu Bangura and SB Marah to *draw attention to the fact that they were opposed to elections*". While this statement alleges that amputators were punished for committing such violations, a further section of this same statement indicates that amputations were, in fact, part of a planned strategy to stop elections in 1996.
86. Referring to claims that Kamajors were impersonating RUF men in 1997, the statement continues: "Medical personnel treating these amputees in early 1997 shortly after Kabbah attacked the North stated that the hands were cut off not at the wrist as before but at a point through the palm. This signalled that whoever was doing these new set of amputations in the North were not the RUF". The RUF stated that it had a procedure and that any deviation from it would be detected. Interestingly, the type of amputation is noted as that through the wrist, not of the thumb as earlier noted. Testimonies recorded in the spreadsheets indicate that, arms, hands, arms and fingers (usually four fingers on one hand) were amputated.

⁴¹ *The Transformation of War*, NY, The Free Press, 1991, at page 225.

87. According to Victor Mondeh of HI, who has visited all amputee camps since 1990, some people who were amputated in 1996 never voted – the amputation of civilians was once again indiscriminate. The purpose of such amputation was to send a general message to the public; it was not concerned with the individuals that fell victim to it.

1997: Amputations as a message of power and legitimacy

88. “I want the whole world and the Sierra Leone people to know that there is no war without atrocities”, says the RUF’s Francis Momoh Musah in a statement to the TRC on 2 May 2003. In a press release delivered on the Sierra Leone Broadcasting Service (SLBS) on 18 June 1997, the RUF explained why atrocities are necessary and admits that amputation was a planned strategy:

“But the atrocities that occurred must not be taken in the context of a personal vendetta. They were the result of the rottenness of a system, which could not be uprooted except by brutal means. We did not take to the bush because we wanted to be barbarians, not because we wanted to be inhuman, but because we wanted to state our humanhood to a society so deep that had the RUF not emerged, we wonder if we would not have still been under the yoke of that wretched regime. In the process of cleaning the system, however, we have wronged the great majority of our countrymen.”

89. The RUF, by 1997, admits to a **planned strategy**, to the **indiscriminate infliction** of this violation⁴², and to using amputation as a **message** (“we wanted to state our humanhood...”). Mention of a process of ‘cleaning’ may be understood as a reference to the birth of states through violence. Atrocities were the most powerful tool of manipulation that the RUF had.

1998: Retaliation and an attempt at international recognition

90. In May 1997, disgruntled army officers deposed the elected government of Tejan Kabbah and formed the AFRC, inviting the RUF to join them. In February 1998, ECOMOG expelled the RUF/AFRC junta and reinstated Tejan Kabbah in March 1998. At this time, the AFRC/RUF, according to the UNAMSIL report, allegedly unleashed a wave of terror across the northern province of the country called “Operation No Living Thing”. In the absence of other instruments of power, the rebels used the most powerful weapon they had: the cutlass.
91. In conversation, Gabriel Mani allegedly told Sahr Sandi that the SLA/RUF made a joint decision in the jungle around Koinadugu in late 1997/early 1998 that they should conduct amputations. According to Mani, the SLA/RUF felt they were not getting enough international recognition and they pointed to how much international coverage the amputations were getting as compared to other aspects of the war. At that meeting, possible participants according to Sandi included SAJ Musa, Gullit and Five Five (55). In fact, one interviewee told me, “When we started cutting hands, hardly a day BBC would not talk about us”. 55 and others allegedly told Sandi that amputations were imposed by the SLA and were not originally on the RUF’s agenda.
92. Regardless of whether such a meeting did take place, the notion that the degree of **media coverage of amputations** influenced the degree of perpetration of this violation, especially when factions were loosing and retaliating, seems to make sense. One ex-combatant for the SLA stated, “For any war there must be an atrocity for the outside world to know there is something wrong in the place”. This seems to be a deranged way of addressing problems, but for a faction in decline, already vetted in war by several years and members of which are concerned about their own chances of survival, especially under a new government, it might be a plausible way of thinking.

⁴² In one group, Victor Mondeh of HI reports that a six-year old child was the first victim to be amputated. It is clear that a six-year-old child cannot have developed any affiliations – political, financial, religious, or otherwise.

1999: The question of contingencies

93. Some of the amputees, in particular the Chairman of the Amputees, Jusu Jaka, referred to the storming of the **Kissy Dock Yard Store** by the rebels during the 1999 invasion of Freetown. The store was apparently overstocked with farming tools, especially cutlasses. Denis Kamara, the Chief Agriculturist in Sierra Leone's Department of Agriculture, reported that these farming tools were most likely held in WFP stores that had been rented to the Northern Area Agricultural Project (NCAP). The question that immediately arises is: to what degree did such contingencies, like the discovery of large amounts of cutlasses, contribute to the perpetration of amputations in the war? Simultaneously, we must also ask if the plethora of cutlasses in the NCAP's storage was a coincidence or whether there was some agreement between rebel forces and the NCAP.

1999: Defeat and Retaliation

94. An ex-combatant from the AFRC claimed that when ECOMOG overran Freetown, the youth of Freetown (many of them CDF) burnt AFRC members alive by putting tyres around their necks, pouring petrol over them and setting them alight. This ex-combatant alleges that the SLA and AFRC decided to "revenge", so they started chopping off the hands of anyone they saw.
95. One civilian reported that rebels told the civilians that whenever ECOMOG waged an intervention against them, they would go to the bush and when they returned, they would carry out massacres.
96. Whether amputation was a planned strategy in 1999 is further elucidated by events following the 1999 Lomé Peace Agreement, after which amputations practically ceased.

1999: Lomé Peace Agreement

97. According to the "Situation Report on Human Rights Abuses and Violations in and around Makeni Town in the Northern province of Sierra Leone, West Africa" prepared by KWAYOR of Kono District written on Makeni, "many combatants have often publicly shown their disapproval of the Lomé Peace Accord. Such fighters have also continually vowed to resort to cutlasses when the guns are taken away. Hence their common slogan in and around Makeni: **"Cease fire, not cease cutlass"**. The spreadsheets do not confirm that increased cutlass action took place after the 1999 Lomé Peace Agreement; this does not necessarily disprove the claim since the reports are only based on those who survived (survival was much more likely in large cities than in the provinces) and on those who came forward to testify in these particular studies. As concerns the TRC data, the accompanying spreadsheet only represents a cross-section of statements given. More detail can be found in the section on constraints and limitations above.
98. According to the UNAMSIL report on amputations, after the signing of the Lomé Peace Agreement in July 1999 by President Kabbah and RUF leader Foday Sankoh, **amputations practically ceased**. According to the spreadsheets, reports of amputations taper off after April 1999 and there are sporadic reports of amputations in the UNAMSIL spreadsheet in 2000 and 2001. Such a halt in amputations after the Kabbah-Sankoh agreement could indicate that forces under their control were appeased; it is unclear whether this halt is the result of an official order from the top or whether it is a tacit agreement reached individually as a result of appeasement. A more or less complete halt of amputations does, however, indicate that the rebels might have been more organised than we might otherwise think and were not acting as autonomously as some RUF leaders have claimed. In 1999, according to the spreadsheets, the factions most involved in amputations were the RUF/AFRC followed by the RUF, and then the Ex-SLA and the CDF.

Conclusion

99. Amputation is a complex phenomenon and its wide-spread perpetration during the war must take into consideration the many factors that contributed to the war: the socio-political situation in the country; the collapse of supervisory institutions; the availability of different kinds of weapons; the use and abuse of various substances; the physical and psychological factors; theories of war and the particular make-up of Sierra Leonean society; outside influences and the history of amputations within Sierra Leone; the evolution of the war and of its tactics – whether or not official strategies. In understanding the phenomenon of amputations, we must take into consideration a wide range of data, spanning from testimony of the ex-combatants, the victims and commentators on the problem such as academics and human rights activists.
100. The data seems to indicate that while amputation was, in some cases, the indirect result of hacking with the available weapon, the cutlass, it eventually, around the elections of 1996, turned into a planned strategy, at least on the part of the RUF. Through psychological and physical manipulation, factions compelled younger individuals to serve as amputators targeting not specific individuals, but the population at large. Other factions may have succumbed to the 'copy-cat trajectory' and responded in kind, while the lines between civilians and combatants became blurred in the mid-1990s through the increased activity of the Kamajors.
101. In the absence of other instruments of power, the cutlass emerged as the single most powerful weapon of the rebels and became widely used as a messenger of terror, a declaration of power and an attempt at legitimacy. Simultaneously, amputation served as a blanket punishment to a population that did not allow it to rise to power. As factions began to loose, they resorted to the only weapon that still wielded power and through it they attempted to achieve revenge and retaliation. With the signing of the Lomé Peace Agreement, what seems to have been a planned strategy was brought to an end. As for the outside influences, perhaps the Liberians did have some kind of effect on the instigation of this amputation into the war; what we can definitively say is that the factors driving amputation in Sierra Leone, as surveyed in this report, reflect those found in other countries around the world.

APPENDIX 5 – PART TWO

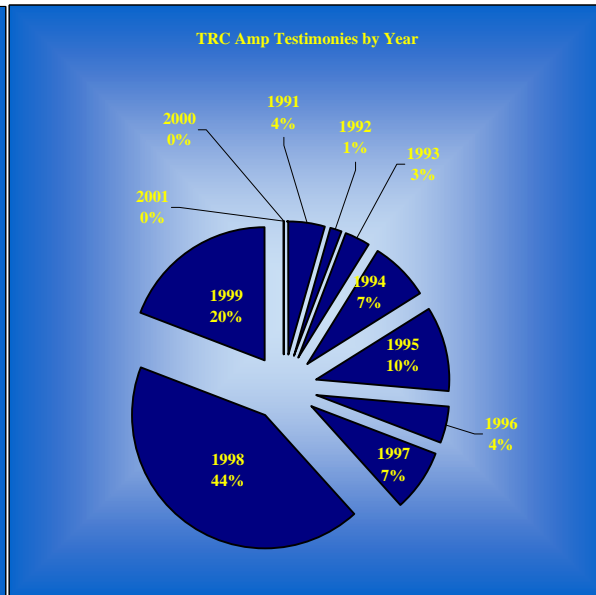
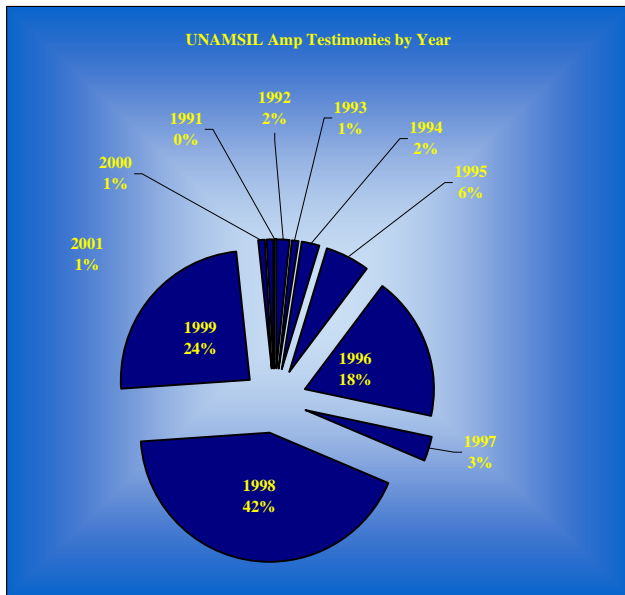
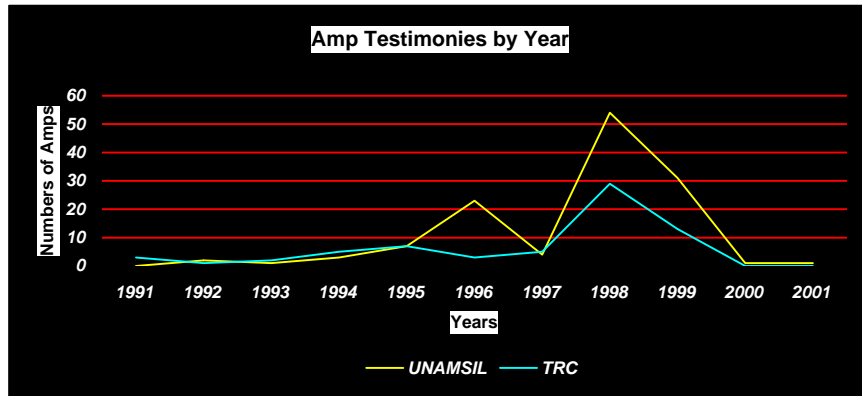
Comparisons of Data on
Amputations drawn from
TRC statements and the
UNAMSIL Amputation Survey

AMP TESTIMONIES BY YEAR ACCORDING TO ORGANIZATION (TRC/UNAMSIL)

UNAMSIL TRC

1991	0	3
1992	2	1
1993	1	2
1994	3	5
1995	7	7
1996	23	3
1997	4	5
1998	54	29
1999	31	13
2000	1	0
2001	1	0
	0	1

N/I



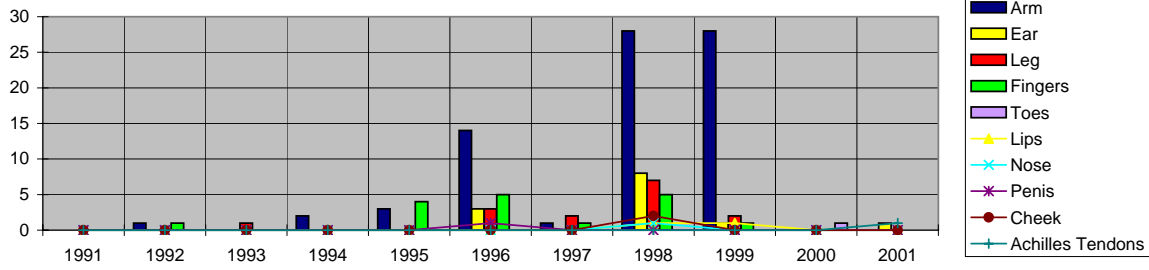
TYPE OF AMPUTATION BY YEAR/UNAMSIL

	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	Achilles Tendons
1991	0	0	0	0	0	0	0	0	0	0
1992	1	0	1	0	0	0	0	0	0	0
1993	0	0	0	1	0	0	0	0	0	0
1994	0	0	2	0	0	0	0	0	0	0
1995	4	0	3	0	0	0	0	0	0	0
1996	5	0	14	3	3	0	0	1	0	0
1997	1	0	1	2	0	0	0	0	0	0
1998	5	0	28	7	8	1	1	0	2	0
1999	1	0	28	2	1	0	1	0	0	0
2000	0	1	0	0	0	0	0	0	0	0
2001	0	0	0	0	1	0	0	0	0	1

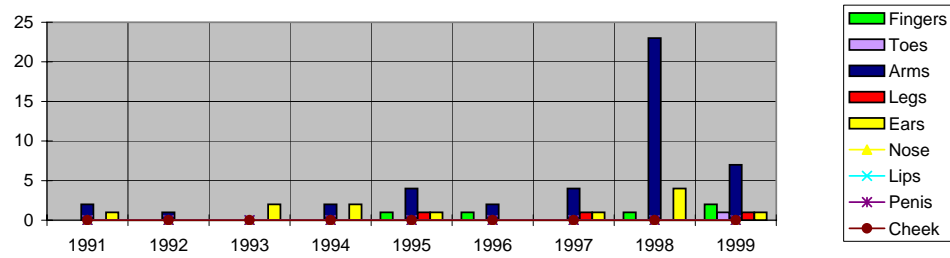
TYPE OF AMPUTATION BY YEAR/TRC

	Fingers	Toes	Arms	Legs	Ears	Nose	Lips	Penis	Cheek	All Limbs
1991	0	0	2	0	1	0	0	0	0	0
1992	0	0	1	0	0	0	0	0	0	0
1993	0	0	0	0	2	0	0	0	0	0
1994	0	0	2	0	2	0	0	0	0	1
1995	1	0	4	1	1	0	0	0	0	0
1996	1	0	2	0	0	0	0	0	0	0
1997	0	0	4	1	1	0	0	0	0	0
1998	1	0	23	0	4	0	0	0	0	0
1999	2	1	7	1	1	0	0	0	0	0

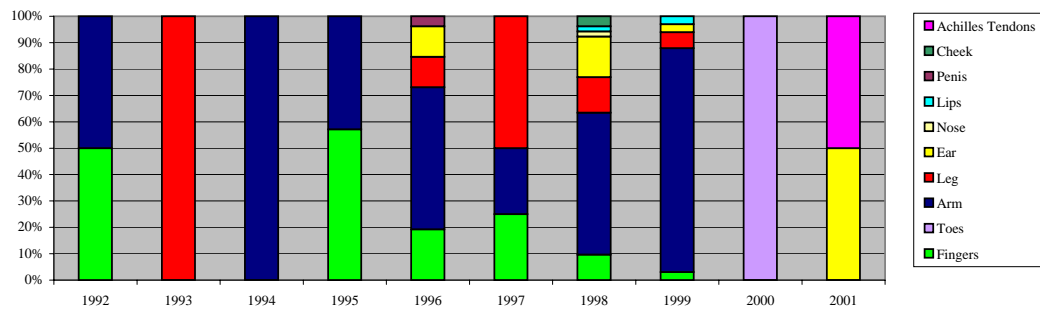
Type of Amp by Year/UNAMSIL Data Set



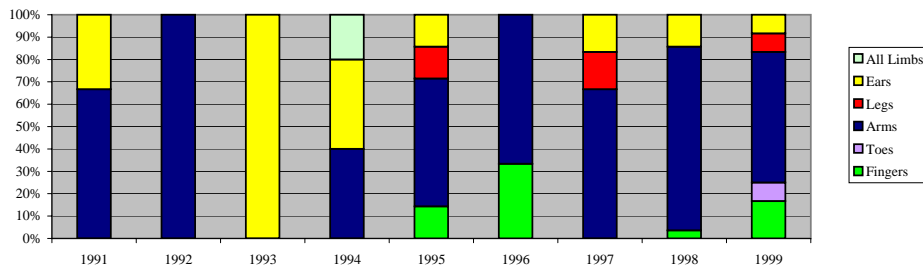
Type of Amp by Year/TRC Data Set



Type of Amputation by Perpetrator
UNAMSIL Data Set



Type of Amputation by Year
TRC Data Set



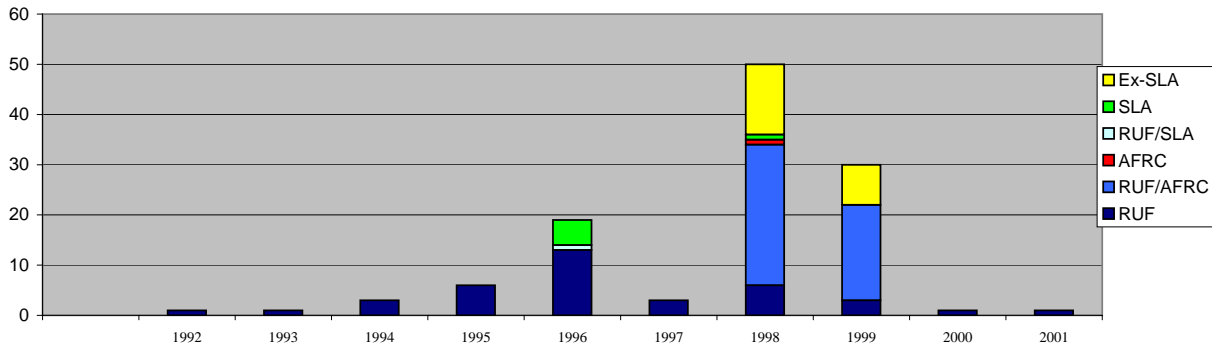
AMPUTATIONS BY PERPETRATOR BY YEAR/UNAMSIL

	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	ECOMOG
1992	1	0	0	0	0	0	0	0	0
1993	1	0	0	0	0	0	0	0	0
1994	3	0	0	0	0	0	0	0	0
1995	6	0	0	0	0	0	0	0	0
1996	13	0	0	1	5	0	0	0	0
1997	3	0	0	0	0	0	0	0	0
1998	6	28	1	0	1	14	0	0	0
1999	3	19	0	0	0	8	0	0	0
2000	1	0	0	0	0	0	0	0	0
2001	1	0	0	0	0	0	0	0	0

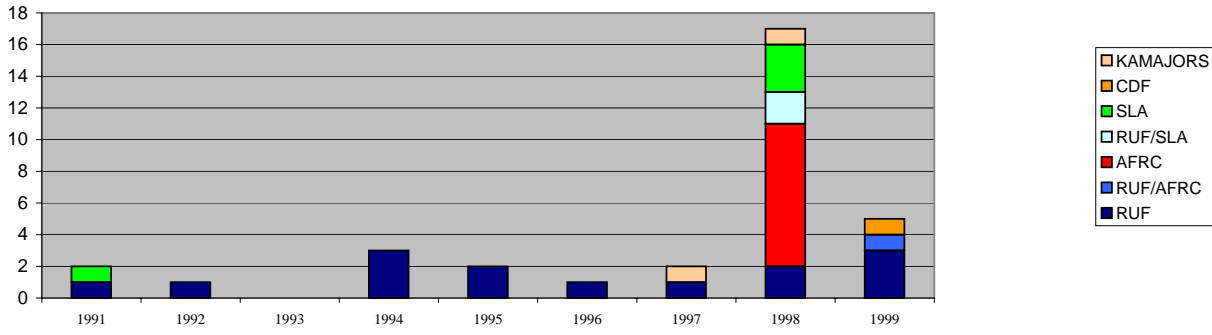
AMPUTATIONS BY PERPETRATOR BY YEAR/UNAMSIL

	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	ECOMOG
1991	1	0	0	0	1	0	0	0	0
1992	1	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0
1994	3	0	0	0	0	0	0	0	0
1995	2	0	0	0	0	0	0	0	0
1996	1	0	0	0	0	0	0	0	0
1997	1	0	0	0	0	0	0	1	0
1998	2	0	9	2	3	0	0	1	0
1999	3	1	0	0	0	0	1	0	0

Amps by Perpetrator by Year/UNAMSIL Data Set

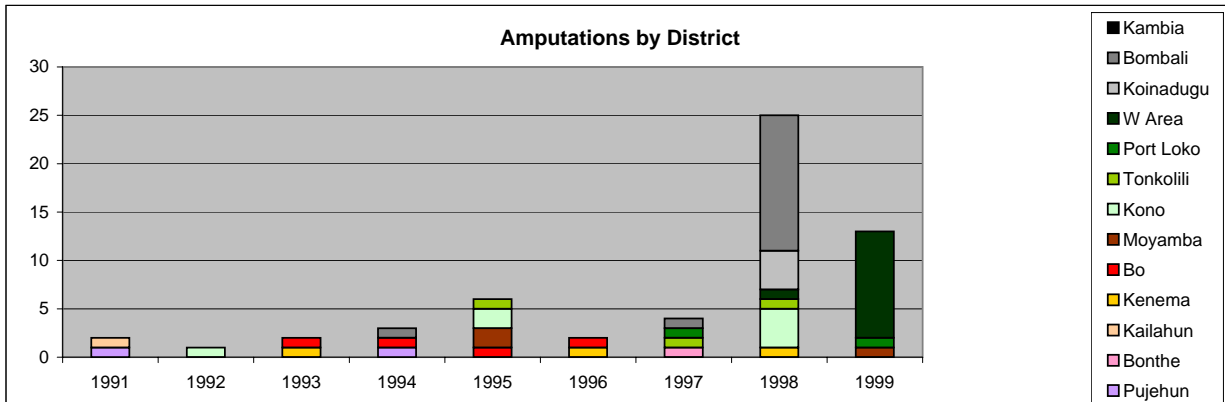
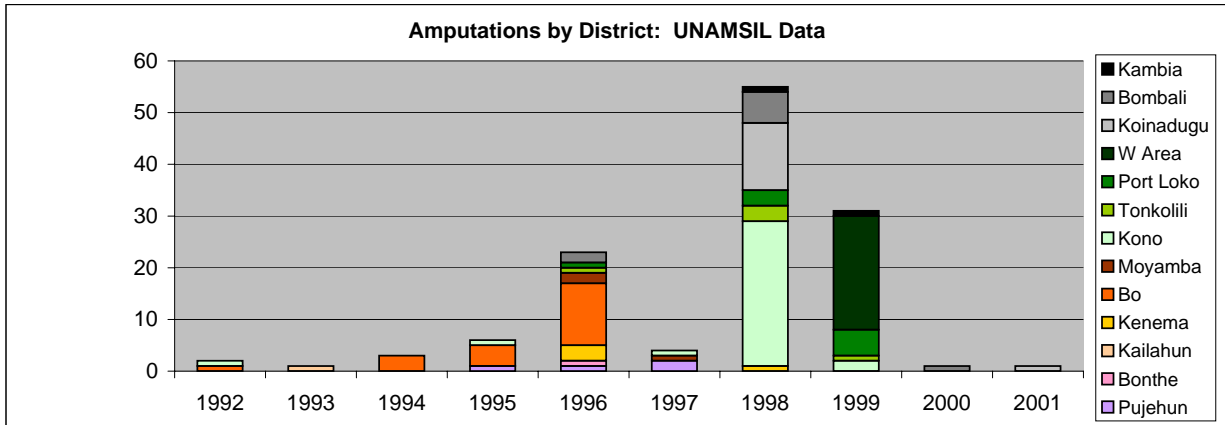


Amps by Perpetrator by Year/TRC Data Set



	Kambia	Bombali	Koinadugu	W Area	Port Loko	Tonkolili	Kono	Moyamba	Bo	Kenema	Kailahun	Bonthe	Pujehun
1992	0	0	0	0	0	0	0	1	0	1	0	0	0
1993	0	0	0	0	0	0	0	0	0	0	0	1	0
1994	0	0	0	0	0	0	0	0	0	3	0	0	0
1995	0	0	0	0	0	0	0	1	0	4	0	0	0
1996	0	2	0	0	1	1	0	0	2	12	3	0	1
1997	0	0	0	0	0	0	0	1	1	0	0	0	0
1998	1	6	13	0	3	3	28	0	0	0	1	0	0
1999	1	0	0	22	5	1	2	0	0	0	0	0	0
2000	0	1	0	0	0	0	0	0	0	0	0	0	0
2001	0	0	1	0	0	0	0	0	0	0	0	0	0

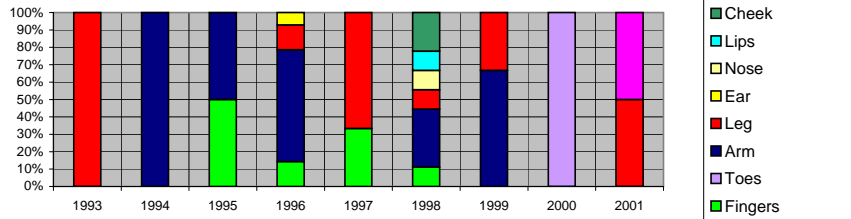
	Kambia	Bombali	Koinadugu	W Area	Port Loko	Tonkolili	Kono	Moyamba	Bo	Kenema	Kailahun	Bonthe	Pujehun
1991	0	0	0	0	0	0	0	0	0	0	0	1	0
1992	0	0	0	0	0	0	0	1	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	1	1	0	0
1994	0	1	0	0	0	0	0	0	0	1	0	0	0
1995	0	0	0	0	0	0	1	2	2	1	0	0	0
1996	0	0	0	0	0	0	0	0	0	1	1	0	0
1997	0	1	0	0	1	1	0	0	0	0	0	1	0
1998	0	14	4	1	0	1	4	0	0	0	1	0	0
1999	0	0	0	11	1	0	0	1	0	0	0	0	0



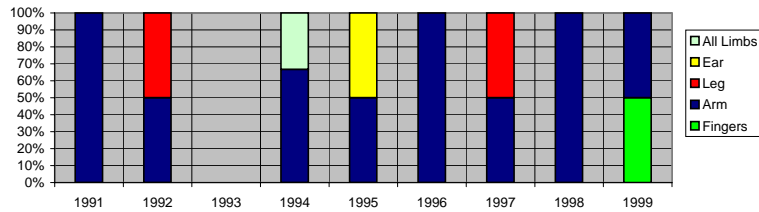
TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET										
	RUF									
	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	Achilles Tendons
1992	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	1	0	0	0	0	0	0
1994	0	0	2	0	0	0	0	0	0	0
1995	3	0	3	0	0	0	0	0	0	0
1996	2	0	9	2	1	0	0	0	0	0
1997	1	0	0	2	0	0	0	0	0	0
1998	1	0	3	1	0	1	1	0	2	0
1999	0	0	2	1	0	0	0	0	0	0
2000	0	1	0	0	0	0	0	0	0	0
2001	0	0	0	1	0	0	0	0	0	1

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET											
	RUF										
	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs	
1991	0	0	1	0	0	0	0	0	0	0	
1992	0	0	1	1	0	0	0	0	0	0	
1993	0	0	0	0	0	0	0	0	0	0	
1994	0	0	2	0	0	0	0	0	0	1	
1995	0	0	1	0	1	0	0	0	0	0	
1996	0	0	1	0	0	0	0	0	0	0	
1997	0	0	1	1	0	0	0	0	0	0	
1998	0	0	2	0	0	0	0	0	0	0	
1999	1	0	1	0	0	0	0	0	0	0	

Types of Amps by RUF
UNAMSIL Data Set



Types of Amps by RUF
TRC Data Set



TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

RUF/AFRC

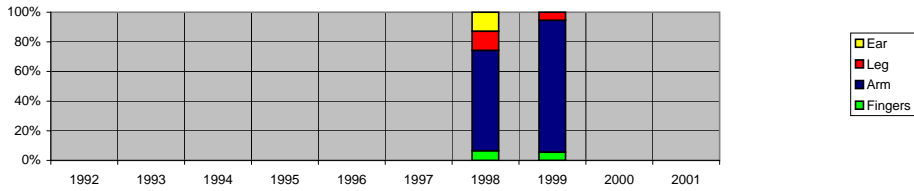
	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
1992	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0
1998	2	0	21	4	4	0	0	0	0
1999	1	0	16	1	0	0	0	0	0
2000	0	0	0	0	0	0	0	0	0
2001	0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

RUF/AFRC

	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
1991	0	0	0	0	0	0	0	0	0	0
1992	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0	0
1998	0	0	0	0	0	0	0	0	0	0
1999	0	0	1	0	0	0	0	0	0	0

Types of Amps by RUF/AFRC UNAMSIL Data Set



TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

AFRC

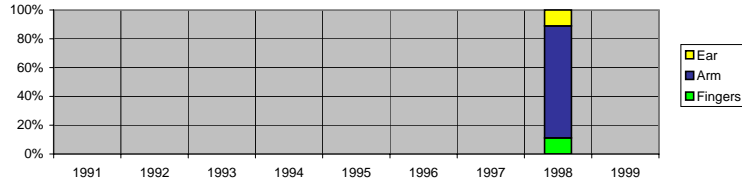
	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
1992	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0
1998	0	0	0	1	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0
2000	0	0	0	0	0	0	0	0	0
2001	0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

AFRC

	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
1991	0	0	0	0	0	0	0	0	0	0
1992	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0	0
1998	1	0	7	0	1	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0	0

Types of Amp by AFRC TRC Data Set



TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

RUF/SLA

	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
1992	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0
1996	1	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0
1998	0	0	0	0	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0
2000	0	0	0	0	0	0	0	0	0
2001	0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

RUF/SLA

	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
1991	0	0	0	0	0	0	0	0	0	0
1992	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0	0
1998	0	0	1	0	0	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

SLA

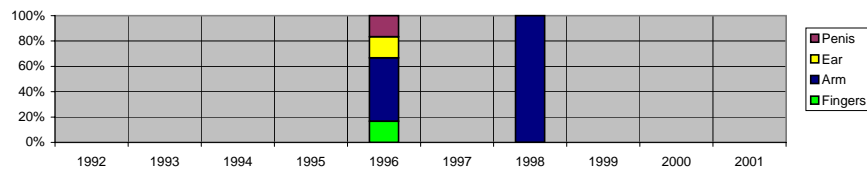
	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
1992	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0
1996	1	0	3	0	1	0	0	1	0
1997	0	0	0	0	0	0	0	0	0
1998	0	0	1	0	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0
2000	0	0	0	0	0	0	0	0	0
2001	0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

SLA

	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
1991	0	0	0	0	0	0	0	0	0	0
1992	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0	0
1998	0	0	1	0	0	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0	0

**Types of Amps by SLA
UNAMSIL Data Set**



TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

Ex-SLA

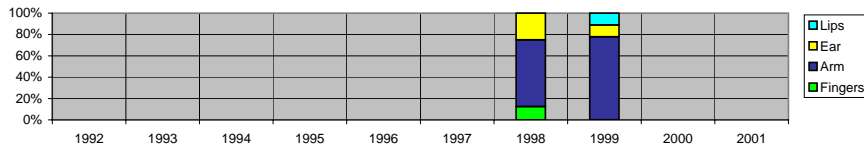
	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
1992	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0
1998	2	0	10	0	4	0	0	0	0
1999	0	0	7	0	1	0	1	0	0
2000	0	0	0	0	0	0	0	0	0
2001	0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

Ex-SLA

	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
1991	0	0	0	0	0	0	0	0	0	0
1992	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0	0
1998	0	0	0	0	0	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0	0

Types of Amps by Ex-SLA
UNAMSIL Data Set



TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

Kamajors/CDF

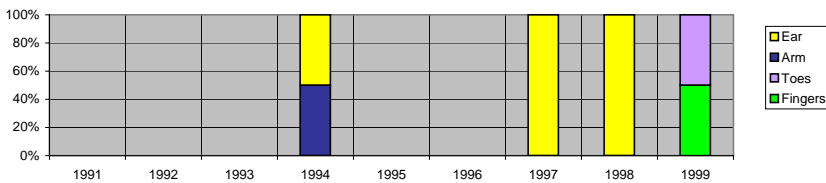
	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
1992	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0
1998	0	0	0	0	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0
2000	0	0	0	0	0	0	0	0	0
2001	0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

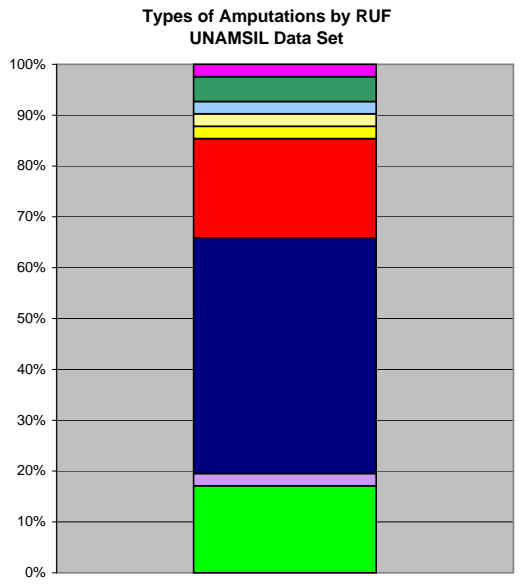
Kamajors/CDF

	Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
1991	0	0	0	0	0	0	0	0	0	0
1992	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	0
1994	0	0	1	0	1	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0	0
1996	0	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	1	0	0	0	0	0
1998	0	0	0	0	1	0	0	0	0	0
1999	1	1	0	0	0	0	0	0	0	0

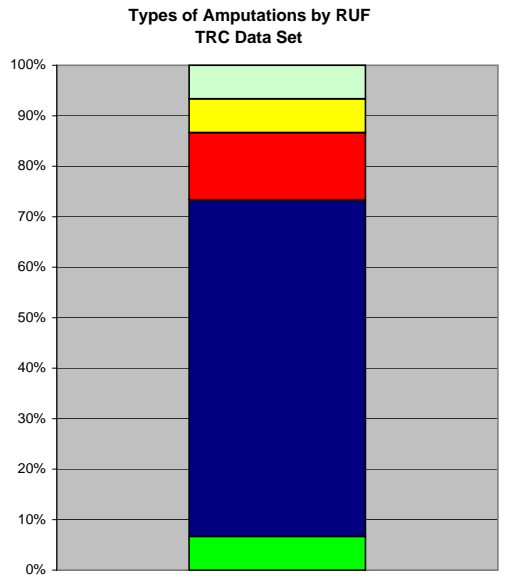
Types of Amps by Kamajors/CDF
TRC Data Set



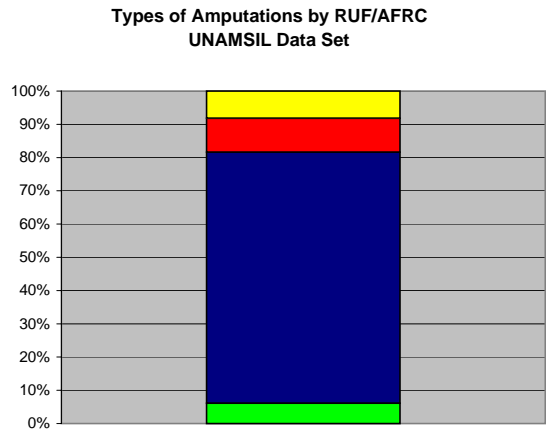
TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET
RUF
 Fingers Toes Arm Leg Ear Nose Lips Penis Cheek Achilles Tendons
 7 1 19 8 1 1 1 0 2 1



TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET
RUF
 Fingers Toes Arm Leg Ear Nose Lips Penis Cheek All Limbs
 1 0 10 2 1 0 0 0 0 1



TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET
RUF/AFRC
 Fingers Toes Arm Leg Ear Nose Lips Penis Cheek
 3 0 37 5 4 0 0 0 0



TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET
RUF/AFRC
 Fingers Toes Arm Leg Ear Nose Lips Penis Cheek All Limbs
 0 0 1 0 0 0 0 0 0 0



TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

AFRC

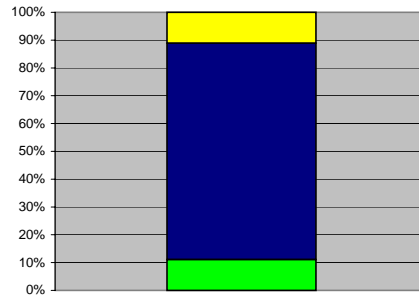
Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
0	0	0	1	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

AFRC

Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
1	0	7	0	1	0	0	0	0	0

Types of Amputations by AFRC/TRC Data Set

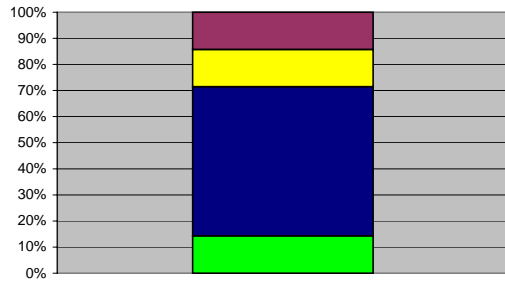


TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

SLA

Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
1	0	4	0	1	0	0	1	0

**Types of Amputations by SLA
UNAMSIL Data Set**



TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

SLA

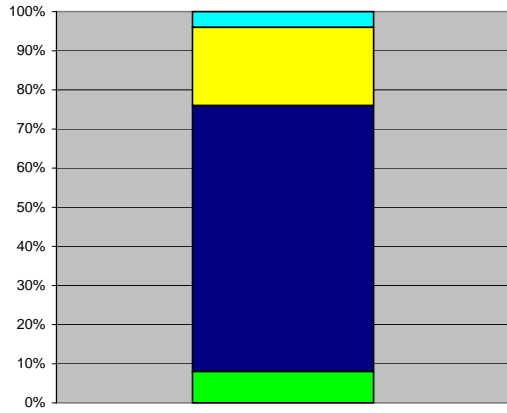
Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
0	0	1	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

Ex-SLA

Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
2	0	17	0	5	0	1	0	0

**Types of Amputations by Ex-SLA
UNAMSIL Data Set**



TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

Ex-SLA

Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
0	0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/UNAMSIL DATA SET

Kamajors/CDF

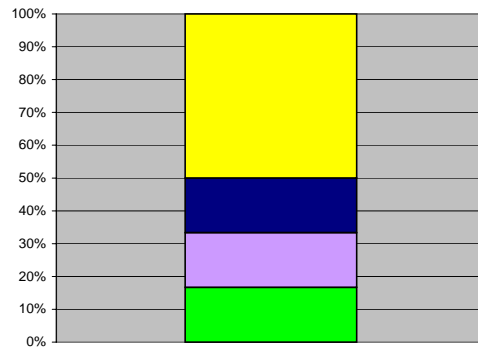
Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek
0	0	0	0	0	0	0	0	0

TYPES OF AMPUTATIONS BY PERPETRATOR/TRC DATA SET

Kamajors/CDF

Fingers	Toes	Arm	Leg	Ear	Nose	Lips	Penis	Cheek	All Limbs
1	1	1	0	3	0	0	0	0	0

**Types of Amputations by Kamajors/CDF
TRC Data Set**

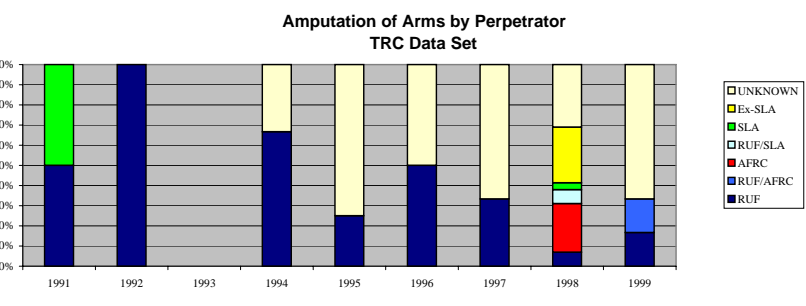
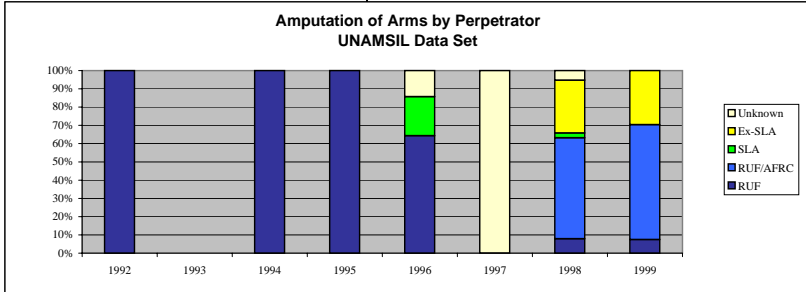


AMPUTATION OF ARMS BY PERP/UNAMSIL DATA SET

	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	Unknown
1992	1	0	0	0	0	0	0
1993	0	0	0	0	0	0	0
1994	2	0	0	0	0	0	0
1995	3	0	0	0	0	0	0
1996	9	0	0	0	3	0	2
1997	0	0	0	0	0	0	1
1998	3	21	0	0	1	11	2
1999	2	17	0	0	0	8	0
2000	0	0	0	0	0	0	0
2001	0	0	0	0	0	0	0

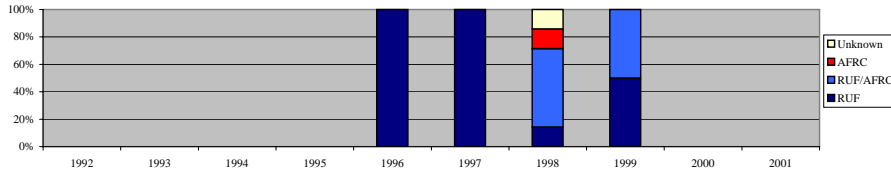
AMPUTATION OF ARMS BY PERP/TRC DATA SET

	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	UNKNOWN
1991	1	0	0	0	1	0	0	0	0
1992	1	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0
1994	2	0	0	0	0	0	0	0	1
1995	1	0	0	0	0	0	0	0	3
1996	1	0	0	0	0	0	0	0	1
1997	1	0	0	0	0	0	0	0	2
1998	2	0	7	2	1	8	0	0	9
1999	1	1	0	0	0	0	0	0	4



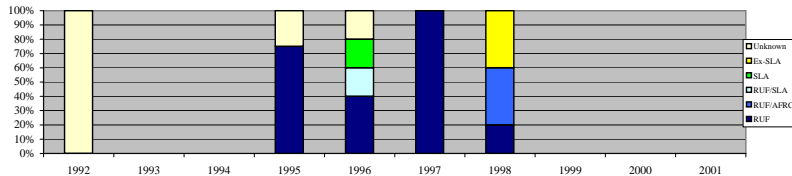
AMPUTATION OF LEGS BY PERP/UNAMSIL DATA SET								AMPUTATION OF LEGS BY PERP/TRC DATA SET									
	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	Unknown		RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	UNKNOWN
1992	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1995	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1996	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
1997	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1998	1	4	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0
1999	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2000	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2001	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Amputation of Legs by Perpetrator
UNAMSIL Data Set

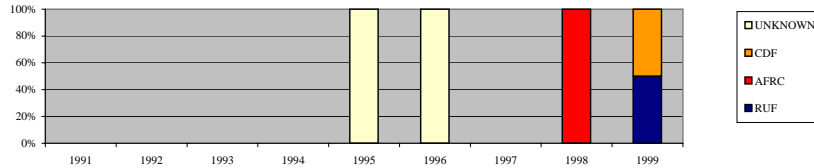


AMPUTATION OF FINGERS BY PERP/UNAMSIL DATA SET								AMPUTATION OF FINGERS BY PERP/TRC DATA SET									
	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	Unknown		RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	UNKNOWN
1992	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
1993	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1995	3	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
1996	2	0	0	1	1	0	1	0	0	0	0	0	0	0	0	0	1
1997	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
1998	1	2	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0
1999	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
2000	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0
2001	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

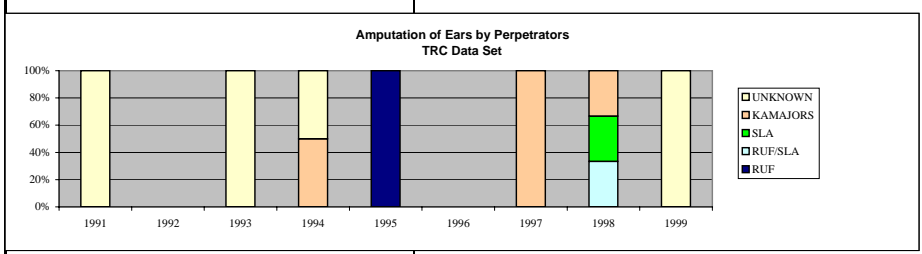
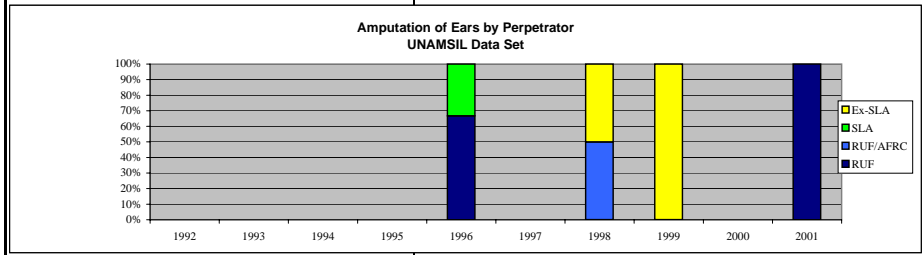
Amputation of Fingers by Perpetrator
UNAMSIL Data Set



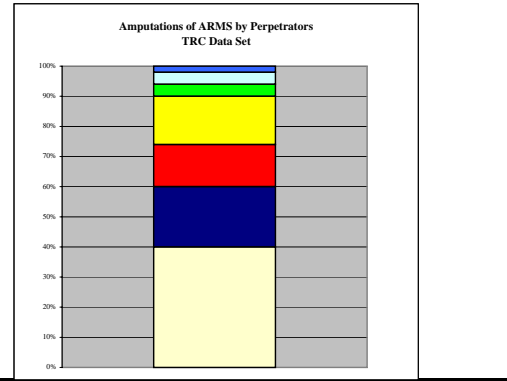
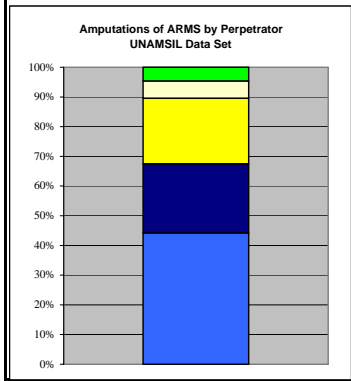
Amputation of Fingers by Perpetrator
TRC Data Set



AMPUTATION OF EARS BY PERP/UNAMSIL DATA SET								AMPUTATION OF EARS BY PERP/TRC DATA SET										
	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	Unknown		RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	UNKNOWN	
1992	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
1993	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1994	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
1995	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
1996	2	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0
1997	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1998	0	4	0	0	0	0	4	0	0	0	0	0	0	0	0	1	0	0
1999	0	0	0	0	0	0	1	0	0	0	0	1	1	0	0	1	1	0
2000	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
2001	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1



AMPUTATION OF ARMS BY PERP/UNAMSIL DATA SET								AMPUTATION OF ARMS BY PERP/TRC DATA SET									
	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	Unknown	#s	RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	UNKNOWN
	20	38	0	0	4	19	5		10	1	7	2	2	8	0	0	20

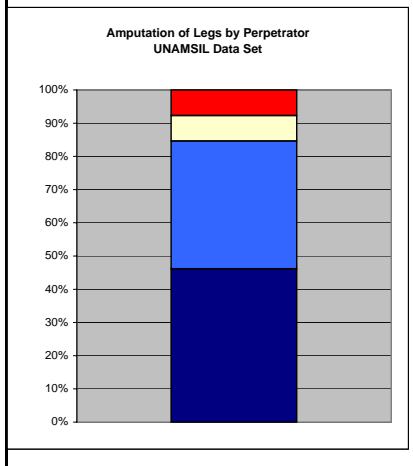


AMPUTATION OF LEGS BY PERP/UNAMSIL DATA SET

RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	Unknown
6	5	1	0	0	0	1

AMPUTATION OF LEGS BY PERP/TRC DATA SET

RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	UNKNOWN
0	0	0	0	0	0	0	0	1

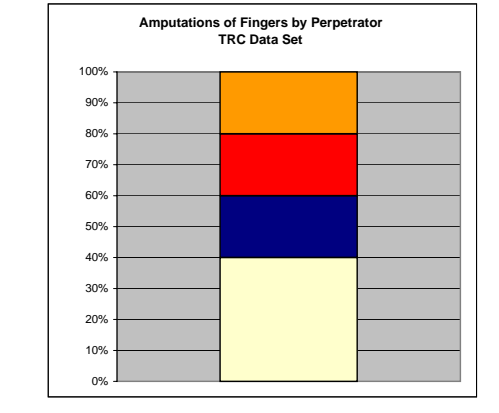
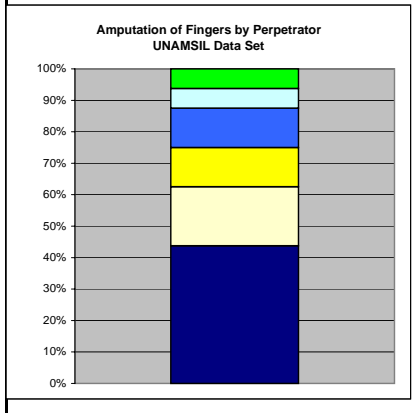


AMPUTATION OF FINGERS BY PERP/UNAMSIL DATA SET

RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	Unknown
7	2	0	1	1	2	3

AMPUTATION OF FINGERS BY PERP/TRC DATA SET

RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	UNKNOWN
1	0	1	0	0	0	1	0	2



AMPUTATION OF EARS BY PERP/UNAMSIL DATA SET

RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	Unknown
3	4	0	0	1	5	0

AMPUTATION OF EARS BY PERP/TRC DATA SET

RUF	RUF/AFRC	AFRC	RUF/SLA	SLA	Ex-SLA	CDF	KAMAJORS	UNKNOWN
1	0	0	1	1	0	0	3	5

