

UNCLASSIFIED UNITED STATES CENTRAL COMMAND

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SUBJECT: Summary of the Airstrike on the MSF Trauma Center in Kunduz, Afghanistan on October 3, 2015; Investigation and Follow-on Actions

The U.S. Central Command extends its deepest condolences to those injured and to the families of those killed in this tragic incident. We are fully committed to learning from this tragedy and minimizing the risk of civilian casualties during future combat operations. This document includes a summary of the investigation and key follow-on actions by senior commanders, and reflects our commitment to transparency and improvement.

THE INVESTIGATION:

On Oct. 3, 2015, members of U.S. Forces-Afghanistan (USFOR-A) supporting a partnered Afghan force, conducted a combat operation th a struck a Trauma Center in Kunduz operated by Médecins Sans Frontières (MSF), also kno in as "Doctors without Borders."

U.S. Army Gen. John Campbell, then the Commande of USFOR-A, directed an investigation to determine the cause of this incident. The lead investigating officer was Army Maj. Gen. William Hickman. He was assister by Air Force Brig. Gen. Robert Armfield and Army Brig. Gen Sean Jenkins. All three generals were brought in from outside Afghanistan in order to provide an objective perspective. The investigation team included over a dozen subject mat er exp. rts from several specialty fields.

The investigative team visited the MSF Trauma Center site and several other locations in the city of Kunduz. The team interviewed more than 65 witnesses including personnel at the Trauma Center, members of U.S. and Afghan ground forces, members of the aircrew, and representatives at every echelon of command in Afghanistan. The team had full access to classified information, and the investigation includes more than 3,000 pages of documentary evidence, much of it classified. Gen. Campbell approved the investigation on Nov. 21, 2015.

GENERAL SUMMARY:

The investigation concluded that the personnel involved did not know that they were striking a medical facility. The intended target was an insurgent-controlled site which was approximately 400 meters away from the MSF Trauma Center. The investigation found that an AC-130U Gunship aircrew, in support of a U.S. Special Forces element that was supporting a partnered Afghan ground force, misidentified and struck the MSF Trauma Center. The investigation determined that all members of both the ground force and the AC-130U aircrew were unaware the aircrew was firing on a medical facility throughout the engagement.

The comprehensive investigation concluded that this tragic incident was caused by a combination of human errors, compounded by process and equipment failures. Fatigue

and high operational tempo also contributed to the incident. These factors contributed to the "fog of war," which is the uncertainty often encountered during combat operations. The investigation found that this combination of factors caused both the Ground Force Commander and the air crew to believe mistakenly that the air crew was firing on the intended target, an insurgent-controlled site approximately 400 meters away from the MSF Trauma Center.

The Commander of USFOR-A concluded that certain personnel failed to comply with the rules of engagement and the law of armed conflict. However, the investigation did not conclude that these failures amounted to a war crime. The label "war crimes" is typically reserved for *intentional* acts -- *intentionally* targeting civilians or *intentionally* targeting protected objects. The investigation found that the tragic incident resulted from a combination of unintentional human errors and equipment failures, and that none of the personnel knew that they were striking a medical facility.

DETAILED SUMMARY:

On Sep. 30, 2015, Afghan forces and a small element of .S. Sper al Forces attempted to re-take the City of Kunduz, which had been seized by the Taliban. The U.S. and Afghan forces established a small base on an Afghan Police compound in Kunduz and repelled several Taliban attacks between Sep. 30 and Oct. 2. The U.S. Special Forces element on the ground had been engaged in heavy fighting for nearly five consecutive days and nights at the time of the airstrike on Oct. 3.

On the night of Oct. 2, 2015, the Afghan forces c' cided to attack an insurgent-controlled site, and requested air support from the U.S. Special Forces element on the ground. An AC-130U Gunship was directed to provide the requested support. The AC-130 launched from its airfield in Afghanistan 69 minutes earlier than the crew had originally planned due to an emergency call, so they did not get all the information they would normally have received before a mission. While enroute to Kunduz, one of the AC-130's critical communications systems failed, resulting in an inability to receive updates from and transmit information to multiple command headquarters. Additionally, after arriving in the operating area, due to significant threats to aircraft in Kunduz, the AC-130 took defensive measures that degraded its ability to locate ground targets. These factors all contributed to the incident.

When the aircrew arrived near Kunduz in the early morning on Oct. 3, 2015, they attempted to locate the Taliban-controlled target site. The Afghan forces provided the correct grid coordinates for the target site to the U.S. Special Forces commander on the ground, who then relayed them to the aircrew through a Joint Terminal Attack Controller (JTAC). Due to distance of the aircraft from the location at issue, the aircrew was initially unable to locate the target structure. When the grid coordinates were entered, the system directed the aircrew to an open field. The aircrew then attempted to visually identify the target structure based on a description relayed from the Afghan forces through the JTAC. Based on this discussion over communications systems, the aircrew identified a structure that they believed to be the Taliban-controlled target structure, but was actually the MSF Trauma Center. Before the engagement, one aircrew member, the TV Sensor Operator, identified the correct structure as possibly fitting the described target. However, following several attempts to clarify which structure was the actual target requested by the Ground

Force Commander and the JTAC, the aircraft's weapons systems were redirected to the originally viewed structure (MSF Trauma Center). The MSF Trauma Center generally matched the general physical description of the Taliban-controlled target structure which was approximately 400 meters away.

The investigation identified several human errors by the aircrew and ground personnel that contributed to this tragic incident, including poor communication, coordination, and situational awareness. The investigation confirmed that MSF officials provided the correct grid coordinates for the MSF Trauma Center to several U.S. government officials and that the location was properly entered on the U.S. military's "No Strike List" database, but that the aircrew did not have ready access to this database during the strike. The investigation also concluded that the MSF Trauma Center did not have an internationally-recognized symbol to identify it as a medical facility, such as a Red Cr _s o, Red Crescent that was readily visible to the aircrew at night. Throughout the course of the engagement, all members of the ground force and the aircrew were unaware the aircrew was firing on a medical facility and mistakenly believed that it was firing on the intended target, an insurgent-controlled structure approximately 400 meters away from the MSF Trauma Center.

At approximately 2:08 a.m. local time on Oct 3, 2015, the aircrew began firing on the MSF Trauma Center under the mistaken belief that it was the Taliban-controlled target compound. Starting at approximately 2:19 a.m. M. pr sonnel notified several U.S. government representatives that the MSF Trauma Center was being engaged. Due to the fighting around Kunduz, it was initially unclear who was engaging the MSF Trauma Center. Following a series of relayed messages through multiple echelons of command, the U.S. Special Forces commander on the ground eventually realized that the AC-130 was engaging the MSF Trauma Center – not the Taliban-controlled structure the crew believed it was engaging – and halted thr strike at approximately 2:38 a.m. The investigation determined that the steps taken by several U.S. military personnel during this period were inadequate. The investigation found that the airstrike resulted in at least 30 deaths and 37 injuries at the MSF Trauma Center. Since the investigation was completed, MSF has increased the number of reported casualties to 42 deaths and 229 other claims. The U.S. Government has relied primarily upon MSF for casualty estimates, and these numbers have not been independently verified.

The investigation identified 16 U.S. servicemembers whose conduct warranted consideration for appropriate administrative or disciplinary action. The Commander of U.S. Forces-Afghanistan concluded that certain personnel failed to comply with the law of armed conflict and rules of engagement. However, he did not conclude that these failures amounted to a war crime. The label "war crimes" is typically reserved for *intentional* acts - *intentionally* targeting civilians or *intentionally* targeting protected objects.

The comprehensive investigation concluded that this tragic incident was caused by a combination of human errors, compounded by process and equipment failures. The investigation found that this combination of factors caused both the Ground Force Commander and the air crew to believe mistakenly that the air crew was firing on the intended target, which was an insurgent-controlled site approximately 400 meters away from the MSF Trauma Center.

FOLLOW-ON ACTIONS:

Release of the Investigation. Gen. Campbell, then the Commander of U.S. Forces-Afghanistan, approved the investigation on Nov. 21, 2015 and announced the key findings at a press conference on Nov. 25, 2015. The written report contains over 3,000 pages of documentary evidence, much of it classified. The extensive report was subjected to comprehensive reviews before the public release in order to ensure that classified information, protected personally identifying information (including the names of the servicemembers involved), and other non-releasable information remains protected.

Military Personnel Accountability Actions:

- The investigation identified sixteen U.S. servicemembers whose conduct warranted consideration for appropriate administrative or disciplinary action, including a general officer. Gen. Campbell took the action he deemed appropriate regarding twelve of the sixteen personnel involved in this tragic incident who were in Afghanistan, including the general officer. The actions included suspension and removal from command, letters of reprimand, formal counseling, and extensive retraining. Five personnel involved were directed out of theater.
- Gen. Campbell also forwarded the investigation to Gen. Joseph Votel, then the Commander of the U.S. Special Operatior's Command, to consider action regarding the five personnel who had returned to the United States. These five personnel included the officer who Gen. Campbell removed from command and ordered out of Afghanistan. Gen. Votel took action with respect to four of these five personnel, including four letters of reprimand and admonishment, and boards to evaluate the flight certification of three aircrew members. Gen. Votel referred the fifth servicemember to the Commander of the U.S. Army Special Operations Command, who issued a written reprimand and directed recertification in the servicemember's job specialty.
- These senior military commanders had extensive experience with the Uniform Code of Military Justice and were supported by experienced military lawyers. In light of the report's conclusion that the errors were unintentional, and after considering other mitigating factors, such as equipment failures, that affected the combat mission, those senior commanders decided administrative measures were appropriate to address the errors made by the service members.
- Some actions taken in these cases may have severe repercussions on the
 individual's career. For example, receipt of a reprimand can limit an officer's
 potential for career advancement. Also, further action can be taken by the Service
 that can impact an individual's career including denial of promotion and
 separation from the Service.

<u>Operational Improvements</u>: Gen. Campbell directed a series of actions to improve operations in Afghanistan as a result of this incident:

- Gen. Campbell issued an order to conduct supplemental training on the applicable authorities framework, rules of engagement, and the Commander's tactical guidance, all of which were designed to minimize the risks that a tragedy like this would occur. This training was delivered to over 9,000 personnel and completed in Nov. 2015.
- Gen. Campbell directed a comprehensive review of the targeting process and published an order reinforcing the application of the NSL, including use of the U.S. Central Command-maintained NSL database.
- Coordinates for MSF and similar facilities in Afghanistan were verified. Aircraft systems are now pre-loaded with key information -- including the NSL database -to minimize the reliance on post-launch communications.
- Gen. Campbell issued a revised "Tactical Directive" and "Targeting Standard Operating Procedure" for U.S. Forces-Afghanistan. These classified documents emphasize tactical procedures to minimize the risk to civilians and civilian sites.
- The U.S. Forces-Afghanistan provided MSF leadership with detailed information to facilitate direct contact with the U.S. Forces-Afghanistan Command Center.

<u>Engagements</u>: Senior U.S. representatives have spoken with MSF officials, including the MSF Executive Director, over two dozen t mes to express condolences, explain how the tragic incident occurred, and outline future steps.

<u>Condolence Payments</u>: U.S. Forces Afghanistan leaders have offered their sympathies and provided condolence payments to more than 170 individuals and families affected by this tragedy.

Medical Capability: The Department of Defense has approved \$5.7 million in funds to reconstruct the facility that MSF was using and is working closely with the Afghan government, which owns it, to return the building to its previous condition and help restore a medical capability for the residents of Kunduz.