



Cluster munitions – a public health history

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For more than 30 years there have been international efforts to prohibit or control the use of cluster munitions. In early 2007 a group of 46 countries, including the UK, signed a declaration in Oslo that they would agree a legally binding instrument, by 2008, to “prohibit the use, production, stockpiling and transfer of cluster munitions that cause unacceptable harm to civilians.” In this context, our paper provides an overview of the health impact of cluster munitions and looks at how the UK government, one of the world’s leading users of these weapons, has analysed these problems in forming relevant policy.

Definition

Cluster munitions are containers, which may be fired from the ground or dropped from aircraft, and which open to disperse multiple (02-600+) explosive “submunitions” over a target area. The “submunitions” are usually designed to explode on impact.

Problems caused¹

Over the last 30 years, cluster munitions have been subject to two particular criticisms:

- They are indiscriminate within a wide area at the time of use – meaning that they harm civilians and combatants alike if used in areas where civilians may be present.
- They leave large quantities of unexploded “duds” contaminating areas where they have been used – these unexploded items kill and injure civilians for years after the conflict.

Some 20 countries have seen cluster munition use on their territory. It is estimated that billions of submunitions are held in stockpiles by some 75 countries

Handicap International, in a review of data held internationally, have been able to identify 10,000 people confirmed as killed and injured by cluster munitions; based on the shortcomings they perceive in the data they project an actual figure closer to 100,000. The full scale of harm caused by the historical use of these weapons has not been reached. For example, in South East Asia more than a hundred people continue to be killed and injured each year as a result of cluster munition use that ended more than 30 years ago.

It is significant that the only substantial attempts to analyse or quantify the civilian harm caused by these weapons have come from non-governmental and international organisations. Major user-states, such as the UK, USA, Russia have made no such efforts.

Common injuries include massive traumatic amputation, puncture wounds and burns. Cluster munition accidents often involve multiple casualties (because the fragmentation causes injuries at some distance from the point of detonation) and the person initiating the explosion is significantly more likely to be killed than is the case with anti-personnel mine accidents.

¹ For additional information on the problems caused by cluster munitions and data referred to here see Landmine Action (2006), *Failure to Protect: a case for the prohibition of cluster munitions*, London; Human Rights Watch (2007), *Survey of Cluster Munitions Produced and Stockpiled: Briefing Paper Prepared for the ICRC Experts Meeting on Cluster Munitions*, available online: <http://hrw.org/backgrounders/arms/cluster0407/>; Handicap International (2006), *Fatal Footprint: The Global Human Impact of Cluster Munitions*, available online at: www.stopclustermunitions.org/files/Fatal_Footprint_FINAL.pdf

Fear of cluster munition contamination can also stop people from using fields or accessing community resources.

UK Government: balancing the risks to civilians

The UK dropped some 78,000 submunitions during the 1999 bombing of Yugoslavia and used over 100,000 submunitions during the 2003 invasion of Iraq. In response to the consistent concerns raised about these weapons from humanitarian organisations, UK Government Ministers asserted that “the right balance had been struck” between risk to civilians and “protection of coalition forces.”

However, this “balancing” of risks was revealed to be flawed because:

- The UK Government had undertaken no assessment of the likely or actual risk to civilians.
- It had been selective in citing data and had sought to discredit information presented by others despite having no data of its own.
- It had ignored what evidence there was from actual operations in favour of citing data from manufacturers or from tests conducted in ideal conditions.
- UK Government officials only ever described the military utility of these weapons in extremely positive terms, despite internal criticism.
- Although the UK has asserted that pilots using cluster bombs in Kosovo and Iraq factored the likely risk of unexploded items into their targeting decisions (as part of the “proportionality” assessment required under international humanitarian law) the Ministry of Defence cannot explain *how* pilots did this and says there is no evidence that demonstrates that they did do this.

These accumulated failings indicated that the “balancing” of risks undertaken by the UK Government (if it could really be considered to have happened at all) had been prejudiced against civilian protection.²

UK Government: policy changes in 2007

In March 2007, the UK announced that it would be taking out of service what it calls “dumb” cluster munitions. This has resulted in the removal from service of a significant number of old submunitions which were nearing the end of their shelf-lives and were scheduled anyway for withdrawal.

In announcing this policy the UK Secretary of State for Defence stated that:

“the types of cluster munitions that we intend to retain are legitimate weapons with significant military value which, as a result of mitigating features, is not outweighed by humanitarian factors”³

However, these same munitions were amongst those used by Israel in Lebanon in 2006 and they are documented as causing contamination there despite the self-destruct mechanisms that the UK hopes will “mitigate” the civilian harm.⁴

² See Dr Brian Rappert (2005), *Out of Balance: The UK Government’s efforts to understand cluster munitions and international humanitarian law*, Landmine Action, London.

³ Secretary of State for Defence, Des Browne, MoD news release online at <http://www.mod.uk/DefenceInternet/DefenceNews/EquipmentAndLogistics/UkBecomesFirstMajorPowerToScrapDumbClusterMunitions.htm>

⁴ See for example, Landmine Action (2006), *Foreseeable Harm: cluster munitions in Lebanon 2006*, and film of M85 submunition contamination available on YouTube: http://www.youtube.com/results?search_query=M85+cluster&search=Search

In relation to this statement it should be noted that:

- The UK has produced no evidence that these or any other of its cluster munitions are of “significant military value” – all they offer is vague hypothetical claims.
- The UK has not assessed the performance of these “mitigating features” in actual combat operations and has relied on tests that make no effort to replicate actual combat conditions.
- The UK has still not undertaken any evidence-based assessment of the “humanitarian factors” associated with the use of these weapons either by itself or by others.

Given these considerations it seems that UK policy is still being made without a base in evidence and without sufficient consideration for the risks presented to civilians.

Comment: assessing the health risks of technologies

Weapons are technologies that can serve particular functions, but that can also produce unwanted outcomes – not least for civilian populations amongst whom these weapons are being used. Analytical models for assessing specific technologies have been developed and are utilised in the sphere of public health. However, when the people put at risk are foreign civilians, Government officials seem happy to develop policy without any explicit or transparent process, and without any substantive evidence.