Original Article

# Increasing Tendency of Suicide Terrorist Attacks in Pakistan

**1.Naseer Ahmed Sheikh 2. Muhammad Hanif 3. Naveed Ahmed Khan 4. Abdul Hamid**

1. Asstt. Prof. of Forensic Medicine, AJK Medical College Muzaffarabad 2. Asstt. Prof. of Forensic Medicine, FUMC, Rawalpindi 3. Asstt. Prof. of Forensic Medicine, AJK Medical College Muzaffarabad 4. Asstt. Prof. of Forensic Medicine, FMC Abbottabad.

## ABSTRACT

**Purpose of Study:** The main focus of studying suicide terrorist attacks in Pakistan was to assess the damages produced by these attacks and to study various factors which stimulate the attackers not only to blow themselves but also to take lives of many innocent peoples who are not involved in any activity provoking for these attacks.

**Objective:** To study the increasing tendency of suicide terrorist attacks in Pakistan with reference to various factors involved in the issue.

**Study Design:** Data is based on different sources and personal study of some of the cases which were visited for forensic examination.

**Place and Duration of Study:** This study was conducted at Rawalpindi, Islamabad and Muzaffarabad Azad Kashmir. The duration of study was from 2005 to 2011.

**Materials and Methods:** The data was collected from different sources and by personal study.

**Results:-**Increasing tendency of suicide terrorist attacks in Pakistan and their outcome is shown in tables 1& 2.

**Conclusion:-** Tendency of suicide terrorist attacks in Pakistan is increasing day by day with the involvement of external factors.

**Key Words:** Suicide, Terrorist attacks, Blast injuries, Explosive material, Extremist,

## INTRODUCTION

In a suicide terrorist attack a terrorist carrying explosive material blows himself on a target to cause maximum number of deaths and serious bodily injuries to the victims and thus creating panic. These attacks are called suicide because the attackers use the means which inevitably bring about the end of their own lives, and as these attacks are intended to cause the deaths of other persons therefore, they are also rightly given the name as homicide attacks.

The suicide terrorist attacks are the ugliest and the most terrifying form of terrorism in Pakistan. During the study of the project, it was noticed that from 2005 to 2011, Pakistan has witnessed some of the worst blood sheds due to suicide attacks in the country. Moreover, it is regretting and condemning that the most of the attacks were targeted against the innocent civilians at busy places like markets, schools, mosques, shrines and funeral prayers. Some of these were targeted on army centres, police training centres and police stations.

The act of giving one's own life and at the same time taking the lives of many other innocent noncombatant persons is a very difficult task therefore; there must be certain factors which compel the suiciders to do such brutal and inhuman acts. It is quite obvious that the main evil culprit for provoking the religious extremist groups to conduct suicide attacks are the anti Islamic bad policies of Western countries and their wish to become dominant over the world. These policies have developed hatred particularly in the religious extremist warring groups. It was in the reaction of US invasion in Iraq and Afghanistan that the religious insurgent elements carried out the wave of suicide attacks in the region.

As regards Pakistan, the turning points were obviously the involvement of foreign agencies in our internal affairs, operation in Lal Masjid Islamabad, military operation in tribal areas and drone attacks in Pakistan. The religious warrior groups overtone to martyrdom and having belief that their sacrifices will be rewarded in the afterlife, designed the suicide attacks.

Terrorists usually use whatever is available to improvise explosive devices. The most commonly used materials are commercial gelatin, sugar sodium chlorate mixture, Nitro Gricol, Nitro cellulose, Nitro Naphthalene, Ammonium Nitrate, Fuel Nitrate oil, detonators and shrapnel. Different approaches are utilized in assembling the devices. The container may be of any material such as plastic, glass bottles, metallic pipes or cylinders which can be made airtight. The explosive material is either used in vests or in belts and the detonating device is operated by switching on the fuse. In another way a vehicle with explosive material is hit on the target.

Outcome of suicide blasts depends on various factors like physical characteristics of explosive material, distance of victim from point of detonation, surrounding environment and other environmental hazards. There are four basic ways in which the injuries are caused to the victims which are, injuries due to primary, secondary, tertiary and miscellaneous effects. A person can be injured in a terrorist blast in the following ways:

(i). When he is wearing explosive material and is in direct contact with the material then his body is blown to pieces which are dispersed in all directions to hundreds of yards. The head, face and lower limbs are usually found from the scene while the rest of the body is blown away to pieces.

**Suicide Blast**

(ii) The persons who are very close to the point of detonation receive multiple mixed fatal injuries due to pressure waves, vaccum waves, hot gases, fumes and splinters. Persons in this region receive severe extensive injuries and the most of the fatalities occur in this region. The specific injuries in this region are due to propagation of shock waves through the body. Transit of these waves through lungs can cause tear of alveolar septa, development of alveolar hemorrhages, pulmonary edema, respiratory distress and bronchopneumonia. This effect of lung injury is called "blast lung." Middle ear is also susceptible to be damaged resulting into deafness.

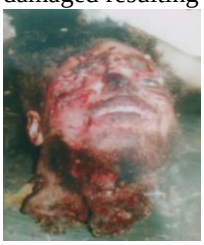

**Figure 1**

**Figure 2**

**Figure 3**

**Figure 1 & 2 =** Heads and faces of terrorists who were wearing vests with blast material and who blew themselves on the target at Muzaffarabad.

**Figure 3=** body of a severely injured person who was in close range of blast.

# MATERIAL AND METHODS

The field of study of suicide terrorist attacks in Pakistan was selected for the period from 2005 to 2011. The data was collected from police department, Bomb Disposal Squad Department, Newspapers, Internet and self visit to some of the cases as a Forensic expert.

# RESULTS

The intensity of suicide attacks in Pakistan has been progressively increasing in number and ferocity by the passage of time due to increase in the intensity of factors involved.

The following table will show year wise number of attacks and causalities from 2005 to 2011.

**Table No.1: show year wise number of attacks and causalities from 2005 to 2011**

| Sr.No. | Year | No. of Attacks | Deaths | Injured |
|---|---|---|---|---|
| 1. | 2005 | 12 | 140 | 320 |
| 2. | 2006 | 18 | 280 | 600 |
| 3. | 2007 | 22 | 350 | 780 |
| 4. | 2008 | 36 | 560 | 1230 |
| 5. | 2009 | 86 | 1220 | 2350 |
| 6. | 2010 | 52 | 1230 | 2160 |
| 7. | 2011 | 25 | 450 | 560 |
| | **Total** | **251** | **4230** | **8000** |

From the view of the above table it is obvious that the number of attacks have progressively increased as a result, the damages were also proportionately heavy with the passage of time.

Depending upon various factors, the injuries produced in a terrorist explosive attack are tabulated as below:

**Table No.2: Range with affected injuries and body parts involved**

| Range | Affected Injuries | Body Parts involved |
|---|---|---|
| Blast Contact | Parts blown to pieces & dispersed in an area of about hundred yards. | Those parts of the body which are in direct contact with the blast material. |
| Persons in very close range | Bodies are usually mutilated and receive mixed injuries i.e. burns, penetrating injuries, fractures, amputations and blast wave injuries. | Those parts of the body which are at the level of blasted material. |
| Persons at near range | Penetrating ballistic and blunt injuries. | Any part of the body |
| Persons at a distance from 10 to 50 yards | Few mixed penetrating and blunt injuries. | Any part of the body |
| Explosion related disease | Illnesses or diseases from complications of existing conditions for example Shock, Angina, Hyper Tension, COPD or other breathing problems for sudden fright, smoke, toxic fumes and dust. | Internal systems of the body. |

# DISCUSSION

Suicide bombing became a tool of revenge or terrorism about one century ago. The act of self sacrifice during combat appeared in large scale at the end of World War II when the defeated desperate Japanese Kamikaze bombers used to blow the explosive laden aircrafts at the targets. Later on the technique of suicide attacks was used as a military tactic aimed at causing material damage.

In 1972 Japanese Red Army (JRA), a terrorist organization and the popular front for liberation of Palestine (PFLP) conducted suicide operations in Israel. The members of JRA became the instructors of suicide explosive operations and established several training camps in Middle East.

The first modern suicide bombing was conducted in 1981 by Tamal Tigers in Sri Lanka who perfected the tactic and inspired its use elsewhere. Since then this practice has spread to dozens of countries. The hard hit areas are Sri Lanka, Lebanon, Israel, Chechnia, Afghanistan, Iraq & Pakistan.

The number of suicide attacks in the world has been growing continuously since 1980. In 1980 there were about 5 attacks in one year. In 2000 the number increased to 80 per year whereas in 2005 it grew to 460. Since 2005 Pakistan is being facing the worst of these suicide terrorist attacks. The most terrifying thing is that the attacks are being made in the busy public places killing thousands innocent persons. The matter which makes us more grieved and depressed is that the foreign agencies are providing frame work for these attacks and the sufferers are innocent Muslims. The attackers are facilitated and are backed by foreign agencies and the people who become the target are mostly innocent.

**Medico legal aspects:** The distribution of injures often helps to determine relationship of the victim to explosion. When pieces of multiple mutilated bodies are found then there is a problem concerning the number and identification of the victims. When portions of the bodies are recovered then the pieces must be carefully examined. The parts which can help in establishing the number of victims must be set aside. Pieces of scalp, skin, jaws, joints, spines, pelvis and limbs have to be arranged in separate identifiable groups. Remains of clothing can also help in identification.

Finger printing and DNA finger printing can help in confirmation of identification.

# CONCLUSION

(I) The present situation of suicide terrorist attacks is no doubt connected with the Anti-Muslim policies of super powers and foreign agencies. These policies are creating more and more hatred for western countries. It seems that with the passage of time, not only the frequency of such incidences will increase but their intensity and brutality will also increase. It is therefore, the responsibility of western countries to realize the situation and review their policies particularly about the Muslim countries.

(2) .Muslim countries can also play vital role to stop these attacks by promoting their interrelations, trade and defense matters and should solve their problems by their own, instead of taking part in the war of others.

(3). The Religious scholars and warrior groups should re-consider their policies of killing innocent, non combat persons. They should firmly stick to the teachings of Islam by which suicide

is strictly prohibited and killing of one innocent person is like killing of whole world.

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**Address for Corresponding Author:**
**Dr. Naveed Ahmed Khan,**
Asstt. Prof. of Forensic Medicine,
AJK Medical College Muzaffarabad
Cell No. 0332-5104544