THE TWO STRANDS OF (NON) ACCOUNTABILITY ON KUNDUZ

Contrary to much sloppy reporting, General Campbell did not change his story about the Kunduz strike in his testimony Tuesday. As I noted Monday, towards the end of his press conference that day, Campbell admitted, "Afghans asked for air support from a Special Forces team that we have on the ground to train, advise, and assist, in Kunduz," which is precisely what some people claim was "new" yesterday.

The question, then, should turn to what the relationship between the US Special Forces who called in the strike and the Afghans who asked for it was — and what the thinking of both was. On that point, Campbell dodged, claiming that (and any details about Rules of Engagement) would come out in the investigation. Campbell was very insistent that SOF was only on the ground for a train, advise, and assist mission. But that clearly addressed their general status, not what they were doing at the moment the strikes were called in. And DOD-sourced reporting from last week made it clear US forces were doing more than training, advising, and assisting just days before the attack on Médecins Sans Frontières.

> U.S. Special Forces traded fire with Taliban insurgents in the northern city of Kunduz, the U.S. military said Friday, a rare direct ground engagement for American troops stationed in the country.
>
> The clash on Thursday marked the first time U.S. ground forces are known to have directly fought the Taliban since the militants stormed Kunduz on Monday. It came as the U.S. stepped up airstrikes this week against Taliban targets in Kunduz province and elsewhere

> in the country's north.
>
> U.S. Special Forces advisers "encountered an insurgent threat in Kunduz city" and "returned fire in self-defense to eliminate the threat," said U.S. Army Col. Brian Tribus, spokesman for American and allied troops in Afghanistan.
>
> About 100 U.S. and coalition special-operations forces advisers were deployed to Kunduz earlier this week to provide tactical guidance to their Afghan counterparts as they fought to reclaim the provincial capital from the Taliban.

So on Friday, DOD was willing to admit our TAA mission actually involved direct fire. The first reports from the field said that in response to direct fire, SOF called in air strikes. But as MSF called for investigations into a war crime, DOD switched *that part* of the story to a strict TAA role, without telling us where the forces who called in the strike were, or what they were doing.

Without answering that question, two stories have made it clear that whoever called in the strikes didn't do what they should have *with regards to vetting the strikes*. There's this WaPo story that notes AC-130 strikes, like that used in this attack, rely on visual targeting assist from the ground.

> Unlike other military fixed-wing aircraft, an AC-130 is requested differently. While a jet requires a map coordinate to engage its target, the AC-130 relies on direction (a compass heading) and a distance to the enemy target from the friendly forces engaged on the ground. In short, it relies on visual targeting.
>
> This difference might explain why the hospital was targeted even though Doctors Without Borders said it had

> given U.S. and Afghan forces its map coordinates before.
>
> "It's a visual acuity aircraft," said a U.S. close-air support pilot who spoke on the condition of anonymity because of his active-duty status. "An AC-130 finds the friendly force, then fires over their left or right shoulder."
>
> The pilot went on to add that an AC-130 does not enter enemy airspace and look for targets. It specifically has to be guided onto the target by a force on the ground and will fire only after identifying friendly and enemy forces, he said.

It also notes that normally (Thursday's events notwithstanding) when SOF comes under fire they (among other things) call in air strikes.

> These "train, advise and assist" missions are a staple of U.S. Special Forces capabilities and have been conducted extensively in recent years. In combat situations, rather than return fire, U.S. troops on these missions are more likely to help direct communication, casualty evacuation and direct air support from an AC-130, for instance, if it is available.
>
> As a result, there has been little direct contact between U.S. troops and the Taliban since most U.S. forces were relegated to the sidelines when official combat operations ended last year.

Last night, another passive voice-ridden NYT story reports that General Campbell, after promising full transparency, went around DC saying something rather different than what he was saying publicly: that what the WaPo says should have happened probably didn't.

> The American commander in Afghanistan

> now believes that United States troops who called in an airstrike that decimated a Doctors Without Borders hospital probably did not follow rules that allow for the use of air power only in dire situations, according to American officials familiar with the general's thinking.
>
> Under those rules, airstrikes can be authorized to kill terrorist suspects, to protect American troops, and in response to requests for help from the Afghan Army in battles that could significantly alter the military landscape in Afghanistan — such as the recent Taliban takeover of Kunduz — but not necessarily smaller firefights. The idea behind the rules of engagement was to give American troops leeway but not see them dragged back into daily, open-ended combat.
>
> In private discussions with officials in Washington, Gen. John F. Campbell, the commander, has expressed his belief that the decision by Special Operations forces operating "in the vicinity" of the Afghan troops in Kunduz likely did not meet any of those criteria, according to the officials, who spoke on condition of anonymity because they were not authorized to discuss the incident.
>
> The Special Operations forces also apparently did not have "eyes on" — that is, were not able to positively identify — the area to be attacked to confirm it was a legitimate target, before calling in the strike, the officials said.

If the NYT reporters who wrote this are aware that the MSF strike was the 12th in Kunduz province last week (to say nothing of the direct engagement by US forces), they failed to hint at that fact — perhaps because it would undermine much of this story.

In any case, even if Campbell's non-transparent judgements are honest – that what caused the attack from the US stand point was a violation of procedures and/or rules of engagement – that shouldn't end the story (but it appears to be doing so).

The one part of the story that has changed since Saturday was that the Afghans, and not the Americans, determined a strike was necessary (though that strike had to go through normal channels). Which ought to lead some focus back to what the Afghans were initially saying, which is that Taliban fighters were at the MSF compound (something MSF has vigorously refuted).

> "When insurgents try to use civilians and public places to hide, it makes it very, very difficult, and we understand how this can happen," Koofi said. "You have two choices: either continue operations to clean up, and that might involve attacks in public places, or you just let the Taliban control. In this case, the public understands we went with the first choice, along with our international allies."
>
> In Kunduz, the acting governor, Hamdullah Danishi, also suggested that the airstrike was warranted.
>
> He said Taliban fighters had been using the Doctors Without Borders compound to plot and carry out attacks across the city, including firing rocket-propelled grenades from the property.
>
> "The hospital campus was 100 percent used by the Taliban," Danishi said. "The hospital has a vast garden, and the Taliban were there. We tolerated their firing for some time" before responding.

And some focus on the raid Afghan Special Forces launched on the hospital in July is also in order.

> Afghan special forces raided a hospital run by medical aid group Médecins Sans Frontières in northern Afghanistan, in search of a suspected Al Qaeda operative being treated there, a commander of the elite force said on Thursday.
>
> Raids on hospitals are rare because they are protected by international law and those run by foreign aid agencies in Afghanistan provide crucial support to war victims, who may travel for days to get assistance.
>
> It was unclear if Wednesday's raid by a contingent of special forces from the capital, Kabul, had succeeded in capturing its target, Kunduz special forces commander Abdullah told Reuters.
>
> "I was told he was an al Qaeda member being treated at the MSF hospital," Abdullah said.

Even if Afghan forces genuinely believed the Taliban was operating from within the hospital, there would be a lot of hoops they'd have to jump through before treating it as a legitimate target. If Afghan forces had SOF strike the hospital because they didn't like that it accepted all people, then it'd be a clear war crime.

The point is, assuming US forces weren't directly engaged in the fighting and didn't themselves call in the strike, there are two levels of accountability here: on the Afghans who asked for the strike, and on SOF, which vetted it and carried it out.

If the Afghans deliberately targeted a hospital on unsound grounds, then the strike is in no way an accident — and may have been enabled when Americans failed to follow procedure.

There seems to be a strong desire to ignore the Afghan side of the equation (in part because the Afghans and the US military both want Obama to

approve continued troops in Afghanistan). But no one should be declaring this an “accident” or “mistake” without fully accounting for the Afghan decision to call in the strikes. And that hasn’t happened yet.