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The SAF and the Dangers of Uruzgan

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With its decision to deploy a 20-strong medical contingent to the restive southern Afghan province of Uruzgan, the Singapore Armed Force (SAF) may be undertaking its most dangerous mission since Lieutenant-Colonel Lo Yong Poo was appointed Military Adviser to the UN Special Mission in Afghanistan (UNSMIA) in 1997. Although a concurrent SAF team will operate in the central Afghan province of Bamiyan, there is a stark contrast in the security situation of both provinces and there must be no mistaking one for the other.

With the decision to deploy a 20-strong medical contingent to the restive southern Afghan province of Uruzgan coupled with the concurrent deployment of another Singapore Armed Forces (SAF) team in the central Afghan province of Bamiyan, the SAF will have to contend with very different security threats owing to the differences of the two provinces.

The difference between Bamiyan and Uruzgan

The SAF has had prior experience in the Bamiyan province in 2007 and their experience would be instructive for the new team to be deployed there in mid-2008. In 2007, SAF dental and engineering teams were embedded within the New Zealand Defence Force-led Provincial Reconstruction Team (PRT) in the relatively calm province of Bamiyan and their efforts were well received by the local Dari (and Hazaragi) speaking Hazara-dominated population. Overall, though security threats are present in this region, they remain low. Threats in this province have included landmines left over from conflicts past; contraband smugglers keen on keeping a low profile; and extremely rare improvised explosive device (IED) or rocket-propelled grenade (RPG) attacks. While Taliban intelligence may operate in Bamiyan, they certainly do not have an established presence like that in southern Afghanistan.

In contrast, Uruzgan is very different kettle of fish from Bamiyan. The Pashto speaking Pashtun-dominated province of 350,000 is home to various sub-units of the rival Durrani and Ghilzai clans and both are steeped in tradition and fiercely protective of their territory. Moreover, Uruzgan has Deh Rawood as one of its six-districts, a district that is the hometown of reclusive Taliban leader Mullah Mohammad Omar. Furthermore, Uruzgan is surrounded by 'Taliban-active' areas such as the Gizab and Kajran districts of Daikundi; the Daychopan district of Zabol province; the Ghorak district of

Kandahar province; and finally, the Kajaki and Baghran districts of Helmand. The poverty-stricken population – at times including the police – is also dependent on poppy cultivation for subsistence. Uruzgan is also a major transit route for narcotics heading northward towards Central Asia from Helmand, the province which accounts for half of Afghanistan's contribution to the global opium supply.

As a whole, the civilian population oscillates support between the Taliban and the Afghan/coalition forces. When the civilian population does favour the Taliban, it does so for three reasons: (1) tribal affiliations; (2) the lack of a better alternative; and (3) civilian casualties as the result of military mistakes. In 2002, a US air strike killed 46 civilians at a wedding party in Uruzgan while in October 2007, 60 to 70 civilians were killed by bombing and artillery fire when Dutch forces repelled a 500-strong Taliban contingent in the Chora Valley.

Even though Uruzgan is frequently overshadowed in news reports by more restive provinces like Kandahar and Helmand, the milieu is volatile nonetheless. Taliban fighters roam in small groups across the porous landscape dominated by towering mountain ranges, only to congregate for 'hit and run' attacks before dispersing into the natural and/or human terrain.

Illustrative of the danger posed by the Taliban in Uruzgan, Dutch and Australian forces in the provincial capital of Tarin Kowt have experienced losses. Since taking over responsibility for Uruzgan in mid-2006, the Dutch have lost 14 soldiers and the Australians four – including three members of the highly vaunted Australian Special Operations Task Group comprised of members from the Special Air Services Regiment and the 4th Battalion (Commando), Royal Australian Regiment.

What to expect

As the temperature warms and snow melts along various mountain passes, the level of violence is expected to increase. Recent security incidents include combat engineers from the Australian Reconstruction Task Force (ARTF) fending off a number of Taliban attacks on a new patrol base construction project approximately 15km from Tarin Kowt. In addition, an IED was found near the Wanow Bridge which serves as a key thoroughfare to Tarin Kowt Hospital.

If the SAF Medical Contingent (SAFMC) is restricted to operations 'within the wire' - that is, within the main base camp of the region – the dangers, bar the occasional rocket attack, are minimal. The Taliban are unlikely to attempt any mass assault on the base as it is well supported by 1500-odd soldiers and AH-64 Apache attack helicopters. Moreover, the Taliban appetite for full on attacks on coalition bases may have dissipated after their failure to overrun the smaller US-led Firebase Anaconda four-times in Khas Uruzgan district last August.

If the SAFMC operates 'beyond the wire' at the Tarin Kowt Hospital, a myriad of dangers persist once the convoy leaves base gates. Dangers include IEDs, RPGs, suicide attackers, ambushes and rock-throwers. Danger to foreign troops will also be amplified by forces external to both Uruzgan and Afghanistan. Reprints of the cartoons caricaturing the prophet Mohammed in various Danish newspapers have drawn wide spread condemnation in the Muslim world and incensed Afghans have taken to the street in protests. Muslim anger has been further stoked by Geert Wilders, a Dutch politician who called the Quran "a fascist book which incites violence" comparable to Hitler's *Mein Kampf* and who has recently released the anti-Quran film *Fitna*.

What is it all for?

All in all, the dangers discussed should not obscure the good work to be done by the SAF team. Should they venture 'beyond the wire', the SAFMC's mission would be most welcomed by hospital director Dr. Agha Khan and his staff at the US\$700,000 Tarin Kowt Hospital. Completed in

September 2007 by the ARTF, the hospital's decrepit infrastructure received an upgrade to include clean water and reliable electricity. Major refurbishments were also made to include gender-segregated wards, an infectious diseases ward, consultation and storage rooms and x-ray facilities. A further boost arrived in February 2008, when the Afghan central government delivered five hot-water heaters, the first for a hospital which used to rely on a diesel-burning stove in the operating room. Naturally, the SAFMC must be culturally sensitive to social norms – including the strict gender segregation. Female medics (if deployed) will have a niche role in reaching out to Uruzgani women, women whose insight and knowledge may be mission critical in this dangerous part of the world called Uruzgan.

Samuel Chan is an Associate Research Fellow at the S. Rajaratnam School of International Studies. During a six-month fellowship in Afghanistan in 2006, he met H.E Jan Mohammad Khan (former governor of Uruzgan and now Minister Adviser of Tribal Affairs) and Haji Khair Mohamed (Senator from Uruzgan). He also spoke to ISAF soldiers in theatre and a number of Uruzganis who have taken the treacherous journey from Kabul to their home province.