A Violation
of Medical Neutrality

The Neglected Massacre
At Abu Salim Trauma Hospital

(Tripoli Libya,
August 2011)

A report of the Citizen’s
Investigation into
War Crimes in Libya,
August 2012
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A Report of the Citizen’s Investigation
Into War Crimes in Libya
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About the CIWCL and this Report

The Citizen’s Investigation into War Crimes in Libya (CIWCL) is a small, informal collective of ordinary but talented people. Hailing from several nations, the CIWCL’s members have come together to investigate events of the civil war in Libya, the lead-up to it, and the aftermath of it.

The CIWCL mostly uses publicly available sources, gathered and compared, with an emphasis on primary evidence. Physical evidence (via photographs and video, verified as possible) is taken as that, and witnesses claiming to have seen things are taken as, well… claims, which should be double-checked against other claims and against the physical evidence. This crucial aspect of our approach in large part explains the radically different findings from those reached previously by Human Rights organizations, world governments, and the mass media.

The CIWCL’s members are also driven to examine the clues partly out of a natural bias against accepting the mainstream narrative of the war and its ready-made answers. This bias is frequently supported, upon investigation, by signs that our suspicions were valid. Considering the overwhelming contrary bias to disbelieve the Libyan government of its day and credit each rebel accusation, the CIWCL provides unusual and thorough – and thus useful - insights, whether “the world” wants them or not.

Public Signatories  (last updated June 29, 2012)
The following (so far) agree to put their names at least behind the CIWCL's general idea and efforts, but may not agree with every finding or statement, nor necessarily with each others' views (in alphabetical order):

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Others have expressed interest in signing, joining, or helping, or are actively helping already, but don’t wish to be publicly listed as signatories at this time.

_A Violation of Medical Neutrality_ builds on research done collectively by several members, signatories, and others, primarily at the site The Libyan Civil War: Critical Views (libyancivilwar.blogspot.com). An anonymous Arabic-speaker from Libya provided some translation of spoken and written Arabic, and Google translate (plus repairs) and/or mylanguages.org transliteration was used for all non-English text sources. The writing and formatting of the report, as well as graphics and the cover design, were done by Adam Larson, CIWCL chief executive person.

The content is based strictly on publicly available information, with no interviews or original evidence gathering. This first edition is slightly rough, being rushed to meet the anniversary. Readers should expect a slightly revised edition later. Further, it is hoped this report will be followed by a supplemental one, with new information collected from various parties.

This report is much shorter than the CIWCL’s first one, _A Question Mark Over Yarmouk_ (June 2012), but is still perhaps too much for most people to read front-to-back. Various reading possibilities exist; the whole report can be skimmed, or ignored entirely, for that matter. Section 2 alone outlines the broad details of the massacre, reactions to it, and related issues. Sections 1 and 2 read together show the hypocrisy of this massacre’s neglect by those concerned with human rights and medical neutrality. The bulkier sections 3-6 explain the various aspects in more detail, categorized and broken down further into sub-sections.

The use of photographs and video stills as illustrations is kept to something of a minimum, with sources cited. The CIWCL considers this fair use, necessary to illustrate certain points that are in the public interest, not for profit, and all credited with full respect. Most images are cropped on an area of interest and slightly enhanced here. The citation method is unusual but usable. Sources are indicated with bracketed letter or numbers like [LH]. These are listed alphabetically in the list at the report’s end. Due to time constraints, some sources may be missing, or some sources listed not actually cited. Many do not have details filled in, giving the URL only. Text emphasis (bolding, italics) is added for this report, and not in the original, unless otherwise noted.

The CIWCL would like to acknowledge all reporters and photographers who brought the world the information it has on this horrific event. We thank the alleged witnesses, rebel fighters and affiliates, and others for providing fascinating information, true or false, to study and understand. We thank all those who’ve spent honest time and energy trying to understand this episode, and especially to those who’ve contributed directly to the CIWCL’s own base research. And finally, we extend our sympathies to all those on both/all sides in the Libyan War who were killed fighting for what they believed in, or who were just snuffed out senselessly, and to all those they’ve left behind, perhaps struggling to establish a truth that remains elusive.
Timeline of Key Events:

**General Developments**

February 15-21: start of Civil War in Libya, as simultaneous protests and militant attacks hand control of many Libyan cities to the opposition, with a de facto capitol in Benghazi.

Feb-May: Western rebel cities Misrata and Zintan besieged by gov’t forces.

March 19: NATO begins aerial bombing of government targets in Libya to enforce a “no fly zone” and enable a full rebel takeover of Libya.

July-August: Offensives from Az Zintan, Misrata, and the sky, push rebel control closer to Tripoli. Mid-August: Tawergha depopulated.

August 19/20: Operation Mermaid Dawn launched, NATO-coordinated Rebel offensive pushing into Tripoli from all sides.

August 22-23: Tripoli reported freed, Bab Al-Aziziyah taken, Muammar Gaddafi on the run, only holdout neighborhoods and some army bases remaining in loyalist hands.

Late August-October: With the capitol under control, the rebels turn to other holdout cities, ferociously besieging Sirte, where Muammar Gaddafi defies them.

Oct 20: Gaddafi is abused and executed, along with his son, defense minister, and about 100 others, while leaving Sirte. Libya is declared liberated.

To present: fighting between rebel factions, between tribes and militias, in the south, west, etc. Revenge, persecution, cruelty, and death are rampant.

**Abu Salim Trauma Hospital (ASTH)**

August 20: Rebels start offensive into Tripoli, loyalist snipers allegedly occupy ASTH in preparation.

Aug 21: Patient Mohammed is allegedly shot by a sniper, has surgery to remove bullet from his chest at ASTH.

August 21: Most commonly stated or implied date of the flight of the hospital’s staff or of any killing around ASTH. Aug. 21 (late) or 22 (early): CIWCL Presumed massacre date.

Aug 22: Red Cross delivers supplies to ASTH with a staff already fled, only 25 living patients and one doctor. About 164 people, dead or alive, were not mentioned.

Aug 23-24: Silence about this hospital, as only one of central Tripoli’s four hospitals is functioning. Rebels report serious fighting in the Abu Salim district.

Aug. 25: rebels said to secure ASTH from the loyalist snipers, and discover the horror inside. MSF sees the site, filled with bodies, and Al Jazeera English films it for the world. 21/22 patients, 2 removed.

Aug. 26: Main news day- Al Jazeera broadcast, widespread media visits, last 17 patients evacuated, bodies start to be removed, clean-up begins.

Aug. 27/28: later reports, last bodies removed, fumigation started, tissue samples said taken for investigation.

September 14: A cleansed ASTH is re-opened to serve the public.

To present: No public investigation to the CIWCL’s knowledge.
Section 1
Medical Neutrality, PHR, and Libya

Physicians for Human Rights (PHR) is, according to their website, “an independent organization that uses medicine and science to stop mass atrocities and severe human rights violations against individuals.” They came together in 1986, “on the idea that health professionals, with their specialized skills, ethical duties, and credible voices, are uniquely positioned to stop human rights violations.” [PHA] According to the bottom of their website, “PHR shared the 1997 Nobel Peace Prize” for their work. However, this was indirect; the prize was actually “awarded jointly” to International Campaign to Ban Landmines (ICBL) and its founding coordinator Jody Williams. [NP1] PHR, along with several other groups, did help launch the ICBL in 1991, but that’s apparently the extent of their “share.” [NP2]

Even without a Nobel Peace Prize of their own, PHR has been recognized for its quarter-century of work lobbying for a better and safer world. Of particular interest for this report is their promotion of the concept of “medical neutrality.” They admonish the world’s tyrannies and, apparently, those challenging them as well:

“Warring factions must protect civilians; allow sick and wounded civilians and soldiers both to receive care regardless of their political affiliations; and refrain from interfering with medical facilities, transport, and personnel. This is medical neutrality.” [PH1]

It’s a traditional idea with independent roots in many cultures dating to antiquity. The Hippocratic oath emphasizes the promise to ‘harm no one,’ and a corollary has evolved of ‘don’t allow others to do harm in a place reserved for healing.’ Despite the wide appeal of such ideas, they were followed irregularly enough they needed to be codified among the standards of the emergent world community. Article 16 of the Fourth Geneva Conventions, for example, lays out that “the wounded and sick, as well as the infirm, and expectant mothers, shall be the object of particular protection and respect.” [RC1] Whatever the perceived demands of the battlefield, attacks on hospitals, patients, staff or transport are all war crimes now. Offenders are forewarned “PHR documents the deliberate targeting of health care systems and personnel, and advocates accountability for violators.” [PH1]

The group’s activism for medical neutrality and related concepts is underpinned by investigations that have been reasonably widespread. Prior to 2011, going backwards in time from to 1986, PHR issued reports on Thailand, former Yugoslavia, Kashmir, Thailand, Iraqi-occupied Kuwait, Panama, and El Salvador. [PH1] The report on Kuwait, released on that country’s liberation in March 1991, mostly focused on the natural ill-effects of Iraq’s invasion on the medical system. [PHR4] But along the way, it passed on the more incendiary and famous incubator babies hoax, as part of a body of testimony on “the removal of incubators and deaths of low birth weight infants.” A girl named
Nayirah had famously sworn that, as a hospital intern, she saw Iraqi soldiers tossing dozens of tiny infants to die on the ground, just so they could take the machines for whatever unknown use. After being cited by President Bush as a cause for war, it was learned only in early 1992 that Nayirah was the daughter of Kuwait’s ambassador to the US, was nowhere near Kuwait at the time, and was speaking according to a script written up by PR firm Hill and Knowlton. She was apparently cited in PHR’s report as an unnamed medical intern who described about what Nayirah did. [PH4 p. 20] The report also features other alleged witnesses who “confirmed” her story; a doctor said 45 babies were removed and most of them died, an another intern said he buried 72 of their bodies right on the hospital grounds. There were a few other supporters, but to their credit, PHR also interviewed several other medics with more rational stories featuring zero such killings. Hence, they found “the testimony…is contradictory.” [PH4]. In the context of the times, prior to Nayira’s outing, this could be seen as a step forward in the public’s understanding.

Twenty years later, PHR’s skill was still listening to the “credible voices” of medical interns and doctors. In 2008 two Iranian doctor-brothers were arrested, tried, and convicted for plotting towards the overthrow the Iranian government. Arash and Kamiar Alaei were accused of using their travels abroad regarding HIV/AIDS as cover to meet with agents of “an enemy government.” The case was not medical in nature, but something led PHR to conclude that “their only crime” was “working with colleagues internationally to eradicate HIV/AIDS.” [PH5] Perhaps the image of an Iran where fighting AIDS is illegal, and perhaps PHR’s lobbying, contributed to brother Kamiar being released in 2010. He fled to the United States, presumably Virginia, and helped lobby for his brother Arash’s release, which was also granted in 2011. [PH5]

Physicians for Human Rights then took a stand in 2011’s historic upheavals and “championed the principle of noninterference with medical services in times of armed conflict and civil unrest during the Arab Spring.” [PHA] They issued two reports on the successful government crackdowns in Bahrain, admirable as far as the CIWCL knows, and two on the frustrated one in Libya. Here, PHR heard and believed that the military had destroyed hospitals, attacked ambulances, kidnapped and killed medics, and more. They focused mainly on the besieged city of Misrata, reporting in late August based on “54 semi-structured interviews” with Libyans steered to them by anti-government contacts, including medical personnel and “emergent civil society leaders.” [PH3] One man improbably told PHR how government soldiers “forced his two young children to sit on a military tank” they had parked where air strikes were feared, so that “if NATO attacks us, you'll die, too.”” [PH3] The all-day babysitting job provided no fruit, they heard, but it wasn’t for lack of trying.

PHR didn’t stop there, covering in depth one serious alleged war crime in Tripoli from the same time the above report was released, as Misrata fighters took their revenge on Tripoli. Their main interest there was the “32ndBrigade massacre,” generating their second report in December. In that, they were able to medically name the pre-massacre injuries (suggesting harsh detention somewhere, by someone) of the three unharmed
alleged prisoners they spoke to. Otherwise their contribution was taking down accounts as truth and demanding “justice and accountability in Libya” based on that. [PH6] One of their two alleged escapees has been clearly matched by the CIWCL to “Bashir Al-Sadeq,” a man of shifting names and stories. Bashir has, in turn, worked with PHR’s advisor on the report, Dr. Salem Al-Farjani. With the “credible voice” of a heart surgeon, Al-Farjani himself posed as another witness for the massacre, cleverly disguised in his own Lacoste shirt and calling himself Dr. Salem Rajab (see inset). In such a manner, he would inscribe a bizarre career arc to human rights activist and government official, and then to a tortured fugitive. [QY sec 2.5]. The CIWCL discovered these facts along the way to all-but-proving the massacre PHR was being advised on, by him, was a work of fiction. The CIWCL’s first report, A Question Mark Over Yarmouk, exposed the shed massacre as a crime not of Libya’s then military, but of the invading Misrata brigades. This important report will be referred to throughout this report, cited [QY].

So they focused on this non-medical and fiction-muddled case that was apparently managed by an extremely non-credible doctor, and obscured a genuine crime by rebel forces. In so doing, Physicians for Human Rights missed some very serious attacks, at that same pivotal time, directly against the medical system they had publicly “championed.” PHR has said not a word about the rebel massacre of patients and perhaps staff inside Abu Salim trauma hospital. Nor have they publicly addressed any of the other violations of medical neutrality by opposition forces mentioned in this report, and these are just limited just to those in the conquest of Tripoli, excluding all their possible violations before and after. PHR are not alone in this, joined by ‘everyone who matters’ in sideling a crime apparently committed not by a government strongly disfavored by the West, but by an opposing faction they supported. Perhaps that’s not a coincidence, although exploring the mechanics of any connection would require a whole other report.

One might wonder at this point if the hospital massacre was a minor event, or one that’s exceptionally unclear. The following section should put such thoughts to rest and highlight the hypocrisy of the West’s approach, effectively using “human rights” concerns as a weapon, leveraged only against one side, and giving the other side a free pass to abuse the rules, as they batter the demonized target government of the moment.
Section 2
The Hospital Horror

2a) Dreadful Conditions
Emerging amidst, but standing out above, the bloodbath that was the August, 2011 conquest of Tripoli, was the ghastly and mysterious scene inside Abu Salim trauma hospital. The facility is at the northern edge of the district of Abu Salim (alt. Abu Saleem, Busleem, Bosleem, etc.), a highly-populated, largely Black, and generally pro-Gaddafi district. It starts just south of Gaddafi’s Bab Al-Aziziya compound and extends south and southeast of there into block after block of apartment buildings housing tens of thousands, many of whom determined to resist their “liberation.” The rebels started their assault on the capitol on August 19 or 20, and were only slowed down significantly once they hit Abu Salim and its armed resistance, including embedded “snipers” that took out a few of the NATO-backed “rats,” as Libyan leader Muammar Gaddafi had urged.

Opposition forces hit back, by the 23rd at the latest blasting homes and public buildings alike with their massive anti-aircraft machine guns. For a few days they were seen dragging out suspected fighters and mercenaries at gunpoint or knifepoint, binding their hands with plastic flex-cuffs, and trucking them off to unclear fates. Dozens of executed men in civilian clothes, but presumptively Gaddafi fighters, also started appearing prominently across central Tripoli and Abu Salim, as soon as cameras started filming the area again on the 24th. The bodies – a majority of them Black men - were generally left uncovered, for days sometimes, as they started to decay in later photos, their hands often bound with flex-cuffs.

But perhaps the worst of it surfaced in the blood-marred halls and wards of the Abu Salim trauma hospital, “a lost place,” Channel 4’s Alex Thomson wrote, “abandoned in the chaos of fighting.” [AT4] The last people to find it prior it becoming lost were apparently a nasty lot; a reported total of 164 people died here (see 4a, p. 24), in what seems to be a large-scale massacre. The bulk of the killings seem to have happened on the 21st or perhaps 22nd, and part of the aftermath was first shown to the media days later,
starting late on the 25th. This was the same day rebels claim they finally took the place from the Gaddafi loyalists, who of course had implicitly held it in those darker days.

The BBC’s John Simpson said in a video report “the floor is thick with blood. The scenes which took place here defy the imagination.” As part of a joint BBC report, Wyre Davies said the scene “was one of the most appalling and distressing he had ever seen,” and Simpson called it “one of the most terrible incidents of the revolution.” [SBB] It was probably the bloodiest and most upsetting event to date, but it would be eclipsed or rivaled the next day with the emergence of the Khamis Brigade shed massacre a few miles south.

The first media dispatch from the hospital was by Al Jazeera English and its reporter Andrew Simmons. [AJE] The crew visited on August 25, by the angle of sunlight (from almost due west), arriving just about 5:30 pm local time. Simmons sent Twitter messages the following morning, compiled at the Libyan Uprising Archive, announcing the “truly horrific visit” he returned from “last night” and the resulting report that “will air on AJE this morning.” He also tweeted “Investigation needed re war crimes. And immediate action. Humanitarian emergency.” [LU]

The video soon made public showed Simmons visiting different areas of the hospital with a well-armed escort of rebel minders and one doctor. Shown in the video are two concentrations of bodies, each numbering at least 20 corpses, nearly every one of them seemingly Black African in appearance (see sub-section 4b). One pile was outside, just west of the north entrance (see 4e), and another group was laid on beds in what Simmons was told had been “a side ward for the sick.” However, the CIWCL’s translator reads the sign seen briefly above the door as meaning “room of plaster.” It was presumably where casts were set for people who’d had limbs broken in the violence. At least one victim at least, near the far corner, has a new cast on his left leg and one on his left arm. The floor is mostly covered with pools of blood, thickening and now crawling with maggots.

As bodies decayed with no air conditioning, the sickening smell intensified for days, becoming an unavoidable center of attention. “There is no language for the stench,” Alex Thomson wrote. “You fear even to breathe in here. A hospital orderly vomits quietly in a corridor.” [AT4] The BBC’s Simpson wore three masks to no avail, and besides the stench, expressed worry he’s slip over on the blood plastering the floor of the plaster
room. [SBB] Bridget Comninos of the International Red Cross appeared to evacuate the survivors (see section 6), but seemed disinclined to talk about it. “We are just helping this hospital to evacuate their wounded,” she told the media. Asked about the conditions, she said simply “they are dreadful. The conditions are dreadful.” Then she climbed into the passenger’s seat of an ambulance and shut the door. [AT]

2b) Who Was To Blame?
As for who created the conditions described, there were hints and whispers that, as usual, the crumbling Gaddafi regime had ordered these killings in a fit of madness. Andrew Simmons’ tweets mentioned a witness to motorists killed by the hospital; “GF [Gaddafi fighters] shot them dead inscriminately [sic].” (see 4e) [LU] Anthony Loyd for The Sunday Times claimed “hospital turned to charnel house by fleeing regime … new evidence of war crimes committed by the Gaddafi regime,” after speaking with alleged witnesses. [AL] Wyrie Davies for the BBC was at the scene, and reported “many put the blame for what happened there on the Gaddafi regime, accusing his forces of taking revenge on anyone suspected of opposing him as he lost control of the capital.” [SBB]

However those allegations have never really solidified, with no details ever surfacing. Instead, an unusual passive explanation prevailed - the patients died of neglect after the staff mysteriously abandoned them. Other than the loyalist snipers who prevented any help getting through as the patients passed away (see 5b), it was something like a natural disaster, and a fairly slow one. That’s according to a small cast of doctors, nurses, volunteers, and surviving patients all, for the purposes of this report, considered as alleged witnesses.

Many people have noted the obvious fact that the dead are nearly all Black men, the kind often called “Gaddafi’s African mercenaries,” although a few women and children were also reported. The evidence is troubling, suggesting “mercenaries” admitted for “treatment” against their will, attempted refugees executed for the effort, many on-site executions, and at least one apparent Isamo-nihilist-style beheading. In these ways, the hospital was made into a blood-spattered slaughterhouse full of over 150 rotting corpses, a horror magnified by the eerie silence surrounding the case.

The journalists present, for starters, could see something quite wrong. Canadian CTV had Janis Mackey-Frayer there, reporting back that “the bodies we saw were those of Gadhafi loyalists who were wounded in battle,” and then at least two of them were executed point-blank right in their hospital beds as they tried to recover. [CTV] Photographer Ron Haviv noted “what appeared to be execution style killings” there. [RH] Sky News’ Jane Dougall said, “while lying in hospital beds being treated for injuries, dozens of men were shot dead in this hospital, in what can only be described as an execution.” She also noted “many appear to have been sub-Saharan Africans, similar to mercenaries that Gaddafi had recruited. These may have been score-settling executions.” [SNV] Photographer Bruno Stevens saw “wounded Khaddafi soldiers who were later executed on their hospital beds in what constitutes a massive war crime.” [BSP]
These observations are based on the evidence they saw in their first-hand inspections, and are not baseless guesses or sensationalism. Veteran war reporter Alex Thomson could see it too. His report features a quick interview with Abdel Hakim Belhaj, co-founder of the Libyan Islamic Fighting group and then head of the NATO-backed Tripoli brigade. Belhaj told Thomson that the government’s remaining defenders “have no choice but to surrender or die,” and expecting few surrenders, they would “deal with these small groups of gangsters.” The edit cuts then to the hospital scene, with Thomson opining how “that dealing comes at great human cost.” The hospital horror is shown, and near the end, he emphasized the point: “there is no doubt that the anti-Gadhafi rebels have prevailed at Abu Salim, but today, in this awful place, we saw at what cost.” [AT]

Conversely, other people who were allegedly in a better position to know what happened have never uttered a word about any killings at Abu Salim trauma hospital. A tiny staff of either one or two doctors and a few nurses greeted the cameras; they had either remained through the fighting, or returned after fleeing briefly, depending on the account (see 5d). And they mentioned nothing amiss with the sudden and messy way their patients had passed away. A strangely small pool of surviving patient-witnesses, some of them rather dubious (see section 6), also supported them. A few gave their stories of how anything but rebel-initiated violence put then in their beds, and in their several days there apparently witnessed no killings. They’re all witnesses to no crime happening, and thus support the prevailing rebel/NTC account, which, as this report will show, is highly questionable.

2c) Cleaned Up, Moved On

The proper place for questions about what occurred at the hospital was set from the beginning. It’s said rebels barely secured the place on Thursday the 25th, and still in the afternoon the Al Jazeera English crew “came under small arms fire on the way out and the way in,” reporter Andrew Simmons said. [AJE] That shooting by unseen parties “proved” Gaddafi’s evil remained nearby and was likely to blame for the unfolding massacres. Simmons reported to National Public Radio the effect also was to rush the media through; “all the time, there was a lot of fighting going on outside - artillery crashing in. So we didn't have a great deal of time to investigate thoroughly.” [NPR]

There never would be time for investigation or thoroughness. Najib Barakat, the Health minister of the rebel National Transitional Council (NTC) spoke of tissue samples and identities, but nothing further came of this probe, to the CIWCL’s knowledge. (see p. 28). The victims were called mercenaries of the hated regime, and so niceties like truth or justice hardly mattered to the victors or to many outsiders. Cleanup was starting late on the 26th, once the media had a chance to report, and the
bodies were apparently all removed by the end of the 27th. The blood was washed away, as seen at left, along with any possibility of rebel guilt.

Other work did follow, like fumigation, but not, apparently, any investigation. All the CIWCL has found newer than late August was a report from “Ricky” with Press TV, on the hospital's re-opening on September 14. It says in part “the staff fled and 164 patients died.” Ricky concluded “Libya seems ready to move forward and turn the page on the Gadaffi years. The reopening of the Abu Salim hospital is a firm and welcome step in this direction.” [PV]

The page was turned, and the NTC could write the new page just how they wanted. With no issues lodged by the NTC or its affiliated activists, the Wests’ human rights groups, the UN and world governments, and the mainstream media, once its reporters were away from the place, have all remained silent. Overwhelming signs suggest a massive war crime, but it was never taken seriously by anyone in position of power and influence, inside Libya or without.

This report does not break that trend, as the CIWCL enjoys no power and likely very little influence. Nonetheless, A Violation of Medical Neutrality aims to inspire a correction of the flawed record. It seeks further to lay a reasonable foundation for further questions in other areas where such skepticism is warranted, to assist in correcting possible injustices like the neglected massacre at Abu Salim Trauma Hospital.
A Difficult Week for Tripoli Hospitals

3a) A Strained System: Swamping Tripoli Central

All the major hospitals of central Tripoli – circled in orange in the graphic below – play into the medical system Abu Salim hospital was part of. There were others facilities of note across Tripoli, like the clinic at Mitiga military base to the east, near Tajoua. That was the first major hospital to come under rebel management on about on August 20, or even on the 19th, and hosted the prolific Dr. Moaz Zeiton. But at least four of some size and ability served the downtown core, around Muammar Gaddafi’s Bab Al-Aziziya compound, Nasr forest, and the Rixos hotel, where the international media was safely sequestered. It took about until the 25th before rebels announced control of all these core facilities. It’s to what happened in the five days before then that we now turn.

The subject of this report is the hospital at lower left, a hospital dedicated to treating violent trauma that, in peacetime, is only so common. In wartime, it would be sorely needed, but was taken out of service early in that eventful five-day span. As we’ll see, Green (Al-Khadra) public hospital was also hit by violence, and also became inoperative (see 3d), the two facts presumably connected. Tripoli Medical Center, lower right, had a hand in taking care of Abu Salim’s remaining 21 alleged patients on Aug. 25 and 26 (see section 6). Their cardiac surgeon turned human rights crusader, Dr. Salem Al-Farjani, has previously attracted the CIWCL’s attention for working with false witnesses and for seeming to be one. (see p. 9) There’s little news from there prior to the 25th, but an International Medical Corps dispatch that day said “Tripoli Medical Center and Al-Khadra (the largest and busiest hospitals prior to the revolution) have been completely shut down for the past few days,” but should re-open “tomorrow.” [IMC3]
Just what shut them down is not made clear. The two busiest ones before the war, and the one most needed to save blasted bodies during it, were all closed for the assault at the worst peak of the violence, August 22-25. Only one of these four facilities was operational. Tripoli Central Hospital, to the north on Az Zawiya street, is often reported as “the only hospital” running, and it seems to be the case. It’s the only one reported from by the media, starting on the 24th, sometimes called the Al Zawiya, or Sharia Zawiya, hospital. This sole outlet of a 25% power system was swamped with wounded rebel fighters, civilians, and at least a few Gaddafi loyalists, also struggling with a strangely abbreviated medical staff. Channel 4 news (UK) reported on the 24th from Al Zawiya Hospital: “everything is overwhelmed by incoming casualties – not least the mortuary. … officials here have confirmed most were killed by snipers in the past two days. One said at least 400 people had been killed,” by the violence alone, or by that plus lack of medical care. [C4]

The Telegraph reported:

The doctors at Tripoli Central Hospital knew there would be heavy casualties; but they had no idea how bad it was going to be … “There were hundreds coming in within the first few hours,” said Dr Mahjoub Rishi, Professor of Surgery at the hospital. “It was like a vision of hell. Missile injuries were the worst. The damage they do to the human body is shocking to see” … “We would have needed six trauma teams to cope but we only had enough staff to make up two. Many of the patients died because there weren’t enough doctors to treat them. We never expected so many casualties from the battle.” [T1]

The Guardian’s Luke Harding, early on the 24th, visited Tripoli’s “Italian-built central hospital,” and reported “a pretty ghastly scene.” He mentioned “a room full of dead fighters, who have been shot – terrible smell.” [G3] The descriptions here sound similar to, but isn’t, the hospital in Abu Salim. That was not mentioned even on the 25th as the rebels reportedly took control of it. Fahim and Kirkpatrick wrote for the New York Times that day how Tripoli Central “had treated as many as 500 patients a day this week for gunshot wounds.” As the rebels “concentrated their forces on a block-by-block battle for the streets of the Abu Salim neighborhood,” the result was predictable: “By late afternoon, the fighting had once again swamped Tripoli Central Hospital with wounded civilians and combatants.” [TFK]

3b) A Strained System: Shortages

The failure of Tripoli’s medical system has many cited reasons aside from the huge number of deaths and extreme injuries they were forced to deal with. One of the lesser causes is a lack of supplies and equipment, and a shortage of available medical staff was one of the more serious handicaps. The Telegraph reported how foreign workers had mostly gone home months earlier as the uprising had turned to a war, and “Libyan staff were missing for a different reason; trapped in their homes, unable to come to the hospital because the streets outside were too dangerous to move in.” [T1] The nature of the danger
was vague but possibly manifold. Between rebel rockets and truck-mounted anti-aircraft guns, loyalist snipers, roadblocks set up by whichever side, and more, a number of possible dangers would face anyone venturing out.

Médecins Sans Frontières spoke on “obstacles to providing aid beyond the fighting,” noting among other things an extreme shortage of fuel as a “problem that’s facing ambulances” and even hospitals themselves. “Electricity is very sporadic, so generators are being used to run hospitals, but hospitals have quite limited reserves of fuel.” [MSF1]

The rebel fighters brought their own gas, shipped in by foreigners, so they could stay mobile and establish control. But stern sanctions on the government were imposed by Western and Gulf Arab powers (Libya has little refining capability and has always relied on imports). These sanctions hammered all government services, from military to medical, and a compromised hospital system is one predictable side-effect of that.

Electricity was sporadic, requiring generators, for reasons the CIWCL isn’t entirely clear on. It’s possible the NTC’s forces switched it off as a sanction, a way to make life tougher on everyone, to encourage their support for the transition and the lights back on. It was reported that rebel “technicians” were trying to fix the problem already by the 27th, but while “approaching a central control room” they “had come under gunfire,” apparently by Gaddafi loyalists. “We are hoping that within 48 hours it will be back,” Farage Sayeh, minister for capacity building with the NTC said at the time, but hospitals and everyone else would struggle in the meantime. [DKN]

The loss of the capital’s water supply is an issue worthy of more study. It’s a well-known fact mentioned in most reports of the day, as people scavenged condensation from rooftop air conditioners just to get by, and hospitals couldn't clean up the unusual amounts of blood gathering there. The rebel-approved city council’s leader “said that between 60 and 70 per cent of the capital’s residents do not have enough water,” the Telegraph reported, blaming a “technical problem” that would soon be fixed. [T6]

But there were widespread rumors, given a high and muddled profile even outside Libya, that loyalist sabotage was to blame. The New York Times' David Kirkpatrick noted how “rebels leaders … sought to link the shortages to fears about sniper fire and sabotage from retreating Qaddafi loyalists.” [DKN] Some echoes of their engineered fear said “BBC reporters are saying the water supply for Tripoli is contaminated, possibly poisoned.” [BB] The BBC actually reported how “the Telegraph's Rob Crilly tweets: Hearing that Gaddafi forces have been trying to disrupt Tripoli water supplies (and I hope nothing more sinister besides).” [BC] The Telegraph in turn reported how “fear began to spread after discarded pellets of aluminium phosphide were discovered at a civilian water plant close to Misurata.” [T4] The fears spread far, and the CIWCL sees no mechanism for the poison’s spread to Tripoli, aside from the movements of Misratan fighters.

Kirkpatrick suggested a prosaic cause for the lack of water; the Great Man-Made River stopped. The government hydration system, drawing from the massive Nubian Sandstone
aquifer beneath the southern desert, needed electrical power to run. And this, as noted, was sporadic, in some places apparently cut. [DKN] An Al Jazeera English video report by James Bays, Aug. 27, supports this. Standing atop the massive expanse of concrete lids at Tripoli’s “water plant,” Bays addressed rumors of sabotage or poisoning as “not true.” Rather, the tanks were all empty, unable to be re-supplied, as usual, “through a series of reservoirs, the furthest one in the deep south of Libya.” An electricity shortage there, 45 days running, was blamed for leaving “no way to pump water to the capitol.” Bays heard this from engineer Tarik Al-Shogman, who thought it might take a week or less to fix the problem if their engineers “successfully re-start the system.” [JBV]

Saudi Arabian news agency Al Arabiya reported on the 30th that more than a fuel problem, “the pumping station … had been damaged.” [AR] Damaged by what in July, if not NATO bombing, was unexplained. Further, the plant was in the city of Sabha, still loyalist-held, so to fix it would require a “big military force” to “escort a repair team of engineers,” and that force wasn’t available yet. [AR] The NTC’s assault on Sabha commenced around September 19, one week after the water problem in Tripoli was quietly fixed. [UT] So it doesn’t seem the real problem was there after all. Besides, it’s too coincidental for comfort how that would lead to the reserved water running out almost exactly on August 20, as the rebel assault started. It was “a week ago” when the water stopped, a local man told Bays on the 27th. [JBV]

The European Union’s humanitarian office was told a different story; “pro-Gaddafi forces in Sirte,” not Sabha, “had cut off the water supply to Tripoli.” [TR] Again, the rumors presaged conflict; a rebel spokesman in Benghazi threatened the loyalist holdout city: “In the end, we will get Sirte, even if we have to cut water and electricity’ and let NATO pound it with airstrikes.” [CLS] Over six weeks, intense bombing and surface attacks fairly leveled the whole city, and killed uncounted thousands. The only way to leave was through a checkpoint run by people who had already promised to “punish even those that supported Muammar with words.” [CLS] Electricity was cut and water mains were burst, backup reservoirs were damaged, trucked in water from the UN was kept outside the city, and Reuters heard “both sides accuse the other of cutting off water and electricity” there. In addition, fuel, food, and medicine were effectively embargoed by various documented tricks; the very density of NTC war crimes against Sirte is staggering.

In both Tripoli and Sirte, the loss of water and electricity were blamed on the attacked government, but best served the opposition, and was likely their doing. What they told the world was likely a string of inconsistent cover stories, where the rebels turned off nothing. NYT’s Kirkpatrick captured the one known exception, where minister Farage Sayeh in Tripoli may have admitted the partial truth when he “said in an interview that the rebels had turned off the city’s water supply,” but only to help, on the unsubstantiated rumors “that Qaddafi loyalists had poisoned it.” [DKN]

### 3c) Medical System Attacks, Outside of Hospitals

There were several extreme violations of medical neutrality in the fight for Tripoli the CIWCL has found information about. Most of the incidents were blamed firmly on
government supporters, but some of them provide adequate reason to doubt that and suspect rebel authorship. One such incident happened just outside Tripoli Central Hospital, indicated by the arbitrarily placed red burst in the upper middle of the map on page 15. A Bruno Stevens photo of August 25 showed a woman holding vigil over a hospital bed holding her comatose son, 26-year-old Mohammed Hamad, “a doctor in the hospital.” Stevens passed on that he’d been “shot in the head by a Khaddafi sniper as he was taking care of a victim in an ambulance at the hospital gate.” [BS32] There’s far too little detail to ascertain how likely that claim of a Gaddafi sniper was. The skin color of the patient he was treating, as we’ll see, is one of the more crucial unknowns. While a loyalist sniper is certainly a possibility, in a war zone where the rebels were winning with swift ferocity, the roadkill’s family might exhibit reluctance to pick a fight with their “liberators” by accusing them of such crimes even if they’re true.

The two red bursts on the middle-left side of the map represent crimes of relatively clear rebel guilt, although this has been only partly recognized by the West’s media and organizations. The northern one represents a field clinic within a small tent city just outside Bab Al-Aziziyyah. Spanning across several grassy lots at a traffic roundabout, the camp was struck during the rebel onslaught, prior to the 24th of August. At least six people were found executed inside the medical tent, two wounded on beds, one with an IV drip still in his arm. The victims are primarily Black in appearance, with Gaddafi-loyalist-green cloths tied to their wrists. AP reporter Hadeel Al-Shalchi noted some were found with “their hands bound by plastic ties and with bullet wounds to the head.” [SAP] There was however one man who was clearly stabbed in the top of the head with something like a sword or a bayonet. [CLR]

Al-Shalchi thought the victims were “in all likelihood activists,” not fighters, “who had set up an impromptu tent city in solidarity with Gadhafi in defiance of the NATO bombing campaign.” [SAP] Gaddafi’s volunteer human shields, normally unarmed but possibly militarized at the end, were slashed right through, even where medical neutrality failed to protect them. There were a total of at least 30 corpses seen on August 24 and 25 in the immediate area of the medical tent, most of them apparently executed. These seem to be other apparent activists, slain motorists killed next to their bullet-riddled cars, possible “African mercenary” types, and at least one internal security soldier in blue camouflage. In some cases, the rebels tried to say Gaddafi’s men killed these people. No one bought that allegation, and even in mainstream accounts it’s pretty clearly the rebels who did most or all of this. [CLR]

Al-Shalchi also cited another corpse at the site that “was completely charred, his legs missing,” and that “the body of a doctor, in his green hospital gown, was found dumped in the canal.” [SAP] Next to the medical tent was a stationary fire truck and an ambulance, parked up on blocks. Whenever it had become immobile, perhaps just from fuel shortages, it was used for treating people recently. The last patient, a Black soldier in camouflage pants, had suffered a bloody wound to the lower right leg. It seems he was then bandaged up partially, and was then apparently executed as he lay there on the bed. His leg was still dripping blood on the floor in one photograph, and the victim has been
rolled face-first onto the floor, as seen later by Bruno Stevens. [BS31] The medics were missing, and medical supplies strewn about, likely looted.

Human Rights Watch reported on the 27th about 18 bodies found a few blocks southwest of that spot, in patches along a dry riverbed between the Ghargour district (just west of Abu Salim) and Gaddafi’s compound. HRW was told these men had been killed by Gaddafi loyalists at different times over the week prior to “August 25, when the rebels seized control of the area.” The victims are almost exclusively Black, by the available photographs. HRW found that only two had their hands bound as they saw the bodies, and another two “were wearing the green scrubs of Libyan doctors and nurses.”

These two bodies aren’t shown in HRW’s public images, but seem to be among four executed bodies along the same river/canal as those. Seen from four different perspectives in three known videos and one photograph, they’re piled near the intersection of the canal and Airport highway. Two of these wear what could be surgical scrubs of slightly differing shades of blue-green. They’re both black males, laying on a concrete walkway with handrails, presently unbound, but apparently executed in some bloody manner, as shown at left. The third victim, in purple, is all but invisible here behind the two in the foreground, and another apparent black man in light blue lays a ways off on the street's edge, upper left here. [CLD]

Although the crucial clue of race never came up, Human Rights Watch is clearly hearing about the same incident from concerned locals who explained the killings. “A medical laboratory engineer” named Kikli told HRW how two African fighters at his home asked if he was a civilian, threatened to kill him anyways when he said yes, and then ten minutes later attacked someone else instead; “I saw them taking a doctor and another guy from an ambulance” nearby, he said, shoot them dead, and siphon the gas. “The ambulance said “February 17 Misrata” on it,” he added, strongly suggesting a rebel ride, as opposed to the one parked at the medical tent with another executed Black guy inside it. [HRW] Another witness told HRW that later he saw that “two people with dark skin and in civilian clothes were driving the ambulance,” after putting the gas back in it, apparently, “when they dumped three bodies next to his house.” HRW inspected the three bodies, the same Black men, at one point numbering four, that we can see above. Kikli accompanied and told them “the third body, dressed in civilian clothes, was that of the driver.” [HRW] HRW apparently accepted that this man they examined drove this rebel ambulance coming in with the famously racist Misrata brigades, until the Black mercenaries of the “King of Kings of Africa” (see 4c, page 29) shot the crew dead. The CIWCL finds this unlikely.
3d) Blowing Up Green Public Hospital

Located just down 2nd Ring Road from the Abu Salim hospital, Green (El-Khadra) public hospital was an apparently loyalist-run establishment prior to the rebel onslaught. It’s named with the government’s color, reportedly treated loyalist fighters early in the civil war, and quite likely did the same at the end. It’s situated on Hadbah road, just across from the famous Rixos hotel, where the foreign journalists were based. Considering that location, the media silence regarding what happened at there is noteworthy.

Battles were fought around the hospital in the first days of the assault on Tirpoli. Rebel twitter accounts passed on news and views like “Hadba Khadra FF’s have cut 3rd ring road indefinitely , fighting ensued with Gadafi Militias near Rixos hotel few meters from Khadra Hospital” (9:24 AM Aug 21), “Khadra hospital and da palaces next to them should b searched.G men r there” (7:11 AM Aug 22), “contact in #tripoli: snipers still stationed in the khadra hospital. #libya” (2:49 PM Aug 24), “8/24 From a Good Source: LisaatSky_Fighting around airportroad The area is called Al Hadbah al Khadra where I lived its not far from Rixos edge Nasr forest #Libya.” [LU]

The International Medical Corps (IMC), in their report on a year of assistance in Libya, noted for August 27 – the day after the Abu Salim hospital massacre made the news - on this other hospital re-opening after a mysterious closure. “Aug 27: In partnership with Libyan Volunteer Doctors, International Medical Corps opens Al Khadra hospital after the emergency department was destroyed by a missile,” at least some days prior, apparently. [IMC1] Another IMC report includes a brief mention with a photo (inset at right).[IMC2] It’s not clear if anyone was killed or injured there, although it seems unavoidable if the ward had been in use. A 13 minute video, uploaded to Youtube Sept 9 2011, shows a heavily damaged interior in some detail. [KHV]

It’s not clear when the photo or the video was taken, and neither IMC report gives an explanation for how or just when this damage occurred. It quite likely happened during the fighting, like in the battles of early on August 21, or perhaps earlier, by some NATO strike. But rebel doctor Moaz Zeiton wrote for BBC News on Aug. 29: “the main accident and emergency department of Al Khadra Hospital (one of the largest in Tripoli) was completely destroyed by a missile a few weeks ago, that had been fired by regime loyalists residing near the now infamous Rixos hotel.” [ZB2] A few weeks before would be early to mid August, well before the rebels arrived. Why on Earth they’d blow up their own hospital at that time isn’t explained.
 Taking Zeiton and the IMC together, it would seem there were ongoing repairs from this pre-invasion event. Unfortunately, these weren’t completed in time to let the hospital open and help during the darkest days of the rebel onslaught. But with the IMC’s help, from the 27th forward, El-Khadra was available to those who managed to survive that long. On the 31st, the IMC announced they were still supporting several hospitals including this one, and on September 23, the El-Khadra joined Facebook [AKF].

3e) Abu Salim Hospital: Red Cross Help, Too Late?

The last news from the trauma hospital prior to the big news days was at some uncertain time on the 22nd of August, two days into the rebel assault. On that day, a team from the Red Cross/Crescent delivered medical supplies to several hospitals, including our subject. A news release quoted George (Georges) Comninos, the head of the ICRC’s delegation in Tripoli:

“Today, our team started providing medical facilities, including the Abu Slim Trauma Centre, with some of the supplies they need in order to treat casualties. We are delivering enough medical supplies to treat at least 300 casualties. The consignments include surgical kits, dressing materials and intravenous fluids.” [RC2]

Four days later, A Bridget Comninos, perhaps his wife, would help the Red Cross/Crescent evacuate 17 patients from the growing stench of the reported 164 dead. The bulk of the deaths, many at least by execution and not neglect, seem to have occurred on August 21 or 22 (see p. 38), with some perhaps occurring later. That puts this early visit either shortly before or shortly after this massacre.

The ICRC team may well have walked right past the scene, presuming the blood was just from the wounded plus little cleaning in the absence of adequate water. There wouldn’t likely be any stench from the people killed just hours before, and no sign was mentioned of any noteworthy number of dead bodies. Nor, interestingly, was there any mention of the 164 imperiled patients who would soon be reported as dying right around then. Instead, they saw something more like what everyone saw from the 25th forward.

“In one of the hospitals we visited today, only one doctor was left to look after 25 patients, including 15 seriously wounded,” added Comninos. “We are mobilizing a complete surgical team to support the medical staff and help hospitals cope with the situation.” [RC2]

25 Patients only, during the battle for Tripoli? Another source confirms the situation described above was at the one hospital named. The Telegraph reported “at the Abu Slim Trauma Centre a team found just [one] doctor looking after 25 patients including 15 very seriously injured.” [T1] This sounds like a total number of living patients and is almost exactly the same, strange, post-massacre situation we’d see later – 21/22 patients, 1-2 doctors, 2-5 nurses, and lots of corpses. The only part of that formula missing on the 22nd was a mass of bodies, or a report of them anyway. This silence on the bulk of the patients, alive or dead, could have three reasons: 1) they were alive, but not mentioned, 2) they hadn’t yet been admitted, or 3) they were dead but not mentioned. The CIWCL’s
conclusion is that the last option is most likely, realizing that casts doubt on the alleged staff and **smacks of a cover-up**.

Mr. Comminos and the Red Cross assured the public, just after the massacre it seems, that they were “maintaining regular contact with the main hospitals,” something they’d managed for months already “despite the highly fluid front lines.” He added, in a possible sign of worry, “it is still difficult to get a clear picture of the overall humanitarian situation. We continue to urge both sides to respect civilians and to let medical workers treat the wounded.” [RC2] The lines had apparently already gotten too “fluid” to maintain contact with that hospital as it was, and no respect was shown when the front line apparently moved into its wards.

**3f) Abu Salim Hospital: Civilization Returns on the 25th**

There would be no further news the CIWCL has located for about three days after the ICRC visit. The next possible glimpse was a vague tweet from the CBC’s Derek Stoffel, 11:29 am on the 25th. “Went to hospital near to Abu Salim. Four ambulances pull up in the 10 mins I'm there. About 30 injured brought in in 2 hour period. [DS] He mentions no massacre clues seen in his two-hour visit and “near to Abu Salim” is vague; he could just mean ‘near to the fighting there’ and refer to Tripoli Central. That same day, the New York Times reported how the fighting - in Abu Salim - was stuffing Tripoli Central with bodies and with patients who would often become bodies. [TFK] This piece makes no mention of the hospital *in* Abu Salim knocked so brutally out of commission, as a cause of the strain they saw.

It’s said rebels secured the hospital on this day, Thursday the 25th, but not fully the area even as the Al Jazeera English crew came in. Andrew Simmons said “we came under small arms fire on the way out and the way in. The fighting is close.” [AJE] No one was injured, and the fire was apparently just to announce that shooting loyalists were still present, and the rebels were still not in full control. Therefore, it’s implied, they were certainly in less control days earlier when the passive dying in the hospital occurred.

On that same first day, a team from Médecins Sans Frontières (MSF, Doctors Without Borders) reported that they “rescued two patients in very critical condition from Abu Salim hospital, which was surrounded by intense fighting at the time, and transferred them to Tripoli Medical Center.” [MSF2] This visit was clearly post-massacre. Jonathan Whittall, MSF emergency coordinator, later explained “when we arrived at Abu Salim, we faced quite a shocking scene: dozens of dead bodies were lying in the hospital’s compound.” [MSF2]

The next day Simmons’ report aired, other media visited and broadcast, the ICRC returned to move the rest of the survivors, and the latter news came in on the 27th. Only then did MSF report on their early and perhaps awkward visit, compressed into a report issued on the 27th. [MSF2]
Section 4
The Reported Victims, Considered

4a) Death Toll and Locations

Underscoring the need for investigation is the fact that there is no clearly established death
toll, range reported from 40 to over 200. CTV passed on a total of “as many as 200 bodies.” [CTV] Photographer Alfred de Montesquiou said “aid workers and residents found 200 corpses” there. [AM1] “More than 200 decomposing bodies … of men, women and children” were reportedly found by the BBC’s correspondent (either John Simpson or Wyre Davies), but it’s doubtful either personally reached this count. [SBB]

Alex Loyd for the Times of London tallied “70 dead in the morgue, another 30 inside the
building and at least 20 in the grounds,” for total about 120. [AL] Again, it’s doubtful he
did all that counting himself. Dr. Salem Qasr told Al Jazeera English “I think more than
100” bodies were present. Reporter Andrew Simmons said “we left unable to verify the
total number of dead. We saw 39 bodies. One had said up to 150 are kept there.” [AJE]
Photographer Bruno Stevens reported that “about 100 bodies” were there “before being
transferred to a functioning morgue in another Tripoli hospital.” [BSP] (A volunteer who
seems to have been crying not long before speaking to Sky News tried to explain “we go to
put them in the other hospital, in, ummm Tripoli hospital, the big hospital.” [SNV])

Dr. Osama Bilin, a volunteer gave a passed-on total and his own verified minimum; “they
told me it's around 200. But I saw myself, it's only 40-50 maybe dead bodies.” [T1]
Anthony Shadid and Kareem Fahim from the New York Times reported back only 40
bodies, presumably their own minimum count. [SF] Others were a bit more rigorous; Alex
Thomson reported for CNN “I've counted at least 75 thus far.” One presumes he did reach
that tally himself. [VAT] The Libyan NTC Health Minister, Najib Barakat, cited a total of
75. [AP1] AFP earlier estimated the number of corpses at around 80. [FP1]

After all that, consider that volunteer nurse Mohammed Yunis said on the 26th that, as AFP
reported, “numerous bodies had already been removed from the hospital.” [FP1] Consider
also that, as fighting continued, it’s possible more bodies were dumped there after some of
these tallies. There are simply too many unknown variables to be certain, but we can take
75-80 as a “no smaller than” number, and note several informed tallies in the 100-plus
range.

All things considered (some of them below), the lower edge of the upper end seems to
offer the best total number. A photo was posted August 30 on Twitpic of the north loading
area, apparently late on the 27th, with several plastic-wrapped bodies. The accompanying
text explained “2days ago in bosleem hospital #Tripoli dead bodies being removed but still
not buried. Approx 163 bodies.” [EH] That approximate count is supported by “Ricky”
with Press TV, reporting on the hospital's re-opening on September 14. He was told “the
staff fled and **164 patients** died,” which he was told were “civilians and fighters alike.” [PV]

Thus 164 is the best overall number, but the highest area-by-area tally runs to 120, and most counts top out around 75. If this is the final total, it’s not clear at all where the other **40-90 unseen victims** were at and what their remains looked like.

Those corpses the CIWCL knows of were scattered across several locations in the hospital and on the grounds. Off to the side of one bloody stretch of hall on the main floor is what Simmons was told was the sick ward, but really is the blood-plastered “plaster room,” containing what we can confirm as a minimum 23 or bodies on their blood-smeared rolling beds. Alex Thomson had “at least 23 more corpses shoved onto trolleys at all angles.” [AT4] One AFP report cited 25. [KT]

Besides the “sick” Africans left there, it’s not clear how many others were on the main floor or where. At least two victims were found executed with guns up on the second floor, as explored in detail below, but it’s unknown how many others were up there or where. Clean-up volunteer Dr. Osama Bilin “They told me there are also maybe **40-50 dead bodies in the second floor**, I did not see myself.” [T5]

There were also an unclear number of corpses putrefying in the basement morgue, some of which could be from before the massacre. Alex Thompson describes “scores,” [AT] while Alex Loyd reported 70 bodies here. [AL] The CIWCL can verify only 14 bodies, 13 of them laid out in a series of three small connected rooms. One of these bodies was inside an open cadaver drawer set in the wall, surrounded by 11 other closed drawers. If all of these were full, the number would be at least 25. A part of the crowded morgue is shown below, with the bodies seen labeled by the CIWCL’s count.

Rebels in the basement morgue. Panoramic image stitched from screen grabs off an AFP video [FP3]

Other bodies were seen on rolling beds outside; only one of them was apparently there on the 25th when Simmons visited (“the ghostly image of a [single?] dead body on a trolley”) [AJE], but several at a time were there over the next day as the clearing-out commenced.
These are too mobile to get a count by them, but one more stationary group of great interest was to be found nearby. Another 20-23 bodies, most of them in civilian clothes, were piled helter-skelter along the north side of the walkway to an outbuilding on the northwest corner of the grounds, area A in the graphic below (these bodies will be described in sub-section 4e). This graphic is based on Google Maps imagery taken in late August, just a few days after the media imagery. Other areas of possible interest besides “A” are labeled and, beneath the image, explained.

Area A = The northwest out-building, with strange black doors in front of which app. 20 bodies were piled. The satellite image is taken after body removal.

B = The front loading area and northwest drive, where many empty beds were left after body removal. At least 57 are visible, pushed west awaiting removal, with others perhaps still underneath the covered promenade.

C = Apparently two beds, empty. It’s possible, for example, that these were two “high-value” patients rolled out a side door and driven off for special treatment, leaving their beds behind.

D = A whole lot of something, probably garbage, but possibly in part bodies the media wasn't shown.

E = Surrounding street, southwest corner - of possible interest, something messy happened on the street back here.

F = A back loading area, quite possibly usually used for garbage pick-up. The apparent garbage bags piled here could contain human bodies, at least two dozen of them if so.

The CIWCL’s minimum total of visually verified bodies is 67-83 out of the accepted total of around 160. This includes 14-25 in the basement, 23 in the sick ward, 20 in the pile outside, and an arbitrary minimum range of 10-15 from all other areas, as seen in situ or out front. Between the large numbers given for bodies on the second floor and in the morgue, this minimum is almost surely well below the actual number of bodies, which we will consider most likely near the cited 164.
4b) Identity Clues, Race, and Loyalty

According to the rebel narrative of things, a dead or injured person during the conquest of Tripoli was to be presumed an opponent of the government attacked by forces or agents of that government, generally ubiquitous snipers. As at Tripoli central hospital, cite “most by snipers.” [C4] Wyrie Davies reported “many put the blame” for the killings or injuring that later became fatal, on government forces “taking revenge on anyone suspected of opposing [Gaddafi] as he lost control of the capital.” [SBB]

A few alleged victim names have been offered in mainstream news reports, presumably fitting the mentioned mold. Shadid and Fahim for the New York Times said “the relatives of one victim, Abdul Raouf Al Rashdi, a 33-year-old police officer, said he had been killed by a sniper several days earlier in the Hay Andalus neighborhood.” [SF] La Croix’s reporter saw local Fathi Ashraf lifting the sheets on the bodies, looking for “his brother, a ‘simple person’ missing since the battle of Tripoli.” He gave up after a while. [CT]

Al A’an, a women’s channel from UAE, aired an Arabic-language segment on the hospital August 27, interviewing a relative of a victim standing next to the pile in area A. [AH] – the CIWCL’s translator was able to help understand it and research the names given. [CLV] The man interviewed is Osma/Osama Al-Hotmani, apparently a mid-toned Arab man (although it’s hard to be certain), and he tells the host he just identified a cousin named Musa Saleh Al-Hotmani, in the pile of corpses that’s almost entirely Black African in composition. [CLV]

Another missing relative he names, who never did turn up, appears to be a rebel sympathizer named Abdel Mola Al-Hotmani, who went missing in Tripoli on August 21. A photo is around, showing a quite light-skinned young man. Some members of this family gave a video interview where they said a son named Mohammed Al-Hotmani, but not a Musa, was found dead at Abu Salim hospital, a claim supported by a rebel website. It says Mohammed joined the rebels in Az Zintan, apparently came with them in the Tripoli attack, and somehow wound up dumped at the hospital, apparently by the Gaddafi loyalists who presumably killed him. The body was then found on Aug 27 by his cousin Osma, along with or instead of, Musa’s body. [CLV]

There is one body at least in that pile that is apparently a Caucasian/Semitic Arab man, the most visible one, in fact, out front with the green blanket and the flesh of his left arm chewed away by wild dogs. This victim’s skin is darkened with decay and sun exposure, but his face has recognizably indo-European features – narrow nose, long hair with a gentle wave, short beard of straight hair. Osma’s cousin or not, this man is the exception to
the rule at Abu Salim trauma hospital that the dead the people dropped off there to die and rot were primarily men of African origin not explained by stories remotely like this.

The CIWCL has not made anything like a detailed study of every corpse, but it’s not necessary here to make the general point. Many others who were there have noted the obvious trend for these to be Black men; Hadeel Al-Shalchi wrote for the Associated Press on at least 41 bodies she verified, “all of them darker skinned than most Libyans, covered with blankets.” [SAP] Anthony Shadid and Kareem Fahim of the NYT reported “most of the fighters were darker skinned than most Libyans, a sign, rebels there said, that they may have been recruited from sub-Saharan Africa.” [SF] It’s not just skin color, but African hair type and facial features visible on several bodies.

Najib Barakat, head of health within the NTC announced “we don't know who are these bodies … we'll take a tissue sampling and then we will wait and we will analyse them. If they are missing persons, Libyans, I'm sure we can identify them through the families, if they are mercenaries unfortunately we will not be able to identify them.” [AP2] This suggests he too was under the impression they were by-and-large of Black African descent, and that he expected few if any matches. Dr. Sami at Abu Salim hospital itself told the Guardian “most of the bodies we had here were black Africans.” [GCS]

The CIWCL agrees. The pile outside, as far as we can tell, are all Black except the one mentioned on the last page. Inside as well, it’s easier to count which victims are not apparently Black. Both of the upstairs soldiers executed in their beds (see 4d) were lighter-skinned Arabs. Another body seen briefly zipping by is a bearded light-skinned male, with a nasty wound on his right shoulder. [BS24] An older man with a neatly-trimmed gray beard lays on a tray in the basement morgue (body #2 in the graphic on page 25).[SBB] There are a few others around, probably at least seven total but not much more. Of those seen, about 90% are possible-mercenary-types.

A few reporters and several photographers noted the apparent loyalty clues. Canadian Janis Mackey-Frayer was able to cite a military identification card (see below), among other clues, to determine “the bodies we saw were those of Gadhafi loyalists who were wounded in battle.” [CTV] The French paper La Croix reported (translated) “In view of their clothes, most of the fighters would be loyalists.” A clean-up volunteer, Ahmed Bzuti, explained to them “the soldiers of Gaddafi had to file their dead here,” but the signs suggested others had helped file them in the dead category. [CT] Photographer Bruno Stevens said “details of what happened are unclear, but it seems most [victims] were wounded Khaddafi soldiers.” [BSP]

4c) A Rebel Hospital for Mercenaries?
The Black patients who perished were directly described as mercenaries in some instances. The NTC’s health minister, for one prominent example, said on the 28th that the abandoned hospital “used to be used by the militia or the mercenaries.” [AP2] But as usual, the facts are hard to pin down. Some of them appear to have been foreigners anyway. The UK Daily
Mail’s reporter mentioned “a litter of the dead’s ID cards” to be found next to some of the bodies at the front of the hospital. “Two of them revealed that 21-year-old Mahamat Cherif, from Chad, and Saidou Massatchi, 31, from Niger, would not be going home […] they cannot even try to explain why they fought for Gaddafi.” [DM1] Nor can they explain if they fought for Gaddafi as opposed to doing manual labor or trying to get to Italy.

The Guardian was given a tour of the killing grounds by “Dr. Sami, a trauma surgeon.” Referring to African mercenaries coming into Libya to fight “for Gaddafi,” Sami showed them a prize kept by “the cleaners:” this was “a wallet-sized card issued to a man from Chad.” One side ironically guaranteed safety to the carrier, the other announced he was “here to protect the king of kings.” [GCS] This is a reference to Muammar Gaddafi’s honorific title “king of kings of Africa,” first bestowed by African leaders in 2008 for his efforts toward African unity. Sami said these cards were “given to the mercenaries. There were dozens like this.” His description of how their holders came to be in the hospital and then came to be bodies is strange:

“We had many, many of them in this hospital in the past few days. Most couldn't speak Arabic, or English. They would just point at their injuries. They didn't want to be admitted even if they were in agonising pain. Most of the bodies we had here were black Africans. And most of them were not claimed by anyone.” [GCS]

The Guardian also spoke to a Dr Ghassem Barouni “in a second hospital, Shara Zaweya, in the centre of town.” This means Tripoli central hospital, where the doctor had “been treating suspected African fighters.” From one of them, a self-described Libyan loyalist, Barouni had taken a Tuareg magical necklace (called gri-gri) ironically believed to protect one from bullets. Dr. Barouni said:

“It is 200% true that there were mercenaries here fighting for Gaddafi. Many of them came just for that purpose. But there are others who have been here for a long time. They were allowed to work here and they were given benefits. But there was a price to pay for that. When the time came they were expected to fight.” [GCS]

As Gaddafi fighters, these shared leavings are useful in being quite dark-skinned on average, with perhaps some of the lighter-skinned victims hidden or removed early. They’re supposed to illustrate the point Gaddafi was supported only by African brutes, not the Libyan people. But really it’s a reminder that Africans or Black Libyans have been widely killed as mercenaries with or without that being true, trying to make that point obsessively since mid-February. By being so totally Black, the hospital victims help clarify this was most likely a rebel crime used to again support that rebel myth.

4d) On-Site Executions

Some of those killed were clearly the result of military fighting. Some were in uniforms, and Alex Thomson noted a possible rocket attack victim: “another body, inflated with decomposition … Male, fighting age, half the head missing.” [AT4] Others were brought here after being killed and even dumped for a time elsewhere. One odd area of the
basement seen by Sky News bears at least one body on a table “too gruesome to show.” [SNV] This seems to be the same area where Ron Haviv shot a photo of a well-decayed victim with a skeleton’s face, presumably from animal predation before being placed here [RH] Another view from an unknown photographer shows more detail yet of this #1 of 14 bodies seen. By the remaining hair, he seems to be a rare Caucasian victim. [U1]

Hospitals in war zones would be prepared to deal with these horrors passing their doors, and they will frequently feature plenty of blood, generally in running lines as the injured are rushed to operating theaters. With the staff and water shortages hampering the ability to clean, a hospital in Tripoli in August can be expected to be extra bloody. But in Abu Salim the tile floors and sometimes walls also have more stationary, more troubling pools and patches of spray that make it hard to see anything but widespread executions at work.

At left is a photo, by Yousef Boudlal of Reuters, of the blood-smeared floor that's extremely interesting as evidence. [YB] As many as seven areas of blood-spray are visible, and there’s another spot just around the corner ahead, as Al Jazeera's cameras showed. [AJE] Simple drips from a parked gurney can look a bit like this too, but in the foreground is what looks a bit like the spray of someone's brain blasted out right there, with most of the actual matter scooped up (from the yellowish patch in the middle) before the cameras arrived. It’s quite possible that several people were executed in this very stretch of hall.

CTV’s Janis Mackey-Frayer, while claiming perplexity on whose crimes were on display, had valuable clues on at least two victims that established beyond a doubt that executions occurred at Abu Salim trauma hospital:

*At least two men were shot in their beds. They were on the second floor covered with blankets. As the gurneys were wheeled away you could see where a bullet had passed through the pillow. The blood on the wall hinted at an execution [CTV]*

The CTV video shows the two beds, a close-up of the bullet mark on the wall (the spot circled in red in the graphic here) with its surrounding spray, and a bullet casing on the floor. All of that combined more than hints at a war crime. [CTV] La Croix saw how at least “one wall of the hospital,” perhaps this one, “seems to betray an impact summary executions.” [CT] Various photographs the CIWCL has assessed show dramatic blood drips just beneath both the bullet marks and large pools of collected blood beneath them. In the case of the man on the right, some of the blood was captured in a plastic water bottle, for unclear reasons. It’s an unsettling scene, presented artfully on this report’s cover.

Several images by Dutch photographer Bruno Stevens show the wheeling out of these two
bodies to reveal the bloody wall and floor. One shows the pillow ripped through for the victim on the left, the mattress just skimmed, and the metal frame nicked by the bullet, after passing through his head. This spells a powerful, close-range shot. Another Stevens photo shows that victim, his head covered by his arms (included below). Looking closely, it appears that the buzz-cut top of head was blown completely off and laid back in place at an odd angle. [BSP]

As Stevens noted “wounded Khaddafi soldiers who were later executed on their hospital beds in what constitutes a massive war crime.” [BSP] Mackey-Frayer also noted one of these tow bodies “had a **Libyan military card identifying him as a special forces member.**” [CTV] There were actually at least two cards, possibly for the same man, or perhaps for both men. Various views, enhanced for clarity, are compiled into the graphic on the following page. Bruno Stevens snapped the cards laid on the covered body on the right, as his bed was wheeled away, and also a worker examining one of the cards, wide-eyed. The red card is seen close-up in a Reuters video. (lower left). [VR1] It was seen again with a clearer view of the photo - again by Stevens - as this victim lay parked at the north loading area awaiting removal (middle left) [BSP].

The card is somewhat readable and can be translated by the CIWCL. The top two lines say “special ID,” something, and in yellow, that he belongs to “brigade,” something (invisible) “enhanced.” Despite the obliteration of the 32 in between, this almost certainly refers to the 32nd enhanced brigade, the famous “Khamis Brigade.” The next lines show ID number 586314, and name, something very like Jaafar Ali Abdallah Al-Gharyani. Finally, he was
blood type B+, ID issue date 2010/03/22. In two further Bruno Stevens images, the usually-covered soldier Al-Gharyani has his head revealed. The right eye seems injured, but otherwise his head seems intact. The long face is consistent enough with the card’s image, but his beard had grown in and his wavy hair had grown very long, apparently a common thing among loyalists in their hardcore final weeks. [BSP]

Aside from, perhaps, that man’s eye, the troubling signs of Islamo-nihilist cruelty that can be determined are fairly thin here, compared to the shed massacre site covered in the CIWCL’s first report. There we have documented a slashed throat, tortured arms, severed hands, two possible beheadings, smashed-in faces, and gouged-out eyes. [QY 3.2.4]

Here, even in the blood-plastered plaster room, much is hidden beneath those translucent blue paper sheets, with little to show what exactly killed these men. It’s possible the 23 or so men in the plaster room were already dead when put here; wounds will continue to seep blood for perhaps days as a body drains, so the blood alone can’t prove where they were killed. However, these men seem mostly intact and at one point taken care of. One has fresh casts on his left side, likely applied here in the plaster room, and another has a breathing tube in his mouth from time on a respirator. Others are bandaged, including the victims shown below. There’s little reason, therefore, to expect uncovered wounds on this scale unless if was in fact a mass execution with no bandaging afterward.

But what we can see is at least one victim in this room, left of center near the door to the outside, was possibly beheaded by a sword right there in his bed. Between this Black man’s shoulders seems to be not a head but an expanse of bloody mess the blue sheet is pressed into. The cushion edge shows a cascade of blood, as if from a gushing jugular vein. There’s a possibility this is a misreading of where the man’s shoulders are, but the impression is supported by the right hand apparently resisting something, best seen in the detail at right from a Reuters video. It shows what seems to be a torn fingernail catching sunlight, or possibly the pink tissue beneath a fully removed nail, after his hand had been bandaged. Either way, the access to soft flesh beneath seems to have attracted a fly.

![Image of a hand with torn fingernail]

This impression is open to question, but is strengthened by a similar one-armed act of defiance that can be seen with one of the apparent beheading victims at Yarmouk. Charred
victim #1 was frozen carbonized with his left arm sticking up, and his skull present but seemingly at the wrong angle. [QY 3.3.3] (the other beheading victim, an un-burnt Black man from a related site nearby, had his hands bound behind) [QY sec 3.2.4]

4e) Women and Children and the Pile of 22 Bodies

While the visible victims seem to be exclusively adult males, some of those on the scene reported that not all of them were. The BBC’s correspondent, either John Simpson or Wyrie Davies, reportedly “found” a total of over 200 victims at the hospital, including “corpses of men, women and children on beds and in the corridors.” [SBB] Dr. Salem Qasr told Alex Loyd “men, women, children, soldier, civilian, we've got them all dead here.” [AL] Andrew Simmons told NPR after his visit “we could make out men and some women, only a few. We didn't see any children. And we weren't really in a position to be forensic over this.” [NPR]

With abundant war reporting experience, Channel 4’s Alex Thomson was more thorough. When a rebel fighter shot the lock off the door into “the hospital basement,” Thomson saw in the morgue within “scores more bodies.” Most of them were apparently fighters, but one, lonely, “broken child lies abandoned here too.” [AT4]

Not far from the north entrance Thomson spoke of “a pile of human bodies, bloated in the hot sun.” [AT4] This is the tangled heap of human misery in area “A” of the map on page 26. Aside from the basement, this is where children and women have been seen. The CIWCL can count at least 20 corpses here, all seemingly men and a few in military clothing, but with some bodies invisible beneath large rugs. Thomson’s blog said “I count 22 here, including three women, and one child.” [AT4] A video version of Thomson’s report aired by CNN agrees there were 22 victims, but that included “two women, two children.” [AT4] This slight change suggests a young female victims he called a child in one case, a woman in the other. Considering the one in the basement, at least two children total are confirmed, arguably three, and a minimum total of five victims (of the 75 he saw) who were not adult males.

If women and children were among those killed and abandoned at the hospital, the obvious question is what that means. By all evidence, the numbers of them are too low to be the main plan. But if so, something unusual was at work here, putting whole families in danger that was too great in at least a few cases. One reasonable explanation for this builds off of an observable phenomenon nearby. Dozens of cars all over Abu Salim were pulled over, sometimes showing bullet holes and banged fenders. Many are visibly disabled, the doors flung open, trunks emptied. The drivers of these abandoned cars are presumably arrested or
dead, while just what the vehicular offense(s) they were pulled over for, and by whom, is unclear. In a separate case related to the CIWCL’s first report, a rebel fighter described fifteen executed black men near the Yarmouk base as “local residents who had been killed by Al Qathafi loyalists who wanted their cars,” presumably to flee in. [TP] But some clues suggest the people in these cars were loyalist civilians trying to flee from their rebel “liberation.” The LA Times reported on arrests of “people pulled out of their cars at checkpoints” by NTC forces “because they looked “suspicious,” often code for dark-skinned Libyans and others of sub-Saharan African descent.” [TP]

One scene the CIWCL noticed in a video shows what looks like a loyalist green flag and a pool of blood partly hidden beneath pillows just behind one of these ghost cars (see inset). [IV] One man in civilian clothes who was shot in the head, near his car just outside Bab Al-Aziziyah, wore a wedding ring, and had a baby blanket left nearby. [CLR] Perhaps the rebels had a policy of physically sparing women and children while freely widowing and orphaning them. It's not too hard to imagine in this climate a few women and older children, the spirited ones, refusing to be parted from their husband/father, refusing to leave their assailants eyes intact, then being “put down” and then dumped nearby, alongside their main target.

The connection between these scattered crime scenes and the one at the hospital is not obvious, but is supported by Andrew Simmons’ local witness. He tweeted in preview that a restaurant owner saw “GF” (Gaddafi forces) executing civilian motorists on Sunday the 21st, the likely day of the hospital massacre. [LU] As shown in the segment on Al Jazeera English, this is Abdulsalam Turshi, owner of a takeaway restaurant right across the street from the hospital. In the video, Mr. Turshi says he saw “some people [was armed? with army?], just on the highway,” stopping civilian cars. “Just anyone, just open the door, and just killing people for nothing. Just start killing. I saw in my own eyes.” [AJE]

The specified date was well before rebels acknowledge having control of the area, but it’s been reported they were fighting quite near there by early on the 21st. They were presumably in no position to stop civilian vehicles in the numbers seen, but someone was killing all the “suspicious” Black people found at the hospital, some inside of it, on almost exactly that same day. Therefore, the absolving ‘rebel time warp’ (see page 37) seems to explain this small discrepancy, if not Mr. Turshi’s report explicitly blaming the other side.
Section 5
The Staff: Before and After the Massacre

5a) Before: Front-Line Loyalists
There remain valid questions about who was in charge of Abu Salim trauma hospital before, during, and after the massacre. The main question, which has no certain answer, is if the tiny crew of doctors and nurses (about seven) met by the media on the 26th was really, as presented, the remainder of the staff prior to the mysterious events there.

As part of the scene leading up to the violence at the hospital, the original staff is the logical place to start. The number of people normally working there is unclear; the CIWCL has no expert opinion on what to even guess, but defers to Andrew Simmons, media first responder. He told American National Public Radio “there are only seven medics in this hospital. It should have more than 200 staff - it's a specialist hospital.” [NPR] While wartime depletion, especially among foreign workers, is to be expected, the number of missing in action is still possibly quite large. Again, only about seven allegedly remained.

Whatever was said later, there is some evidence and some logic to the staff being, by and large, Gaddafi loyalist. The UK Telegraph explained once in passing that this “was the front line hospital as rebels closed in on Tripoli.” [T3] To be government-affiliated was once the norm for Libyan hospitals, and this one was in a loyalist neighborhood near Gaddafi’s compound. This wasn’t Dr. Zeiton’s Matiga hospital or Dr. Al-Farjani’s Tripoli Medical Center.

Even after the massacre, the “plaster room” maintained a portrait of a defiant leader Gaddafi, with a slogan in green posted above it. This is the standard “God, Muammar, Libya, and Nothing Else,” according to the CIWCL’s translator. At left is a good view of this from a photo by Jerome Sessini, after most bodies were removed, later on the 26th. [JS1] BBC’s John Simpson managed to re-brand this as a sign the loyalist management – or Gaddafi himself, somehow - was responsible, if only metaphorically; “in one room, colonel Gaddafi’s picture smiles down genially over the horror.” [SBB]

There’s virtual unanimity on this loyalist staff’s flight, its approximate date (the 21st) and its cause. Andrew Simmons said on the 26th “everybody had run away with the fighting. And that was nearly six days ago.” [NPR] Volunteer nurse Mohammed Yunis. explained they “all left for fear of the snipers,” [FP1]
and the Telegraph said they “fled sniper fire” five days earlier. [T3] AFP was told the medics fled after being directly “attacked by pro-Kadhafy Snipers.” [FP3]

Medical staff in general, and especially these apparent loyalists in the last Gaddafi holdout area, shouldn’t be expected to casually flee their stations as their compatriots lay bleeding to death in the field or in their own care. Wartime is the time of greatest mass-injury and deaths hoping to be averted; it’s the time they’re most needed. Ideally, there are two main ways they would flee, both when their own lives are in imminent danger: One way is if the walls are literally coming down from shelling or rockets, as seems to have happened at Al-Khadra (see sub-section 3d), but not here.

The other good cause to run is if gunmen storm in and start shooting at the staff. Sadly, the signs suggest this is what happened; the battle entered the hospital, so perhaps many did flee, or were gunned down trying. The possibility at least some of the doctors and workers there were executed cannot be ignored. It’s possible that hospital staff of all colors were among the reported 164 bodies, if not among those publicly visible then among the others, as many as 90 of them, that remained unseen in some other parts of the hospital.

5b) The Sniper Staff?
The rebels and the media’s witnesses cite prevalent Gaddafi-inspired loyalist snipers for everything here. The killing and wounding of so many, including at least some of those at Abu Salim, has been blamed on these green snipers. Then the wounded died from neglect as the staff fled the same sniper fire, and these and the general fighting kept them away for days on end. But implicitly, no one was directly shot in their beds.

Agence France Presse (AFP) ran all the best lines about this, scattered across several reports. They were told the staff ran off only after being directly “attacked by pro-Kadhafy Snipers.” [FP3] Then, rebel doctors said, “loyalist snipers kept new patients and health care workers away from the hospital until Thursday.” [FP1] One presumes the shooters were outside the hospital, on rooftops, and that inside would be safer than outside. Or were the snipers that scared them off based inside the hospital? Someone had told them about that as well.

BBC mentioned “the AFP news agency reported that the hospital was occupied by pro-Gaddafi snipers on Saturday [the 20th], and that it was only on Thursday [the 25th] after days of intense fighting that it was secured by the rebels.” [SBB] This report itself is now obscure, a longer version of a more widely published article of the 26th: “[A]s the hospital had been **commandeered by Gaddafi snipers**, most of the medical staff had fled in fear.” [FP4] That the loyalists had to “commandeer” the place suggests it wasn’t a loyalist-run hospital at all, until August 20 – right when the rebels also arrived. What followed is a tale of fatal mass neglect assiduously enforced by Gaddafi’s sniper interlopers, probably Africans:
“[T]he hospital is located in the generally pro-Gaddafi neighbourhood of Abu Slim, and loyalist snipers had held it since Saturday. […] With the Kadhafi sharpshooters in control, ultimately no one could, or dared, come in or out. Abu Slim saw fierce fighting for days, and it was only on Thursday [Aug. 25] that the hospital was secured. As the days passed, many patients inside died, one after another.” [FP4]

The Telegraph also heard that “the hospital was under the control of forces loyal to Muammar Gaddafi until Thursday evening when rebels took over.” [T5] Control isn’t usually taken from the other side without some force, so presumably rebels entered, with weapons, on the 25th (and no earlier, of course). We’re to presume they did not kill any of the already-dead patients or the tiny remaining staff, and the signs say that happened considerably earlier than that.

The final act for these hidden killers was to disappear; when the rebels secured the place by whatever means, no snipers were shown, fighting, captured, or killed. We only see what were called innocent victims of neglect.

5c) Massacred by Neglect, or Neglecting a Massacre?
The CIWCL’s first major report, “A Question Mark over Yarmouk,” relates an alleged Libyan government war crime, just down the road and at about the same time as the hospital massacre, that also might well be a fobbed-off opposition crime. In that report, a rebel fighter ‘time warp’ played an important role. One clue of the true crime is a tweet from early on the 24th suggesting the Misrata brigades were in possession of about 140 mangled bodies - prisoners killed with grenades, they said, by Gaddafi loyalists. This was said about ten hours after sunset on the 23rd, the time of the alleged massacre of 150 prisoners behind the Yarmouk military base. It’s said this was done on orders from Khamis Gaddafi, and the guards used grenades. But those alleged remains, some now charred to bone and cinders, were only acknowledged by the Misratans three days later when they officially conquered the base on the 26th. [QY section 3.4]

The early tweets and some other clues suggest the rebels were at the heavily-bombed base and killing freely by late on the 23rd, and they seem to have burned the bodies themselves, repeatedly, between Aug. 24 and Aug. 28. But they deny access to the place at all until the 26th. With the help of this three-day time warp, they “proved” they couldn’t possibly have killed those people on the 23rd or see the bodies the next morning, leaving that early report totally unexplained.

The 3-day gap seen there is roughly the same at the trauma hospital. The date of any killing, or of the staff’s flight, are given or implied as around August 21st, give or take a day. “These bodies have been here in the hospital for five days,” volunteer Osama Pilil told the BBC on the 26th, for example. [SBB] Further, the widespread presence of maggots suggests at least two days had passed since most of the victims inside and outside were killed, and probably no more than five days. The size of the maggots - visible from across the plaster room, suggests the longer end of the scale, and a massacre most likely on the
21st. El-Khadra hospital just down the road reportedly witnessed battles as early as the morning of August 21 as the rebels pushed west, so this could be about right. The killings were almost certainly prior to the Red Cross visit on the 22\textsuperscript{nd}, when only 25 patients total were mentioned, and only one doctor (see 3e, p. 22). But the bodies were officially only “discovered” by rebels upon “securing” the facility on the 25\textsuperscript{th}, and immediately shown to MSF and Al Jazeera. This leaves a gap of 3-4 days.

Of course, the rebel narrative has no massacre in that time, just passive death from neglect. AFP’s early report said, based on what they were told, “as the days passed, one after another of those wounded already inside died from lack of treatment.” [FP1] Some noted just when the patients passed away. Dr. Salem Qasr told Simmons how two patients had died two days ago (Aug. 23), when the power was cut. [AJE] The other 73-162 had apparently already slipped away, gushing blood, prior to that day, but he gives no details on that part.

CTV’s Mackey-Frayer reported on two particular victims on the second floor, at least one of which was a loyalist special forces soldier, as detailed in sub-section 4d. “Nobody there claimed to know whether it was Gadhafi or rebel gunmen who executed them.” She asked a “doctor” or some kind of guide, how long he though they had been dead. “He estimated two or three days, then shook his head and walked down the blood-streaked corridor.” [CTV] Seen on the video, the man seems reticent to discuss the issue at all. His time frame would put the killings of these two, if not everyone, on August 23 or 24, vaguely. That’s a significantly later time than usual, and the corpses do look relatively fresh, with no sign yet of bloating, discoloration, or maggot activity, at the available photo resolution.

During this forsaken gap of days, it’s said that some strange ambulances, or vehicles anyway, continued delivering the wounded to a place with no more staff to receive them. This constitutes dumping, and it’s probably illegal to do that to the dead and cruel to load on the living. The BBC’s Simpson just cited it as a weird fact. The staff fled “but seriously injured people kept on being brought in. Dozens of them, perhaps as many as a hundred altogether. And here, they died of their injuries, entirely untreated.” [SBB] Even if there had been a staff, it’s not clear they could have done anything to save someone who’s had their head chopped off or blown in half with an assault rifle.

Hadeel al-Shalchi noted for AP that blood and broken glass littered the floor, and “medical equipment was strewn about” sometime in these days. [SAP] At the outset of the report, the problems, including here at the Abu Salim hospital, were given as a lack of supplies and staff trapped at home and unable to get to work. But we’ve seen how this place was staffed until people fled/died, and was re-stocked by the Red Cross apparently just after it was simultaneously ransacked and looted, depopulated, and blood-spattered. If only they had stayed home that day …

5d) ( Alleged) Staff Remaining on the 25\textsuperscript{th} and 26\textsuperscript{th}
However large the previous staff had been, they fled, with a few either returning or staying
the whole time, depending on which rebel version one hears. The BBC reported “the staff here all ran away days ago because of the fighting.” [SBB] CTV said “when rebels took control of the area a few days ago doctors returned to the hospital, which by then was effectively a mass morgue.” [CTV] Andrew Simmons reported for Al Jazeera English “seven medics stayed behind, and “only two of them are doctors.” [AJE] Others report smaller number for the steadfast; the Red Cross team reported way back on the 22nd “only one doctor was left to look after 25 patients, including 15 seriously wounded.” [RC2] An obscure AFP article cited “just two nurses and one doctor who remained holed up in the hospital throughout the ordeal.” [KT] The best reading of this complex of alleged details is that only one doctor stayed the whole time, and another one, with three more nurses, apparently returned in the intervening days.

It's not entirely clear the post-massacre staff was actually a remainder of the old, but everyone who heard them speak was given that impression. The impression creates an inverse version of the rebel time warp as just mentioned in 5c, where fighters claim they were not in control of an area until some days after whatever murky massacre occurred there. The rebel hospital staff works the other way around – they were there before and perhaps during the event, and didn’t come in with the rebel takeover at all. And it’s primarily by their story, primarily, that we were to believe there had been no massacre.

If the rest of the staff had fled, they should have lived and could return. The low number there, still on the 26th and 27th, could be due to the aforementioned traffic problems, or on most of them being dead or hiding. In a manufactured narrative, a small staff would be easier to create and also would help explain the massive of life there happening by accident. Considering this uncertainty, all those staff who helped shape the media’s perceptions of the neglected massacre should be approached as possible perpetrators or allies of same, and are thus worth a little bit of a detailed consideration.

- Dr. Salem Qasr

Andrew Simmons of al Jazeera English spoke on-camera with one un-named staffer described as a surgical technician, name not given. [AJE] What seems to be the same man is pictured outside the hospital early afternoon of the 26th and named as Dr. Salem Qasr. [SM1] The same “surgical technician” Salem Qasr was interviewed by Anthony Loyd of the Times of London (“Hospital turned to charnel house by fleeing regime”). Loyd cites “Salem Qasr, an anaesthesia technician who was one of the last five staff to abandon” the hospital when it came under attack.” He sounded almost like a salesman speaking to Loyd: “Men, women, children, soldier, civilian, we've got them all dead here.” [AL]
Dr. Qasr acts relaxed and informal, and seems fairly youthful, despite the dark, deep-set eyes and thinning hair. He does not, on camera for Al Jazeera, rush around doing what he can to tend to the living. Instead he simply shows them to the world slowly, asking for their help to ease this horror that, apparently, just happened. Recall this is the very day the rebels claim they had “secured” the hospital from some unclear force keeping them away before. Dr. Qasr mentions nothing about any battle or change at all that day. He seems to walk with great ease and confidence to be any Gaddafi loyalist, but he’s apparently been working there for days at least; he mentions how two patients on respirators died on the 23rd when electricity was cut off. Surely he’d recall several dozens of them being brutally murdered another couple of days before that, but again no massacre was apparently mentioned in his visits with Simmons or Loyd.

- Rabii Saaid, Mohammed’s Doctor
A Euronews exclusive report and video (still at right) described Saaid as doctor who treated the sniper-shot boy Mohammed (see 6d), and spoke on the boy’s miraculous reunion with his family. His parents saw him in the ambulance and providentially were able to accompany him to either Tripoli Central or Tripoli Medical Center.

He’s apparently the other of the two who who either remained or returned quickly. He is seen inside with Dr. Qasr, tending to the patients, on Al Jazeera’s video of the 25th (in fact behind Qasr in the image used on the last page) He’s wearing the same purple gown as the more famous doctor, and is shown next to him when Simmons says “only two of them are doctors.” [AJE]

- Dr. Sami, Expert on Mercenaries
A third doctor, not yet seen, was “Dr Sami, a trauma surgeon.” He gave the Guardian an informative tour of “Abu Selim hospital,” as mentioned in sub-section 4c producing a mercenary ID card from one of the dead. Referring to the men who held such cards, he chillingly explained “we had many, many of them in this hospital in the past few days. …They didn’t want to be admitted” and then, somehow, “most of the bodies we had here were black Africans.” [GCS] It’s not clear if Dr. Sami is the third doctor among the one or two who remained all during the events, or someone who came back to work about the same time the media arrived.

- Nurse Mohammed Yunis
“Mohammed Yunis, a medical-student-turned-nurse,” told AFP many more bodies “had already been removed” prior to the media storm. “There have been hundreds of deaths (in Tripoli) in recent days,” he said, visibly shaken. “It is a disaster,” he said. “There is no more medicine in the hospital, no more medical personnel. They all left for fear of the snipers.” [FP4] As Mohammed Younes he was show on an AFP video, looking quite
young and wearing a light blue shirt. He says patients died because there were “a lot of patients and [holding up index finger to signify one, pausing] very, very small number of doctors and nurse and assistants.” [FP2]

- Nurse Abdel Abdel Rahman

AFP reported “Abdel Abdel Rahman is one of just two nurses and one doctor who remained holed up in the hospital throughout the ordeal.” “He does not remember how many people he saw die.” He lacked supplies. “Asked how felt, he said nothing.” [KT]

- Volunteer Dr. Osama Bilin/Bilil/Pilil

“Osama Pilil, who lives near the hospital,” told the BBC on the 26th: “These bodies have been here in the hospital for five days. Nobody has taken care of them … We need help. It is very urgent. There is no government here. We need professional help, from the International Red Cross, because there has been a massacre in Abu Salim.” [SBB] The Telegraph spoke to a “Dr. Osama Bilin, one of the many volunteers in the hospital.” He said: “Since Monday this hospital is closed and many dead bodies they are inside. They told me it's around 200. But I saw myself, it's only 40-50 maybe dead bodies. … So all these people are volunteers, helped to clean this hospital to bring life back into this hospital.” [T5]

It should be noted Billin is not necessarily there as a doctor. He’s described as a volunteer, during this time when there was no more doctoring, just clean-up, to be done. The scrubs he wears are the light blue of the others cleaning up outside, rather than the violet of Drs. Qasr and Saaid inside.

- Volunteer Ahmed Bzuti

Ahmed Bzuti, a cleanup volunteer, is also apparently not part of the hardcore staff. “The soldiers of Gaddafi had to file their dead here,” he told a reporter the French paper La Croix (translated). “Only objects or papers they carry with them will help us identify them.” [CT]
Section 6
The Surviving Patients: For Real?

6a) The Ones Who Made It

The number of surviving patients at the hospital was always small compared to the masses of dead, but realistically, it shifted downward over time. On the 22\textsuperscript{nd}, apparently just after the massacre but possibly before it, the Red Cross made their early support visit. The delegation’s chief George Comninos reported back “\textit{only one doctor} was left to look after \textbf{25 patients}, including 15 seriously wounded.”\footnote{RC2}

By the 25\textsuperscript{th} the number had shrunk only a bit; Andrew Simmons reported a total of 21 patients, and the MSF medical team’s same day visit saw 22. It’s not clear which of these counts came first. The Telegraph’s “as it happened” log relates for Aug. 26 that “the International Red Cross have now evacuated the hospital, with 21 seriously sick.”\footnote{T3}

Speaking to NPR the same day, Andrew Simmons confirmed that exactly 21 patients had been removed by the Red Cross.\footnote{NPR}

It seems these came out in shifts, as opposed to all at once, and by at least two parties. On the 25\textsuperscript{th}, MSF reportedly “rescued two patients in very critical condition from Abu Salim hospital,” from the 22 there, “and transferred them to Tripoli Medical Centre.”\footnote{MSF2}

At least one dark-skinned person was seen being loaded in a civilian car by Al Jazeera’s cameras.\footnote{AJE 2:25} Apparently another 2-3 patients were removed before the reports of the next day, when the ICRC said it helped transfer “17 wounded survivors – including one child – from Abu Salim Hospital to Tripoli Medical Centre so that they could receive urgent assistance.”\footnote{RC3}

As with the alleged post-massacre staff, these patients seen by the media should be approached as \textit{alleged patient-witnesses}. To be sure, they were filmed in hospital beds, some hooked up to machines or sporting casts, and most of them could be genuinely injured. But they’re not necessarily the same patients there on the 21\textsuperscript{st} and before, and could serve as actors to re-populate the ghost hospital on a managed script.

They might not even be the same ones seen by the ICRC on the 22\textsuperscript{nd} (see p. 22). Twenty-five in number, these could have been the last of the original patients, or a first batch of actors, or their first performance out of two by the same cast. It would be cruel and pointless to make them wait out the whole four-day span amid the growing stench. It does seem they spent the night of the 25\textsuperscript{th} there at any rate, seen By MSF and Simmons and again by many others being removed the next morning, but they could have been ferried in bare hours before that. Derek Stoffel’s mid-morning report from the 25\textsuperscript{th} was at a “hospital near to Abu Salim,” probably not our subject but possibly so. He saw “about 30 injured brought in in 2 hour period.” \footnote{DS} If this refers to Abu Salim trauma hospital, the clue would be explosive, but it’s mentioned here only as a faint possibility. He was likely just at the functioning TMC, relatively near the day’s fighting in Abu Salim.
6b) The Black Patients

In the Khamis Brigade shed massacre behind the Yarmouk military base, which the CIWCL previously reported on, most of the dead that could be racially categorized (those not burnt to the bone) were black-skinned and/or had African facial features, and some appeared to be military men. In contrast, all of the dozens of alleged escapees, supposedly from the same prisoner pool, were light-skinned Arabs, many suspected of protest activities. This strange mismatch serves as a powerful clue of something wrong with the survivors and their stories – they contradict the physical evidence. [QY sec. 3.2]

Here at the hospital, the same distinction emerges, but to a much lesser degree. The vast majority of the 50 or so visible murdered patients were apparently Black, but many of the alleged survivors were also Black. Of the reported 21/22 living patients there on the 25th, at least six (out of about 12-14 seen) were Black men in different states. It’s still a mismatch with the 90% Black of the dead piles, but less so than at Yarmouk.

Only one of these darker patients is named and has spoken lines. An AFP video showed “Abdullah Hussein,” a laborer, possibly foreign, who “arrived here weeks ago, injured by a car accident.” He’s shown below, being wheeled out prior to transfer, and was translated from Arabic as saying:

“If I’m alive it’s by the grace of God. I really thank the doctors. They did everything they could to take care of me, and all is going well.” [FP2]

He clearly was alive, and the rebel doctors we’ve met are to thank. Unlike dozens of other patients pigmented like him, Abdullah was notably not slaughtered or harmed at all, it seems. An unrelated fender-bender put him in there, well before the battle of liberation even started there. He had spent weeks inside (with no cast or anything visible to show for it) and, importantly, he mentions no such event, suggesting there was none.

Al Jazeera’s cameras with Andrew Simmons from the 25th show six black-skinned patients, including Abdullah, in beds lined up against one wall of some ward. This is apparently a different room entirely from where the Arab patients are. The men here are variously bandaged and with casts, some with crutches nearby. None of these things are impossible to fake, but neither is there clear reason to suspect fakery. None of them speaks for the camera at this time, but all seem to be looking at it, and one waves his hand to it in friendly greeting. [AJE] The stories of who they are and how they got here are not shared.
On the right end of that row, next to a quiet Abdullah (judging by a face, shirt, and pillow match), lays one patient who seems undeniably and gravely injured, again captured by Simmons' crew. A smallish, delirious, nearly naked black man lies at an odd angle on his bed, with “severe abdominal injuries.” Simmons rightly says he “needs surgery now.” [AJE]

The man is bandaged across the whole expanse of his upper abdomen, the sign of a serious injury if not attempted surgery, and has tubes attached, one hooked up to what looks like a full colostomy bag. It’s not clear that the best care was being taken of him; he’s breathing with great, heaving, difficulty, seems moments away from convulsing, and perhaps very near to death's solace. This victim of war is more than likely among the first two evacuated by the MSF team that same day.

**6c) The Light-Skinned Patients**

The Arab/Semitic/Caucasian/non-Black patients seem better tended to and an interesting bunch. At least six of them can be seen in the background of Al Jazeera’s report, along with a few visitors in what’s “supposed to be intensive care.” Most of those in here seem to be awake, some sitting up, fairly upbeat and chatty. Local witness Abdelsalam Turshi, who accompanied Simmons into the hospital, apparently recognized one of the visitors and stepped over to talk with him. [AJE 1:30]

A few were of these are singled out for mention, none of them named. One man speaks freely (in Arabic, not translated). According to Simmons, he was mugged and robbed by Gaddafi loyalists, perhaps for his car, after coming into the city (from outside, in late August, 2011, amid fuel embargoes, hyper-inflation, NATO bombing, and the rebel invasion) in order to buy a car. [AJE] This strangely set-up attack landed him here, he says, apparently with no further problems or massacres mentioned during the stay. Thus, he’s another implicit witness for no massacre, supporting the rebel version of what happened, with a back-story that’s just as transparent as the one he helped patch up.

A man described as a loyalist fighter is less engaging. His face is laced with crusty burns, and his right arm is missing, but for a stub. He does not smile or wave at the camera or even look at it. He stares into the space over his left shoulder with the same grim intensity that can be seen on the faces of other defeated, captured, Gaddafi loyalists. [AJE]

Another man, described as a civilian (so perhaps a rebel fighter), is said to have a sniper’s bullet in his spine. He seems deeply unconscious, sporting a neck brace, and attached to life support machines. He isn't able to give us any clues on his own, but Dr. Qasr told Simmons the man had to have CPR performed on him three times when the electricity
went out and the respirators stopped. [AJE] Another sniper victim, a pre-teen boy with a bullet now removed from his chest, is conscious and communicates his apparent support for the rebel cause. He’ll be covered more in-depth next.

6d) Mohammed’s Story

The alleged sniper-shot boy is given as Mohammed (family name perhaps Al-Zadma), aged 10, although he looks a bit older. The Al Jazeera English crew didn’t get his name as they filmed him looking a little weak on the 25th. “A boy, a bullet removed from his chest, is now recovering.” He was sure to be filmed flashing the rebel victory sign and pumping his fist, while looking at someone off-camera expectantly (see inset). [AJE]

An AFP video report from the following day, as he was being evacuated, names the boy as Mohammed and shows his mother. [FP2] A Euronews report offers the most details, all questionable. “As the rebels swept in last Sunday [Aug. 21], 10-year-old Mohammad went on to the streets to watch history being made,” presumably without parental consent, and was “injured in the chaos.” [E1] A report from AFP’s Marc Bastian said the boy was shot, apparently by a sniper, “in the back,” while he was just “outside Moamer Kadafari’s compound in the Libyan capital.” This information came from his father, who obviously must not have seen it happen. He told Bastian “my son was wounded outside Bab al-Aziziya, but we didn't know where he had been taken.” [FP4]

Euronews reported after the shooting, he was “taken to a local hospital where his parents eventually found him by chance,” five days later, and just moments before their news appearances. Rabii Saaid, “the doctor who treated him” said: “we were trying to transfer him, and suddenly the family arrived to look for him. They saw him in the ambulance and they were very, very shocked.” [E1] The reunion outside the hospital was purely by chance, a complete surprise, and thus presumably not stage-managed for the media. But it did carry a conveniently positive message considering the grim aftermath of the rebel-initiated violence of the past week; “The discovery brought a ray of joy into an area that has seen fierce fighting,” Euronews noted. [E1]

The boy’s mother Aisha Al-Zadma said, on the sixth and last day he was missing, that they had all “spent four days searching for him.” They wouldn’t have been able to check this most local hospital, considering the fighting, but it’s not specified where else they had frantically checked. “We’ve eaten nothing” in those days, Aisha said. His father added: “I didn’t know he was here. They told me that there were bodies here and maybe my son was among them. I came to look, and it was only today that I found him. That’s five days I’ve been looking for him.” [E1]
The Euronews video shows Mohammed’s unnamed father inside a Red Crescent ambulance, overcome to an unnerving degree. It looks like relief, sudden joy, and perplexity all mingled, and still shaped by days of sorrow and worry. It’s all directed far more at the cameras than at his son who lays three feet away, once again just waiting with a blank look on his face. [E1] This scene was witnessed by Channel 4’s Alex Thomson as well. Perhaps not knowing the back-story, he decided “in one ambulance a man, almost incoherent with fear, just kept saying: “Al Hamdillulah” – thank God. Three young children sat near him almost beatifically calm in their shock.” [AT4] One of these children was of course Mohammed, and his little sister can be seen briefly, in the Euronews video, smiling at the strangeness of this family trip (visible in the still above, along with a younger brother, it seems). [E1] Mohammed doesn’t speak in the available videos at all, “in too much pain to talk,” one of them explained.

All this together merits a flashback to Misrata, about four months before the events in Tripoli. “The Sniped tykes of Misrata,” an early investigation by the author, exposed transparent rebel propaganda based on fake x-ray images. [STM] These were said to prove at least two children, a 4-year-old girl and 5-year-old boy, were both shot in the chest by government snipers. The boy’s film was shown by Human Rights Watch, alongside the victim, his bandaged wound, and his mother. Then a copy of it was quickly spotted in a video - presented as an image from the girl’s chest. The “removed bullet” was shown in a vial, alongside the film and a sleeping girl. [STM] Below, the two images compared – left, the girl’s film, skewed to proportion, and right, the boy’s.

Both images are the same but for the shoulder marking on the right and, here, the different backgrounds behind the translucent films. This clearly can’t be an accurate image for both of them, and further, the image itself is quite questionable. There is no deformation to the bullet (center, obscured by the spine), and stranger yet, there is no bending or breaking of a single rib. We see a short path to stopping, after no visible
resistance, just shy of the heart. Before that, it was apparently fired upward, at an odd, steep angle – perhaps a rare case of street-level snipers shooting rooftop children. Or alternately, the bullet was laid on a kid’s sternum at a stupid angle as the x-ray projector was passed over them, or image editing software and a film printer were used. But clearly, the firing of a bullet had nothing to do with these images or, presumably, with those two children from rebel-held Misrata. [STM]

Tripolitanian Mohammed allegedly suffered the same fate, a sniper bullet lodged in the chest, just as the Misratan rebels entered the capitol. They would also bring all their public relations tricks, and sniper-shot kids and nice endings injecting “rays of joy” are both helpful. Mohammed’s X-ray film wasn’t shown, but it’s entirely possible the CIWCL already has two copies of the one someone might have considered showing.

The best view for assessing Mohammed’s injuries is an AFP video that shows him shirtless, carried onto a gurney. His back is seen obliquely, and his chest from all sides, all revealing no mark anywhere aside from the bandaged area on his mid-right side, a drainage tube attached. [FP2] This is arguably “the back,” by now apparently the entry wound and the point of surgical extraction (suggesting the bullet didn’t lodge itself in very far). There being no exit wound is consistent with the bullet needing to be removed, as it reportedly was, with surgery performed at Abu Salim hospital on or after the 21st, just about the same time most of the staff was reportedly fleeing.

Mohammed was thus ostensibly there the whole time, and like the others, has nothing to say, or even gesture, suggesting there was a mass-killing. By seeing no such thing, he’s another witness for the questionable rebel version. Considering this and the problems laid out above, it’s clearly worth wondering if he was ever shot at all, and whether he was truly there for days waiting for rescue. Perhaps he and his story were simply placed there on the 25th, prior to Simmons’ guided tour.

After, he was taken to Tripoli Medical Center, a roost for Dr. Salem Al-Farjani and his fake witness operation. [QY sec 2.5] If there was anything shady about Mohammed, or Abdullah, or the car buyer, Dr. Al-Farjani was the guy, apparently, who would understand and wink. And if little Mohammed’s turn for the cameras was a stage-managed propaganda stunt, as it almost seems, it would be a sick task to lay on a child. As AFP’s Marc Bastian noted, after laying for however long among the rotting dead, with such ominous mystery hovering over them, Mohammed “is likely to suffer nightmares about his time in the hospital for years to come.” [FP4]
Section 7
In Closing ...

7a) All The Signs, Neglected

Sections 1 and 2 collectively portrayed Physicians for Human Rights (PHR) as deviating from their stated mission to call out violations of the principle they specifically “championed” in Libya’s war. The details in the following sections have borne out such events, and after that exercise, a recapitulation and double-check is in order. PHR have provided the following handy indicators of a violation of medical neutrality, compared to events at Abu Salim Trauma Hospital:

- Attacks on hospitals (rebel forces “secured” it, apparently four days before they acknowledged doing so)
- Attacks on patients (a certainty (see section 4) - dozens were shot dead or killed in more crude ways.)
- Attacks on medical personnel (more than likely so, but it’s not certain)
- Attacks on medical transport (at the hospital, not certain, but documented elsewhere in Tripoli - see 3d)
- Misuse of medical facilities (using this one for an execution ground and a morgue, and likely a propaganda mill, would constitute misuse.)
- Breaches of medical ethics by medical personnel (none evident for the apparently attacked staff-as for the post massacre staff, see below)

Only the last type of violation has been alleged, by the rebels and the post-massacre staff. In some versions, the original staff was directly attacked before abandoning their posts, but in others they fled out of abstract fear of snipers. In both cases, they did so with no arrangements made for the patients, leaving them to die and decay alone. But the evidence suggests that they were directly attacked, by parties who also caused the deaths.

From what the CIWCL has seen there are questions about the ethics of the post-massacre staff. While it’s a hefty allegation to make outright, they do have a peculiar tendency to not mention the on-site executions that clearly occurred. It’s possible that in addition to being doctors there, or instead of that, Dr. Qasr and the rest served as propagandists laboring to absolve rebel war crimes. Using the facility, and their perceived credibility, to launder evidence clearly would be considered by most to be unethical, another violation of medical neutrality, and an abuse of the trust people have placed in them. “Health professionals” were supposed to be such great vehicle for protecting human rights because, as PHR says, of “their specialized skills, ethical duties, and credible voices.” [PHA] From Nayirah to Dr. Sami the mercenary expert, the ethics and thus credibility of the world’s medical sources on such issues are chronically questionable. It’s only fair to wonder what really is behind the credulity that consistently rises reverently to meet it.
But PHR has neither accepted nor rejected the testimony in this report. As far as their public statements go, they have neglected the issue altogether to focus on a non-medical alleged atrocity with a greater media profile. And they did so guided through the complex evidence by another shady doctor (see page 9). Despite the best efforts of Dr. Al-Farjani, the alleged witnesses, PHR, and many others, this is clearly yet another likely rebel crime of epic scale in what seems to be an un-checked string of such things.

7b) Accountability vs. Mercenary Excuses and Amnesty Laws

“We are shocked by what happened in Abu Salim Hospital,” said Georges Comninos of the International Committee of the Red Cross on the 26th. “Parties to the conflict must protect wounded people and ensure they have access to health care. If a medical facility is located in an area heavily affected by fighting, the wounded need to be taken quickly to a safer place to receive urgent treatment.” [RC3] That public shock was, again, not at what the reader has just learned of – the free-wheeling rebel massacre there. He was upset at the passive death, by gross negligence, of so many people there. Chillingly, he said this four days after apparently missing the signs of the fresh massacre when he briefly visited on the 22nd (see page 22). That crime, luckily for some, has so far been one beyond words in its shocking nature.

It seems unlikely anyone ever pressed charges against these “parties to the conflict.” It would be somewhat challenging to blame the defeated loyalists, on the available evidence. That was the usual answer – the stones of blame were tied to those already slated for sinking, whether the truth warranted it or not. And even if one wanted to, it would be hard to press charges and force compliance from a rebel militia leader with his own armed contingent and a dysfunctional central government – easier by far all around to just forget the episode, as everyone has.

One problem with getting the outside world to help affix blame and demand accountability is the impression the victims here were allegedly “Gaddafi’s African mercenaries.” This is an area of much misunderstanding and not enough contention. There is some evidence and some reason to believe in foreigners taking up arms in the government’s defense, especially near the end of the war (the time frame that matters here). But how much evidence there is, and how accurate “mercenary” is in describing these fighters, and how many there were is not fairly settled yet. The CIWCL contends that the claim is grossly overplayed in rebel propaganda (see 4c for claims at the hospital). Since first sown in the uprising’s very first days, the mercenary myths have doomed innocents in many cases, if not most. But some will feel that hired killers serving a brutal dictator, paid to slice up protesters and rape children while pumped-up on Viagra (as reported), deserve what they get, and their often-brutal deaths hardly even seem like a crime.

The CIWCL firmly rejects such extremist moral relativism. These were clearly human beings, and that is the first fact, even if one feels there’s a close second fact. As injured human beings they should have been protected by medical neutrality, and if they
had been dealing with a civilized force, they would have been. There is no excuse and ideally there should be no impunity for those who slaughtered these men, women, and children in the hospital beds, just outside their cars, and wherever. Their deaths do matter, and they and their families deserve truth, and if possible, even some measure of justice. But sadly, we live in a world where the most powerful among those championing the rights of human beings have given this crime the silent treatment.

A further layer of protection, not likely needed here but essentially at many other crime scenes, is the NTC amnesty law issued on May 3rd, 2012. Arriving alongside a controversial new law punishing “glorification” of the old order, the law declared: “There is no punishment for acts made necessary by the February 17 revolution,” meaning “military, security or civilian acts undertaken by revolutionaries with the aim of ensuring the revolution’s success.” [CLA] This followed on a May 1 action by hundreds of armed rebel fighters who surrounded the NTC headquarters in Tripoli. They didn’t attack anyone, but issued six firm demands regarding assistance and pay, representation in the government, and point 3 insisting on “an amnesty for fighters (thuwar) for any actions taken during the revolution.” [CLA] It appears the NTC acceptance here was qualified. Forgiveness for “any actions” was sought, but only for “acts made necessary” by the insurgency was it granted. Besides what actually has been blamed on the rebels as opposed to fobbed off, the big question now will be what was necessary vs. optional.

Between general lack of concern and the impression of no crime at all, or the chance it could be called a forgivable (“necessary”) crime, targeting especially heinous mercenaries, it’s rather certain this massacre in particular will never be solved within Libya. With its newfound concern for human rights, the post-war government will continue to ignore this crime, and as many as possible of those committed by their militia muscle on the ground and, of course, by their NATO helpers in the sky.

7c) Recommendations, Lamentations, and Protestations
The CIWCL’s best and most all-encompassing recommendations for correcting this injustice involve the use of a time machine, and this is clearly not plausible. The next best options would involve using these insights, as if from the future in, say, Syria. Human rights groups should urge the Syrian rebels to not mimic their Libyan rebel role models, and refrain from slaughtering and lying about if they win. But if they do, they won’t tell us, and again the West will just presume that, having issued demands, they will have been met. True or false, that impression will likely hold.

As for the more academic understanding of this specific war crime, making the best sense of it all will most likely fall exclusively on those outside the trusted mainstream of agencies, groups and media outlets. To understand this crime, others like it, in Libya, Syria, and elsewhere, several things will be needed, whoever is doing the investigating. First, prevailing narratives, especially those almost universally accepted in the West, should be challenged more. This will require, on the one hand, more realistic thinking about the geopolitical bogeymen accused of this or that crime. On the other hand, it
would take a little imagination to see what other options, not pre-assembled for us, might explain the best available evidence. That evidence should be hungrily sought out, subjected to critical thinking, aware that lies are likely included as well as truth. A good hypothesis or working theory thrives on meeting challenges put to it. With good evidence, reasonable back-and-forth and due mental rigor, a lot of things can actually be figured out.

The CIWCL, with its limited resources, does plan a second report on this incident, after some further research and questions posed to various parties. There can be no promises this will ever come together, but it is planned. In case anyone outside the CIWCL is prepared to investigate this incident, one helpful avenue, for example, would be locating verifiable former staff who had fled the scene and, unlike those we’ve seen, describe a situation consistent with the rest of the evidence. Authentic hospital records from the days before August 21 would be helpful in this regard, providing the names and number of this staff. If such records exist and anyone in the Libyan government can locate them, the CIWCL suspects, it will be only once, and quietly.

The NTC health minister, Barakat, spoke of tissue samples that would provide no matches if the victims turned out to be mercenaries. It might be helpful to ask if this analysis was ever carried out and what it said. A mercenary with no file would be difficult to tell from an undocumented guest worker, but that ambiguity should be no challenge, judging by the ease of past mercenary allegations. The method of telling should be asked after. If it’s impossible to find a match for foreigners, there should, by extension, be databases to match corpses to Libyan citizens, including children who were in the wrong back seat as their parents tried to flee.

Even without tissue samples we can identify the Khamis Brigade soldier Jaafar Al-Gharyani (see p. 31). Did he ever come up reported as missing? When his family asked after him, if they did, did they say he was shot in his hospital bed, or, say, wounded by loyalist snipers for trying to defect?

Consider again PHR advisor Dr. Salem Al-Farjani, and the irony of his statement about the shed massacre: “we won’t have reconciliation in the country if we don’t take care of this,” meaning enshrine the version(s) his “witnesses” had slapped together. In his non-credible voice, he spoke the truth backwards in support of this fiction-to-legal-truth cosmetic surgery: “People are suffering. They want to know the fate of their loved ones.” [VG] The bereaved family of those killed in that famous massacre, and in this neglected massacre at Abu Salim Trauma Hospital, will probably be left on their own by all those tasked with protecting them and securing for them truth, justice, and their human rights. The CIWCL protests that further injustice piled on top of all the others.
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