Terrorism in Peru

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Abbreviations:
MRTA = Movimiento Revolucionario Túpac Amaru
NGO = Non-Governmental Organization
PSR-ML = Revolutionary Marxist Socialist Party
SL = Sendero Luminoso or "Shining Path."

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Abstract

Two major domestic terrorist groups have plagued Peru over the past 20 years, the Sendero Luminoso or "Shining Path" (SL) and the Revolutionary Movement Túpac Amaru (MRTA). On 28 August 2003, the Peruvian Truth and Reconciliation Commission reported that an estimated 69,280 persons were killed in the internal conflict in Peru from 1980 to 2000. Most of the victims were farmers (56%), most attacks occurred in rural settings (79%), and the SL was responsible for most of the deaths (54%). Aggressive anti-terrorism efforts by police and military during this period, often at the expense of basic human rights, also contributed to this large burden of terrorism on Peru. During the 1990s, terrorist attacks in Peru had spread to its urban areas. On 17 December 1996, 22 members of MRTA took over the Japanese ambassador's residence in Lima, holding 72 hostages until the grounds were stormed by Peruvian special forces on 23 April 1997.

Until recently, emergency planning and preparedness for terrorism-related events in Peru were largely underdeveloped. In the last five years, Peru has taken two key steps towards developing a mature emergency response system, with the establishment of the country's first emergency medicine residency training program and the construction of the first dedicated trauma center in Lima.

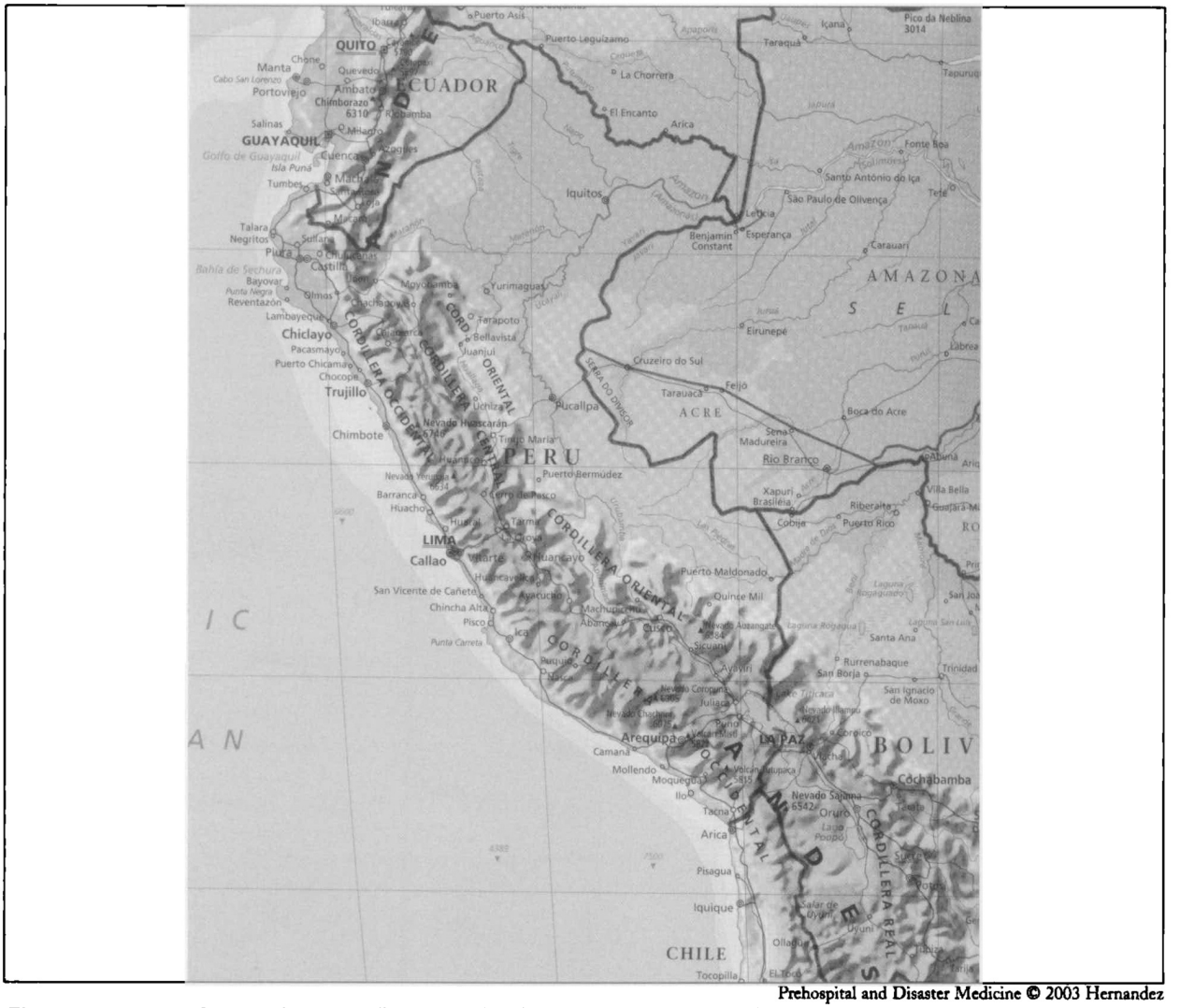
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Introduction

The Republic of Peru, which gained its independence from Spain in 1821, is located on the western coast of South America and shares the same time zone as New York. It is bordered by Bolivia and Brazil (east), Chile (south), Colombia and Ecuador (north) and by the Pacific Ocean on its western coast (Figure 1). The country covers approximately 1.29 million km^2 or roughly three times the size of California with the coastline covering 1,097 kilometers. The total population is 28 million, of which seven million reside in Lima.[1] Nearly half of the population is <20 years of age.[2]

The Peruvian economy has been extremely volatile over the last 25 years suffering severe economic declines in the mid-1980s that were attributed mainly to political control. Over the past two decades, El Niño also has had an adverse impact on the nation's economy. Recent economic improvements have reduced the unemployment rate from 74% in the late 1980s–1994 period, to 43% in the 1995–1998 period.[2] As a result, the nationwide poverty rate decreased from 55.3% in 1991 to 37.6% in 1997.[1,2] Poverty is so pervasive in Peru that it has five stratifications, with the lower stratifications affected to a

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Figure 1—Map of Peru and surrounding countries (printed with permission)

degree not seen in North America. As a result, starvation and abject desperation are endemic in Peru—factors, that may have enabled the development of domestic Peruvian terrorist groups.

Burden of Terrorism in Peru

Domestic terrorist groups

Two major terrorist groups—the Sendero Luminoso (SL) and the Movimiento Revolucionario Túpac Amaru (MRTA)—have been active in Peru during the past two decades, sharing the overall goal of subverting the Peruvian government. The first group, Sendero Luminoso, also called the Peruvian Communist Party, is known throughout the world as the "Shining Path". Major selected events in the history of terrorism in modern Peru are shown in Table 1. In 1928, Jose Carlos Maritegui La Chira founded the Peruvian Socialist Party, the precursor of the SL, which subsequently became the Peruvian Communist Party. In the 1960s, Abimael Guzman Reynoso, a San Cristobal de Huamanga National University philosophy professor, organized a core group of followers that in 1970, broke away to form the SL. The name "Shining Path" originated in a 1928 speech given by Jose Carlos Mariategui.[3] The 1970s were mainly a recruitment and training period for the SL. On the eve of the presidential election, in May 1980, the SL performed its first violent act—the burning of voting boxes and electoral registers in the village of Chuschi, Ayacucho. That incident marked the beginning of the "popular war". The violence perpetrated by the SL escalated until it became known as one of the most ruthless terrorist groups in the world. From 1980 until the capture of Guzman in 1992, the SL attacks produced 31,331 victims.[4] The majority of attacks took place against rural and jungle populations, often in the form of indiscriminate bombings, assassinations, torture, and mass executions. The SL followed Maoist genocidal principles and may have been modeled after Khmer Rouge tactics. In a typical attack, a small group of ruthless terrorists with relatively primitive weapons, would round up an entire town, and then, stone selected residents to death, burn them alive, or hack them to death with machetes. Other residents were coerced to participate in the killings or were used as forced laborers and many perished. The brutality was designed to impose rule by terror and to recruit peasants by fear of death. As the SL gathered members and

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Year	Event
1928	Jose Carlos Maritegui La Chira founds Peruvian Socialist Party
1964	Bandera Roja splits from Peruvian Communist Party
1968	Revolutionary Government of the Armed Forces, headed by General Velasco, seizes government power
1970	Abimael Guzman and followers split from Bandera Roja and form SL
1980	Democratic government returns
	SL performs its first violent act in Ayacucho on the eve of the election of President Fernando Belaunde Terry
1981	Anti-terrorist law passed (Decree 046)
	State of Emergency declared in Ayacucho; SL attacks maximum security prison—247 set free; 1,500 police deployed to area; search and seizure rights suspended
1982	State of Emergency expanded to Apurimac and Huancavelica
	Military forces deployed in anti-terrorist efforts
	MRTA formed
1983	El Nino affects lands, structures, and economy; inflation rate = 150%
1986	SL stages 30-40 terrorist attacks per month in Lima in first 6 months of year
	SL stages violent uprisings in 3 prisons; >250 prisoners killed; almost no further terrorist attacks in Lima during last 6 months
1989	Victor Polay, MRTA leader, captured
	Nester Cerpa Cartolini assumes control of MRTA
1990	Victor Polay and 46 inmates escape Canto Grande prison via 315 meter tunnel
	President Fujimori elected
1992	Guzman, SL leader, captured
	Polay recaptured, held in total isolation at Callao naval base
	Fujimori shuts down Congress, dissolves Supreme Court, institutes military tribunals
1996	American Lori Berenson convicted of belonging to MRTA
	MRTA terrorists take over Japanese ambassador's residence, hold 600 hostages
1997	Police storm Japanese ambassador's residence; kill all MRTA terrorists including Cartolini
1998	Three SL leaders—Quentero, Ramirez, and Anoso – captured
1999	Oscar Ramirez Durand, SL leader, captured
2000	Eloy Carlos Garcia captured (escaped Ayachuco prison in 1981)
	President Fujimori ousted by Peruvian Congress, flees to Japan
2002	Car bombing outside US Embassy – 10 killed, >30 injured
2003	Peruvian Truth and Reconciliation Commission releases report describing burden of internal conflict

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Table 1—Selected events related to terrorism in modern Peru (SL = Sendero Luminoso; MRTA = Movimiento Revolucionario Túpac Amaru)

became better equipped, it began to target larger cities and more urban areas. Accordingly, in the 1990s, Lima became a target with electrical grid disruption, assassinations, car bombings, and increased political infiltration.

The membership of SL remained small in comparison to the atrocities it committed. In 1970, the total number of members was about 12, rising to a peak between 3000–7000 in 1990.[4,5] Today the total membership is estimated to be 300, although its ranks may again be growing.[4,5] Funding for SL was largely from the drug trade and continues to be linked to coca production. Peru is the largest producer of raw coca in the world.[1]

The Revolutionary Movement Túpac Amaru or MRTA, the second major subversive group in Peru, was formed in 1982 when a small subgroup ("El Militante") of the umbrella group, Movement of the Revolutionary Left, combined with the Revolutionary Marxist Socialist Party (PSR-ML).[6] Originally formed with three leaders, the MRTA had the ideological goal of eliminating imperialism in Peru and establishing a Marxist regime. In 1984, Victor Polay assumed the sole leadership position, when the one-time leader of the PSR-ML, Luis Varesse Scotto, sought police protective custody. Upon his release, Scotto reportedly left the country and returned to Nicaragua where he maintains a United Nations position.

The MRTA is credited with bombings, shootings, assassinations, kidnappings, and anti-US attacks in Peru. The most notable of their actions occurred on 17 December 1996, when a MRTA commando group, comprised of 22 terrorists, took over the Japanese ambassador's residence at a celebration in honor of the birthday of Emperor Akihito.[6] Initially, 600 individuals were held hostage including 15 ambassadors, business executives, government ministers, members of Parliament, and relatives of then President Alberto Fujimori. Most of the hostages were released during the four months that the MRTA group occupied the residence. Only 72 hostages remained on 23 April 1997, when a special force unit of the Peruvian army completed several underground tunnels and stormed the building. The 14 MRTA members in the compound at that time were killed including leader Nestor Cerpa Cartolini. The MRTA was funded mostly through non-governmental organizations (NGOs) and private business ventures as well as by some drug trafficking.

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The government security apparatus also was responsible for many deaths in Peru during the past two decades. On 05 April 1992, President Fujimori shutdown Congress and dissolved the Supreme Court, which the executive branch believed were blocking its anti-terrorism efforts. From 1992 to 1994, President Fujimori enacted new anti-terrorism legislation, which ultimately dismantled the SL in most of the country, but at the expense of basic human rights. Although Guzman and other top SL members were arrested, the military and police became almost as vicious as the SL. They were responsible for arbitrary detentions, torture, extra-judicial killings, disappearances, and rape and violence against women and children. During the 1992–2000 period, a "catch-all" anti-terrorism policy resulted in 21,855 people being detained by the police and military.[7] In 6,075 cases, subsequent investigation showed no evidence or links to the armed opposition, and the detainees were released. Of the remainder, 65% were acquitted and 1,100 were pardoned by 1999. As of 2000, only 2,786 remained in high security prisons.[7]

Truth and Reconciliation Commission Report

To better understand the events that occurred between 1980 and 2000, the Peruvian Truth and Reconciliation Commission was formed in 2001. On 28 August 2003, the commission released its report after more than two years of investigation. The report revealed that 69,280 victims were killed in the internal conflict in Peru from 1980 to 2000, with the SL responsible for 54% of the deaths.[4] Seventy-nine percent of the dead were from rural areas, and 56% were farmers by trade.[4] The total number of fatalities reported by the commission were double that of most previous estimates. No terrorist use of chemical, biological, radiological, and nuclear weapons was reported in Peru during this period.

Emergency Responses to Terrorist Attacks

During the two decades of internal conflict in Peru, emergency medical care remained largely underdeveloped. Even today, fire departments, police departments, and ambulance services all have different numbers for emergency activation or notification. Public phone access remains very limited, even in Lima. Ambulance services are mostly private and utilized for hospital transfers. Most patients still reach hospitals by taxis or on foot.

Trauma remains the number one cause of death for all age groups <50 years of age in Peru.[8] Despite the large burden of trauma in the past two decades, there still are no dedicated trauma centers in Peru. By default, several hospitals in urban areas treat the majority of trauma patients in the country. Emergency planning and preparedness activities have been scant.

Despite these limitations, emergency medical care has started to evolve more rapidly in recent years. A national task force for developing in-hospital emergency medicine and prehospital emergency care was initiated two years ago. As a result the first national meeting for prehospital emergency care occurred in 2002 and the construction of the first dedicated trauma center in Lima was initiated in 2003. In addition, a self-developed emergency medicine residency training program graduated its first residents in 1999.

Conclusion

Most terrorism-related events in Peru from 1980 to 2000 were aimed at subverting the government via bombings, shootings, kidnappings, and hostage-takings. The vast majority of attacks took place against rural populations. Government anti-terrorist actions greatly diminished terrorism in Peru, but it was at the expense of basic human rights. It is likely that continued poverty and coca production in Peru will continue to play a role in the future risk of terrorism.

In the last five years, emergency medicine, a key component of emergency response, has developed a solid foundation in Peru. Trauma treatment and prevention continues to be a primary need as it remains the most frequently reported cause of death in a relatively young population. Further development of emergency medical care at the national level still is urgently needed. Emergency planning and preparedness must be developed at local, regional, and national levels. These efforts also must integrate civilian, police, and military organizations in order to be effective. Further growth of adequate systems of emergency response for terrorism-related events in Peru will depend on economic and political stability.

References

1. Central Intelligence Agency: *The World Factbook*. Peru. CIA Web site. Available at www.cia.gov/cia/publications/factbook/geos/pe. Accessed on 09 December 2003.
2. Pan American Health Organization: *Health Services System Profile of Peru, Organization and Management of Health Systems and Services*. Division of Health Systems and Services Development; Pan American Health Organization, 2nd ed. 03 May 2001.
3. Anonymous: *Violent Utopias in Latin America*. Analisis Internacional Web site. Available at www.analisisinternacional.com/analisis/newa2.html. Accessed on 09 December 2003.
4. Truth and Reconciliation Commission of Peru. Final report: Truth and Reconciliation Commission Web site. Available at www.cverdad.org.pe . Accessed on 09 December 2003.
5. Chauvin LO: New day in court for Shining Path insurgency in Peru. *The Miami Herald* 21 April 2003.
6. Anonymous: The Collapse of Armed Revisionism, *The "Revolutionary Movement Tupac Amaru" (MRTA)*. NY Transfer Web site. Available at www.blythe.org/peru-pcp/intro/mrta-e.htm. Accessed on 09 December 2003.
7. Amnesty International. Peru: *The "anti-terrorism" legislation and its effects – an unfinished business in the transition to democracy*. Amnesty International Web site. Available at http://web.amnesty.org/library/print/ENGAMR460012003. Accessed on 09 December 2003.
8. Ministry of Health of Peru: *Estadisticas*. Ministry of Health of Peru Web site. Available at www.minsa.gob.pe/estadisticas. Accessed on 09 December 2003.

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