

Global public health experts say failure to count Iraqi casualties is irresponsible

We the undersigned experts in public health call on the US and UK Governments to commission immediately a comprehensive, independent inquiry into Iraqi war-related casualties.

Monitoring casualties is a humanitarian imperative. Understanding the causes of death is a core public health responsibility, nationally and internationally. Yet neither the public, nor we as public health professionals, are able to obtain validated, reliable information about the extent of mortality and morbidity since the invasion of Iraq. We believe that the joint US/UK failure to make any effort to monitor Iraqi casualties is, from a public health perspective, wholly irresponsible. The UK policy of relying on extremely limited data available from the Iraqi Ministry of Health is unacceptable.

The Iraqi sources that the UK government prefers are likely seriously to underestimate casualties for several reasons: they do not take into account mortality during the first 12 months since the invasion; only violence-related deaths reported through the health system are included (very likely to lead to an underestimate, especially during periods of conflict); non-violent deaths due to the destruction of war are not taken into account; and they do not allow for reliable attribution between different causes of death and injury [1].

The inadequacy of the current US/UK policy was highlighted after the publication in the Lancet of a representative household survey that estimated that there had been in the region of 98,000 excess deaths since the 2003 invasion [2]. The UK government has rejected this survey as unreliable; in part because of the authors' own admission that it lacked precision [3]. But this recognized lack of precision in the Lancet study arises chiefly from practical limitations imposed upon the researchers, in particular the size of the sample that could be obtained by an unofficial study. The obvious answer to removing uncertainties that remain is to commission a larger study with full official support and assistance, but scientific independence.

This should draw on multiple sources of data and use proven epidemiological techniques that do not rely exclusively on incidental reports nor on hospital mortuary assessments. This must include first hand verbal autopsies - reliably obtained so that population extrapolation is possible. They also require some linkage with data on military operations [4]. Whilst active surveillance of this kind is difficult in a conflict situation, even limited, but systematic, household surveys are essential. These can then be combined with data from other, passive information sources to build up the most accurate possible assessment of the situation.

Counting casualties can help to save lives both now and in the future by helping us to understand the burden of death, and residual burden of injury, disease and trauma across the entire population. We have waited too long for this information.

References

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