

## W = 27,380 + 1.81x ... or not?

The usually serene world of peace researchers is currently being rocked by a veritable war about who can count the best, and who is counting what. The row is not about something trivial, but about war victims.

The controversy surfaces during every armed conflict. Following the invasion of Iraq, estimates of casualties were painfully different. In 2006, the World Health Organization (WHO) reported 151,000 deaths in Iraq, while an article in *The Lancet* quoted a figure of 601,000. Both investigations were heavily criticized, which is hardly surprising given the political implications.

In 2008 the *British Medical Journal* published an article analyzing estimates of war deaths based on health surveys in 13 countries over the period 1955–1994. The authors examined the method used by the Norwegian Peace Research Institute (PRIO), which had concluded that the number of war victims has decreased significantly over the past 15 years. They claimed that PRIO's calculations were too low by a factor of three. In response, an article in the *Journal of Conflict Resolution* (JCR) concluded that the Norwegians were right and that the illustrious BMJ was simply wide of the mark. The dispute continues.

It is a dispute about methods. One, the incidents-based method, involves collecting as many reliable reports and testimonies as possible for each war, and then counting the victims. The other, survey-based method analyzes population statistics, including health surveys, and sample surveys by WHO which involve asking people how many family members they have lost due to war.

Survey-based research involves comparing expected and deviant trends, and attributing the difference to war. It systematically generates death figures that are sometimes five times higher than those obtained using the incidents-based method. *Et voilà*, this largely explains the considerable differences. The BMJ even produced a mathematical formula that causes the actual number of war victims ( $W$ ) to be higher than the 'wrong' number ( $x$ ) based on the Norwegian dataset:  $W = 27,380 + 1.81x$ .

The authors of the BMJ article applied the survey-based method to the same 13 countries examined using the incidents-based method included in the Norwegian dataset. They disputed the Norwegian outcomes because they believed the dataset was contaminated with unreliable media reports and did not consider genuine, unreported casualties.



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The JCR retaliated, claiming it had drawn on much deeper sources than media reports. According to the JCR, the BMJ can not count either, since it quoted 5.4 million war deaths for this group between 1955 and 1994, while the Norwegians referred to 2.8 million. The difference is therefore a factor of *two*, not three. Applying the appropriate margin of error eliminates even that difference.

The definition of a war death also varies. The WHO talks of deaths that 'respondents attribute to war'. The Norwegian definition is stricter, referring to 'battleground deaths in conflicts whereby one of the two armed parties is a state'. This leaves a certain leeway, since there are numerous conflicts between non-state actors, and numerous one-sided conflicts, where an armed party attacks an unarmed one.

The WHO regards the victims of these types of conflict as war deaths, but they are not included in the Norwegian dataset. Genocide or politicide were occurring in eight of the 13 countries, and the definition of war deaths made a difference. Provisional Swedish research showed that the death statistics could be 55% higher as a result.

The dispute between the two schools is welcome in so much as it will hopefully contribute to a convergence of definitions. The fact that such a dispute can actually take place is laudable because it means that, for the first time, multi-country studies can be systematically compared over lengthy periods. However, it is still a dispute, which is being keenly fought on the basis of widely varying viewpoints, and has considerable political implications for decision makers and public opinion. ■

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