

The People Speak Radio
Iraq War Mortality: interview with Les Roberts

Aired On: June 6, 2007

Transcript from:

<http://www.thepeoplespeakradio.net/les-roberts/>

Times are in bold

0:33

MJ: I'm your host, Malik Johnson. Today we are joined with Dr. Les Roberts. Dr. Les Roberts is the individual researcher who led a team in Iraq and he became prominent in the news just before the 2004 US Presidential election for his study estimating that 100,000 Iraqi civilians have been killed in the Iraq War - at a time when official US government estimates were much lower. In October 2006 an expanded sofweb(?) study was released that gave a point estimate of 651,000 deaths having occurred in Iraq within a 95% confidence interval from 300,000 to 900,000. US President George Bush dismissed the new study saying "their approach has been pretty much discredited" without saying much more. Numerous statisticians have supported the survey and many have questioned the survey. Welcome to "The People Speak" Dr. Roberts.

LR: Thanks, Malik nice to be with you.

MJ: Did I get the introduction correct? Did I miss anything there?

LR: You did, except that you know there's almost no one in the public health community that's critical of the method we approached. Most of the people that don't like it are economists, political scientists, or folks who aren't used to this sort of survey, but what we did was really the standard way of measuring the death toll in times of natural disasters and emergencies. And in fact the US government pays millions of dollars a year for a training program to train non-governmental organization workers and UN workers to do exactly what we did - to measure mortality in times of conflict and hardship.

MJ: You did a cluster sampling did you not?

LR: Yeah, so it turns out that if you're driving around in the middle of a war or you're in the middle of a jungle in the Congo the getting from place to place is the dangerous and hard part. Whereas in America if you want to do a public opinion phone you'll just pick up your phone and randomly dial a thousand people across the country. And you know in Iraq, in most war zones, you're just not going to have that liberty. So you've gotta pick a neighborhood at random and then go visit it and pick some houses at random and visit them. So we tend to grab a clump of houses in one place and a clump of houses in another place. And it turns out that once you've gone to about 30 randomly picked places even in a huge country the more places you go to doesn't really increase the representativeness of your sample. So in 2004 we went to 30 places, and each time we interviewed 30 houses. Our results were a little bit crude at that time so in 2006 when our Iraqi colleague led the effort and we repeated the survey we went to 50 neighborhoods and each time we took 40 houses and came up with as you said with an estimate that around 600,000 people had died as of last summer, so almost a year ago now.

MJ: You know one of the things that struck me is when Tommy Franks - Tommy Franks said that the US military did not "do body counts". I'm just curious, what motivated you to take on this task?

LR: Well first of all, I've done this many many other times in other wars - almost always -

MJ: In the Congo?

LR: And, And knowing how many people have died is probably the most useful tool for stirring up compassion elsewhere in the world. You know lots of things like loss of property and loss of family, when people see foreign cultures going through these hardships they don't really fully understand what it means. But everyone understands what it means to lose a son or lose a father. And so for example, I did a survey in 2000 in the Congo estimating that in the year and a half of war that had been going on there in Eastern Congo, 1.7 million people had died. The week after our report was published the UN security council passed a resolution saying all the warring armies need to pull out. Within a couple of months the amount of aid from the US government to Eastern Congo went up by almost tenfold. So going out and letting the world know how many people have died can be a very very effective tool for stirring up compassion and that was - that was our hope when we went. When I went in 2004, I thought that I would be documenting all the deaths due to indirect things related to war. In every war I have been in, except the genocide in Rwanda and Bosnia, in all the other wars more people died of disease and malnutrition and hospitals not working then died of bullets and bombs, and I thought that would be the case in Iraq as well, and I was very wrong.

6:09

MJ: Because most people -

LR: And I saw most of the rise in death rates was from violence.

MJ: Ah. You know you mentioned the Congo study and it was interesting because once you did the Congo study it appeared that wide-, you know that people pretty much accepted what you published. In fact you're right the UN Security Council, there was a resolution and the UN pretty much requested a 140 million dollars of aid. No one had a problem. When you did the Rwanda study, nobody had a problem. I know in Rwanda you were director of Health Policy at the International Rescue - the committee. Why do you think people had a problem with this one? With this study of Iraq?

LR: *laughter* Well I think, I think you and your listeners know the answer to that.

MJ: *laughter* I do.

LR: It's even more dramatic then you say. Tony Blair cited our Congo work on the floor of Parliament. When he, the President of Congo came to visit, Joseph Kabila, Colin Powell cited our work in Washington to try to articulate the hardship the Congo was going through and how much America was dedicated to solving it. So it was very accepted - my work has been very accepted in the past. And I think in none of those conflict that we discussed: Sierra Leone, Burundi, Congo, Rwanda, where I produced mortality estimates. In none of them was the US government directly involved. And in fact, my agenda, ending death and suffering, was the US government's agenda in each of those crises. So it was, it was accepted because the message was acceptable.

F7:53 - 14:29: Les Roberts telling anecdotes about being smuggled into Iraq and his driver.

MJ: How do you prepare for you survey? You said in one particular interview I think it was

April 23, 2005 you were being interviewed. And you said Americans are so hated that I couldn't go around talking to people. We could pick a random point in each cluster, each village, or town we surveyed. How did you go about surveying? And were so hated as you say?

LR: So the first thing we did was we got lists of how many people lived in each of the provinces and we assigned our 33 clusters to those provinces so that the big provinces got a lot of visits, or a lot of clusters, and the little provinces got proportionally fewer. So for example, Baghdad which is about 1/5 of the country got about 1/5, or I think 6 or 7, of the clusters. And some of the tiny governorates, which have just half a million people actually by random chance got missed. So we, we assigned our clusters with a sort of randomization technique that's just the standard way we do this in public health, and then once we got to the province level, if we were going to go visit one or two locations we repeated that process and we got a list of how many people lived in every village and area, and rural areas are referred to as villages, so they're sort of known populations by various areas in a province. And we assigned our clusters to them again at random, so the big places had a big chance of being visited and the smaller chances - the smaller places had a smaller chance of being visited proportionally. And then we went out to that village, or in some cases a section of a city, and we drew a map. We drove around that little village or that part of the city with one of those GPS devices that you might use while camping or boating and we measured how far it was east to west and north to south and we made a very very simple map and we guessed where we were physically on the map, put a grid on that map and picked two coordinates on that grid. and when we did that we were then picking a place that was some distance, some direction away from where we were, and then we used that GPS unit to take us to that point - at random.

MJ: Ah, So -

LR: And when we got to there we used the GPS to tell us exactly where that point was and then the GPS determined what were the three houses closest to that point. So it was not perfect, but as close to random as we can do in most of these circumstances.

MJ: So, when you're in - you get into Iraq, you go through this thing with the driver, you set yourself up with the global positioning system, you draw a map.

LR: There's a step I missed in there. There was a professor in Baghdad I had met over the Internet. He turned out to be the perfect partner for this. He didn't really understand all the fancy statistics and sampling methods, but he understood how things worked in Iraq, he understood how to get through checkpoints, he understood how to get political cover in case you were arrested, and he sort of laid all the groundwork politically and logistically. And then we picked our random villages and houses and on we went - that's right.

MJ: So you had an interviewing team, and you say that went out with the interviewers for the first eight days. On the eighth day -----unintelligible----- picked up your interviewers and you said it was a pretty bad situation.

LR: I'm sorry I didn't catch your question.

MJ: Oh the question was, that you had an interviewing team, you had gone out with the interviewing team for the first eight days, on the eighth day the police in Iraq picked up your interviewing team.

LR: That's right. By random chance we had the bad luck of knocking on the door of the governor's house in the city of Balad. And *laughter*, there I am I'm sitting in my car and I

watch the police roll up and my interviewers come out of the house and they pile in the back of the police car and off it goes. Now this was a town very very anti-American. There was a big picture of the cleric Muqtada-al-Sadr as you drove into town and a picture of his father - these are like 40 foot tall pictures as you drive into town. So it was abundantly clear who they sided with, and Muqtada-al-Sadr's probably the most anti-American political figure in Iraq today. And, so I was pretty worried that these folks would be arrested if they found out I was there, that we might all go to jail or worse, and I told my driver I thought he should take me out - outside of town and leave me somewhere in the desert and I'll just hide in case the police came looking for the driver and the car. And he said "No, no no no I can't leave you Les. I can't do this." So I hid my passport and I hid anything that looked like it would have any documentation on it. My Iraqi colleagues had in advance produced some fake business cards for me that said I was Dr. Abdul-Salam from the Bosnian National University, and by being Bosnian, that would explain how I could have blue eyes, look European, be bald, and still be a Muslim and be OK. Now it was very cleverly thought out, and also why I wouldn't speak Arabic. So I had my fake I.D., my fake cards ready and we sat it out, but in the end the interviewers talked their way out of it, they came back, they didn't come back to the car they just went right back to the houses and finished 30 came back, and they were so shaken by this that I didn't go out with them again. I think we all realized that for them to be with an American is a little like being with a radioactive substance - it's just nothing but danger in it for them. And by the eighth round these guys understood very well how to pick a random point with a GPS unit, pick the houses, so there wasn't anything I was adding to the sampling process. And from that point on, all of the interviewers had self- , they were almost all sufficient. They all spoke English very well, so every night when the driver would bring me the data forms if there was something on the sheet that they had filled out that looked confusing or didn't make sense I would call them up at home of the cellphone and say, "Dr. Jamal, I see you went to this house, and there's a woman there now but there was no woman in 2002, I don't understand - what happened?" And normally they could explain and if not I'd give the data forms back to them and they'd figure it out the next day. So I talked with them every day, but I never went out with the interviewers after that, after that harrowing experience with the police.

22:03

MJ: Yeah, your survey, your conclusion seems to be that 2/3 of all violent deaths were in one city - Fallujah.

LR: Well, yeah -

MJ: I thought -

LR: So we, in 2004, came out with an estimate that we thought a 100,000 excess deaths had occurred. When we did that, we set the Fallujah numbers aside, we didn't think they were wrong, but the vast, as you say 2/3 of all the violent deaths we found were there in this one 30 house cluster in Fallujah, and if in 2004, the fall of 2004, you had been watching the news this would have been very plausible. First, there was that big, incursion into Fallujah into I think April, in which because the press coverage was so negative for the Americans they ended up backing off and pulling back out, and in the month or two months before we went in the city had been surrounded by American forces and was being shelled on a daily basis. So this was plausible that so many people had died, but we just didn't think that it represented a very big segment of Iraq because the city of Fallujah was, was less than, let me think about this, was just over 1% of the country, and the object? of our sampling we were assuming every time we went somewhere that it represented 3% of the country. So we thought it would be imprudent to include the Fallujah cluster in our results. And so we put up this estimate, well we think at least a 100,000 or so have died with a

qualifier because we have set Fallujah aside, if our number is wrong, it's probably wrong because our number is too low. And I think that qualifier, well, while the right language for talking to statisticians it just sounds really imprecise for members of the press. It kind of sounded like we didn't know what we were talking about, and I think that was some, not all, but some of the reason why that first study in 2004 got so little coverage in the American press. It was on the front page of most of the major European and virtually all of the Middle Eastern newspapers, and it was barely mentioned in the American press.

MJ: Well the Lancet that actually published it, I think on October 29, 2004. Back to Fallujah, the Falujah cluster "indicates a point estimate of about 200000 excess deaths in the 3% of Iraq represented by this cluster." The interesting thing was that there was no confidence interval that was given for that point estimate right?

LR: Well actually if you just have a single point you can't put a confidence interval around it.

MJ: I gotcha. I see.

LR: Yeah, so we can imagine that here we are, we're doing a survey. They walk out on the street and they want to know what's the pulse of people in their town. And they measure the first person as 72 and the next one as 68, and 59, and 79, and they start to get this range with an average. And then imagine, from the 30th person they stop a speed freak and they measure his pulse and it's 200. They have to make a decision, am I going to include that extremely different measure, that, what statisticians call outlier in my average or not? Well, if I just measured and include that 300 then my gosh that will raise my average by you know several beats per minute, and maybe you think, well in my hometown one in 30 people is a speed freak or you think this was a very unusual event and if I measure a 100 more I'll probably never find someone like this again. And so we think when we do statistics and we do sampling and we do sampling it's all clean and there's no human judgement in it, but in this case with Fallujah it just seemed unwise to allow 1 of 33 neighborhoods to determine 2/3 of the deaths. And so we didn't include it, and now that we've done the survey again and now that there a couple of other estimates out there which I imagine we'll get to in the next couple of minutes. It seems that the death was higher than a 100,000 but not a lot higher, so I think we probably did the right thing by just setting that Fallujah aside, and using it to *unintelligible* our language

MJ: I thought that at that particular time it was a rather conservative estimate and you all admit that it was conservative -

LR: It was.

MJ: -because you did exclude Fallujah. Yeah. What about the - What about the second survey, the one published on October 11, 2006, did you- you pretty much used the same type of techniques?

LR: Pretty much. By that point, the interview team was terrified of going around with a GPS device. People thought that if they got stopped at checkpoints with a GPS unit, that either people might think it was a bomb detonator, and thus kill them, or worse they might think it was a GPS unit, a device which in Iraq is primarily used for targeting weapons and thus kill them. So they were just not under any circumstances going to use the GPS system, so they did more or less everything the same except they... when they got to a neighborhood and sort of drove around and saw the outline of the neighborhood they sort of counted - they picked off the main streets and then picked one and then picked the side streets of them, or picking one at random, counted all the houses on that street and picked one at random. So they had a slightly different randomization technique. Interestingly when we look at that

first 18 months when the surveys are surveying the same period of time we have almost identical results; I think it was a 112,000 excess deaths in the 2006 survey and like I said, we thought 100,000 plus whatever Fallujah meant in the first survey. So the two results were very, very similar.

28:53

MJ: And you got a 95% confidence interval -

LR: And we're pretty sure these methods didn't have any big biases in them.

MJ: Well, I'm sorry Dr. Roberts there may have been some overlap. But you had a 95% confidence interval between what 3 - I'll say 540,000 to 1 million excess Iraqi deaths

LR: That's right. That's right, but realize when you come up with a confidence interval the probability is it's, it's near the middle. And, so we're 90% sure that it was at least 500,000 as of last summer, and indeed we're only 97% sure that it's 400,000. And you know as you move away from 600,000 or 650,000 the probability you get a result out at 800 or 900 thousand is quite a bit lower than the probability of being around 600,000.

MJ: Well to determine the number of deaths you would have had to know how many people were there. Where did you find that information? The population -

LR: Yeah, we got it from two sources, we got it from, essentially there's a Bureau of Statistics, and the UN Development Program were each putting out these estimates of how many people lived in each, in each province or as they call it in Iraq - governorate. And so we used the UN figures for assigning our clusters, both to the provinces and to the individual cities or villages within the provinces.

MJ: Oh, I see. Well, you know that, and I'm pretty sure you're quite aware, that the Lancet survey that you headed, the one in 2004 and in 2006, apparently the 2006 one in particular, your figures are much higher than those in most other major reports. For instance Iraq Body Count Project, the United Nations, the Iraqi Ministry of Health, a lot of people have been quite critical of your work in the Lancet surveys. How do you respond to those who - what are the criticisms of your surveys?

LR: Well, there have been a couple. Paul Bremmer's pollster called me up and interviewed me and he said he was writing up something for the Wall Street Journal to put these numbers in perspective, and I didn't understand he was actually working for Paul Bremmer at the time he was interviewing me. And then we wrote this op-ed in the Wall Street Journal that got a lot of attention, and it said, look at these guys they only went to 47 neighborhoods you can't possibly represent the whole country with 47 neighborhoods. And, so that's one criticism that's out there. My answer to that is first of all, there is an overwhelming body of evidence in the statistical literature that going to more than 30 places is plenty, and secondly, we had a lot of violence in almost every neighborhood we went to. In a couple in the Kurdish North the rates of violence was low, but otherwise the vast majority of neighborhoods were, were violence rates ten, twenty, fifty times that seen in major US cities. So going to so few places implies our results are wrong, that implies there are these little pockets out there that our sampling missed and if we had just by chance hit one of those pockets things would be really different. Well, the only way our result could be wrong if that logic is true is if our number is too low, because if you throw in another 0 into our neighborhood death toll distribution then your average doesn't change virtually at all. The only way to change the average is like my example of the person with a pulse of 200,

find somewhere where 20% of the population had died, well then that would move up the average. So that's one. Another one, made by a psychologist who to the best of my knowledge has never done any survey like this but remarkably it's gotten picked up in the press, she said we couldn't have possibly done the surveys in the time allotted. Well, that's just absurd. We went to 1849 houses in I forget how many days, 40 something days, it worked out to each interview only having to do 5 interviews a day. These were really short interviews, it took longer to explain the study to people than to ask the five questions in our questionnaire. So that's pretty absurd. So the bottom line is, there have been some criticisms made, but none that give us any pause. None that make us think, oh yeah, that seems really problematic. The most, sort of, valid criticisms are a.) that our results might be too low because people might have lied to us, or b.) that there just don't seem to be the number of people injured that you would expect if 600,000 people have died. Well, I guess my response is to all those criticisms, that there should be 3x the number of people of wounded as dead were developed in places like the Thai-Cambodia border and the Afghan-Pakistan border back before our invasion, and those were conflicts where land mines were the main killers. And in Iraq, people getting shot by guns at close-quarters are the main killers. I just think these wars are different in nature and that's why this criticism comes up, but there have just not been any major holes poked in this study, and there's evolving to be an overwhelming body of evidence out there that we're right.

35:02

MJ: Well, you know one that struck me as strange was the Iraq Body Count Project, they argued that the Lancet estimate was suspect, "because of a very different conclusion reached by another random household survey, the Iraq *unintelligible* -"

LR: - actually, they're wrong about that survey. That other survey sounds very similar death tolls to the death tolls in our survey, so they -

MJ: Right, that's what I was going to point out. I thought it was really interesting that they seem to argue something against you but then pretty much - well you know we have a larger sample size you know we had a considerably better distribution here, and they have pretty much what you found. *laughter*

LR: That's right, and what Iraq Body Count was thinking about was that this survey, it was done by a very good scientist, it was headed by a scientist from Norway, but he didn't actually go to Iraq so it was done by government workers on the ground. And they found in the first, essentially year of occupation 24,000 violent deaths. Our survey would have said something like 37,000 in that same window of time, but, and here's the kicker, they went back to some of the houses and they knew that they were missing a lot of deaths. They had a crude death rate less than half of the death rate from non-violent things that we found and they knew that was absurdly low, and when they went back to the houses they found that they could get, at least when they just asked about child deaths, about 50% more the second time around. They didn't ask about violent deaths because that had, I guess, become too political at that point in time - I'm not fully sure why they didn't ask. But *unintelligible* at a meeting in Geneva about three weeks ago, the author of that study presented his results and said he well he thinks really that the violent death toll could have been as high as 50,000 at the time of his publishing. And realize, the Lancet, the first Lancet study was saying 37,000 in that first, same window of time 13 months. So the two studies are very very consistent actually. And -

MJ: Well, Dr. Roberts, what about the clinical research on the epidemiology of disasters. I watched Dr., and I listened, and payed attention closely to what they were saying -ah, there was one individual from there, I think from Brussels of course, she was criticizing the Lancet

surveys, you, pretty much your words- and she was saying that there were some methodology concerns she had there. She pointed out the results did not fit with any of her work recorded in the past fifteen years of studying conflict zones. She even used Darfur as an example. Do you find it, because I always hear that argument from people who say well this doesn't pan out because in other war zones you would think this would happen, you know people going into other countries en masse - which I think is happening in Iraq, it almost certainly is. People are saying well you should have this occur and then this occur - how much weight do you give those types of individuals who make claims saying well in my experience in fifteen years this does not, this does not coincide with what we should expect.

LR: Well, I don't give it a lot of weight as I think you probably suspect. As I mentioned in the lead-in here, you know I think I had worked in 7 other really hot war zones. And in 5 of them, as this woman from Brussels you mentioned, Debbie Sapirre (sp?), - in 5 of them, disease and the disruption associated with war indirectly killed more people than the violence. So I understand the argument she's making, but in Bosnia, in Kosovo, we had elevated deaths from violence with almost no deaths from non-violent means, and I think that the Iraqi population was a lot closer to those in Kosovo than to those in Darfur. I mean, it is a well-educated population with a lot of resources, most households have you know cellphones and cars and televisions and these are not poor people. So- so, in this particular case I don't put a lot of stock in it, and as you suggest, I think when you have data that just seem wrong the standard way in science to deal with it is for someone to go out and independently repeat the measuring process and see if you come up with the same thing. And we have asked and asked and asked for this to happen and it just hasn't. But since - since the study came out in October there have been some interesting revelations. The first one was that the British government had assessed the Lancet study when it came out in October in two different parts; the group that does development work for the British government, they assessed it, and the, the public health scientists within the British military assessed it. And both of them came to the same conclusion - that the method is about as good as you can get in these sorts of settings, and the British military came to the conclusion that if anything it's an underestimate. And it's very interesting that this story which was broken by the BBC must be back around March didn't get any coverage in the US. A separate thing that came out recently was there was a poll, a poll that was done by ABS and the BBC at the fourth anniversary of the invasion of Iraq, and it, it's available, the summary of the results are still available on the BBC's website, and the first thing they say in there is that 17% of households say they lost a household member to violence. Now if you believe Iraq Body Count and the Ministry of Health has been saying similar numbers which we know are just the tip of the iceberg, but if you believe them that only 70 or so thousand people have died by now, well 70,000, that would be about, let me think about this, -

42:03

MJ: How many people per year?

LR: 1 in 20 households? Yeah it should be around 1 in 20 households that should have lost someone, and our study last summer was saying 1 in 7. And so for the BBC to do a poll that says 17% of households have lost someone to violence is quite consistent with our findings. Secondly -

MJ: I want to thank Dr. Roberts that Fred Kaplan, the journalist for Slate magazine, you know he writes the column "War Stories". It seems as though you convinced him that you know the first survey you did he was quite critical. The second survey 2006, *laughter* he argued that the second survey had some improvements over the first. He said there was -

LR: *laughter*

MJ: - a larger sample size, he said it was more fastidious, attention to data-gathering procedures, and there was a narrower range of uncertainty. So you are, even though he does in fact say there are some questions that the Lancet study doesn't really answer, you have won over some people who were quite critical of the first study.

LR: Well, I am sorry to say that probably there's unfortunately other evidence coming out as well. You know if - if the Iraq Body Count and Ministry of Health tallies are correct it's only about 1 in 10 deaths over the last 4 and a half years have been from violence because there have to be a certain number, 140,000 or so every year from natural causes. Every, every population has some people dying everyday, it's just part of the life process, and we think in Iraq that would be something of the order of 12,000 a month, 140,000 a year, something like that. So if there's only been 70,000 deaths in the last four and a half years that means if only about 1 in 10 deaths have been from violence and every shred of evidence we have is that most of the bodies coming into morgues are not from natural causes but from violence. So that supports it -

MJ: I see. Dr. Roberts, I have a few more -

LR: And, if -

MJ: Oh, sorry

LR: OK, go ahead.

MJ: I have a few more short questions and then I'm going to turn this over because there are some people, listeners, callers, who want to ask you questions. But really really quickly -

LR: Oh OK, I'll be less - less verbose then.

MJ: *laughter* Very quickly, what do you think, just a conservative estimate of the number of Iraqis dead as a result of the invasion by the coalition forces now?

LR: Can't answer that, it was 650,000 last summer. I think all evidence is that things have only gotten worse, but -but I am only speculating since then.

MJ: Dr. Roberts, if you could vote for George Bush and George Bush was running and could run, would you vote for him?

LR: No.

MJ: Dr. Roberts, are you a Democrat or Republican? I know that you ran for office.

LR: Yeah, I am a registered Democrat, but you know I wasn't until after I had been to Iraq. All of my life, when I had worked for the Federal government I was just not affiliated with any party, not a very political guy. But the combination of the debacle in Iraq and the debacle of Hurricane Katrina just put me over the edge, and so yes, I joined the Democratic party as a response to this in fact. But for twenty years of my voting life, I was not associated with any party.

MJ: And Dr. Roberts, another question that's really just comes off the top of my head, is - are you going to vote for the - a President, and who do you think you would vote for this

time around?

LR: *laughter*

MJ: *laughter*

LR: I am very very fond of Dennis Kucinich and I don't think he has a chance of winning the Democratic primary, so I'm just going to hold my tongue and see how it all pans out.

MJ: Thank you Dr. Roberts

46:22: listener questions follow