



Ministry  
of Defence

Defence Statistics (Health)  
Ministry of Defence  
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Reference: [REDACTED]

[REDACTED]

Date: 27 June 2014

Dear [REDACTED],

Thank you for your email of 5<sup>th</sup> June 2014 in which you clarified your request of 12<sup>th</sup> May 2014 for the following information:

- 1. The number of UK Armed Forces who died (hostile and non-hostile) as a result of Operations in Afghanistan between January 2004 and January 2014.*
- 2. The number of UK armed Forces who have been injured in action as a result of Operations in Afghanistan between January 2004 and January 2014*
- 3. The number of Hostile forces that have died as a result of Operations in Afghanistan between January 2004 and January 2014*
- 4. The number of Hostile forces that have been injured in action as a result of Operations in Afghanistan between January 2004 and January 2014*

I am treating your correspondence as a request for information under the Freedom of Information Act (FOI) 2000.

A search for the information has now been completed within the Ministry of Defence, and I can confirm that information in scope of your request is held for parts one and two. I have established that the information you requested in parts three and four is not held by the Ministry of Defence.

Between 1 January 2004 and 31 December 2013, **444** UK Armed Forces personnel have died as a result of operations in Afghanistan, **404** were the result of hostile action and **40** due to other causes.

Defence Statistics use the term wounded in action (WIA) when the circumstances that resulted in the injury were the result of direct or indirect hostile action. The term 'injury' is a generic term which includes both battle (WIA) and non-battle injuries. Therefore we have interpreted your question to relate to UK Armed Forces Personnel injured as a result of direct or indirect hostile action (WIA) on Operations in Afghanistan.

Between 1 January 2004 and 31 December 2013, **2,394** UK Armed Forces Personnel were injured as a result of direct or indirect hostile action (WIA) on Operations in Afghanistan.

Under section 16 of the Act (Advice and Assistance), you may find it useful to note the following:

#### **Deaths**

Defence Statistics (Health) compiles the Department's authoritative deaths database for all UK Armed Forces personnel who died whilst in Service going back to 1984. Information is compiled from several internal and external sources from which we release a number of internal analyses and external National Statistics Notices.

Figures are for tri-Service regular and reservist personnel.

Hostile action includes deaths categorised as Killed in Action (KIA) and Died of Wounds (DOW) where;

KIA is a battle casualty who is killed outright or who dies as a result of wounds or other injuries before reaching a medical treatment facility.

DOW is a battle casualty who dies of wounds or other injuries received in action, after having reached a medical treatment facility.

Other causes include deaths due to; accidents, natural causes, assault, coroner confirmed suicide or open verdicts and cause not known.

## **Casualties**

The figures on the number of casualties presented are sourced from Defence Statistics four main casualty reporting systems (the Notification of Casualty (NOTICAS) system, field hospital admissions data, the Aeromedical Evacuation data and the Joint Theatre Trauma Registry) and have been merged to determine the total number of casualties on Operations in Afghanistan. It does not include personnel who attend a UK or Coalition Medical Field Hospital Facility but who are not admitted. These figures also do not include those who are seen in primary health care.

### *NOTICAS*

NOTICAS is the name for the formalised system of reporting casualties within the UK Armed Forces. The NOTICAS reports raised for casualties contain information on how seriously medical staff in theatre judge their condition to be. They are not strictly medical categories but are designed to give an indication of the severity of the injury to inform what the individual's next of kin are told.

### *Field Hospital Admissions*

The EpiNATO J97 returns are used to identify field hospital admissions for UK personnel treated at the UK field hospital as well as those treated at coalition medical facilities in Afghanistan.

Defence Statistics also received information on admissions at the UK Field Hospital from the electronic Operational Emergency Department Attendance Register (OpEDAR).

### *Aeromedical Evacuations*

Aeromedical Evacuation is the medically supervised movement of patients to and between medical facilities by air transportation. The RAF Aeromedical Evacuation Service provides the worldwide patient air movement capability for Defence 24 hours a day, 365 days a year. Patients are risk assessed prior to flight, and when necessary, trained medical teams are provided to deliver care in the air.

Defence Statistics receive Aeromedical Evacuation records fortnightly from the Aeromedical Evacuation Control Centre (AECC) at RAF Brize Norton for Operations in Afghanistan.

### *Joint Theatre Trauma Registry (JTTR)*

The Joint Theatre Trauma Registry (JTTR) commenced during 2003 to improve the care of the seriously injured patient from the point of injury to the point of discharge from hospital treatment.

Would you like to be added to our contact list, so that we can inform you about updates to our statistical publications covering Deaths and Casualties in the UK Armed Forces and consult you if we are thinking of making changes? You can subscribe to updates by emailing: [DefStrat-Stat-Health-PQ-FOI@mod.uk](mailto:DefStrat-Stat-Health-PQ-FOI@mod.uk)

If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact me in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Information Rights Compliance team, 1st Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail [CIO-FOI-IR@mod.uk](mailto:CIO-FOI-IR@mod.uk)). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <http://www.ico.gov.uk>.

I hope this is helpful.

Yours sincerely

Defence Statistics (Health) Head (B1)