

Researchers call for independent body to monitor deaths in wars and other crises... and more

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The accurate documentation of deaths during wars and other humanitarian emergencies is critical to grading the severity of the crisis and adjusting relief operations accordingly, and yet collection of data on death rates is often incomplete, say two researchers in this week's *PLoS Medicine*.

Accurate data on death rates, they say, can provide a basis for both "humanitarian" advocacy (i.e. calling for appropriate assistance) as well as "political" advocacy (for example, calling for compliance with international humanitarian law, a set of rules that seek to limit the effects of armed conflict for humanitarian reasons).

Francesco Checchi (London School of Hygiene and Tropical Medicine), who has worked on mortality surveys in Darfur and Northern Uganda, and Les Roberts (Columbia University, New York), who has worked on mortality surveys in Iraq and the Democratic Republic of the Congo (DRC), say that the best tools for prospectively monitoring deaths were missing or deficient "in all recent high-mortality crises" with the exception of Bosnia.

The authors call for the establishment of a new independent body to ensure that the best measurement tools are used to oversee the documentation of deaths during crises.

"How many of the more than 3 million estimated to have died in the DRC because of war might still be alive," ask the authors, "if credible, crisis-wide mortality estimates had become available sooner, and been used to inform policy?"

The establishment of a technical, apolitical body dedicated to timely, systematic collection of valid mortality data, say Checchi and Roberts, especially in the least funded and publicized crises, could help to ensure that the DRC experience is not repeated.

"Such a body could also independently evaluate mortality study protocols and reports, promote best practice methods, and train a cadre of researchers to be deployed to emergent crises. Such a body could constitute a resource for relief agencies and improve the quality of press coverage and discussion around ongoing crises."

Citation: Checchi F, Roberts L (2008) Documenting mortality in crises: What keeps us from doing better? *PLoS Med* 5(7): e146.

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