



2014-066

Frank Ledwidge, *Investment in Blood: The True Cost of Britain's Afghan War*. New Haven: Yale Univ. Press, 2013. Pp. x, 269. ISBN 978-0-300-19062-5.

Review by Brian Drohan, The University of North Carolina (bdrohan@live.unc.edu).

Investment in Blood is a biting indictment of the British war effort in Afghanistan. Author Frank Ledwidge brings to his subject not only a keen analytical perspective on the conflict, but also significant personal experience. A British lawyer and former naval intelligence officer in Iraq, he served as a civilian justice adviser in Afghanistan's Helmand Province during 2007. Ledwidge writes that while he was in Helmand—a province approximately half the size of Kentucky with a population of ca. 1.4 million—he tended to explain Britain's "signal lack of success" in terms of "a shortage of helicopters or armored vehicles" (3). But with the passage of time, he has come to see the war's devastating financial and personal costs. Building on his previous book, *Losing Small Wars*,¹ which analyzed the military's operational and institutional failures, Ledwidge now turns to the costs of military involvement in Afghanistan for Britain as well as the people of Helmand.

The author relies on "firmly evidenced" data, such as publicly available government reports and statistics (10). He asserts that, despite the existence of considerable public data on the Afghan War, the British government has not produced an account of its financial and human costs since 2006. Bearing this in mind, Ledwidge has chosen to emphasize the conflict's immediate consequences rather than forecasting long-term trends. He does not estimate such second- or third-order effects as post-traumatic stress disorder (PTSD). Nor does he treat the war's impact on the economy of the United Kingdom, instead limiting himself to an analysis based on "minimum estimates" (10). *Investment in Blood* contains three parts. The first addresses the conflict's human costs; the second concerns its financial costs; and the third asks what Britain's efforts have achieved.

Part I begins by describing the origins of Britain's Helmand deployment. Before British forces arrived, Helmand was considered a "backwater." Taliban activity was concentrated in Kandahar and Uruzgan, which were assigned to Canadian and Dutch forces. Britain, however, decided to take responsibility for Helmand because it was the center of the Afghan opium trade. Ledwidge argues that Prime Minister Tony Blair wanted British forces in Helmand because it would "look good" to tackle international narcotics trafficking. Perceiving the province's incumbent governor as a corrupt drug trafficker, British officials pressured Afghan President Hamid Karzai to dismiss him. Karzai eventually complied, but the move disrupted complex local networks of allegiance and political patronage. The result was that several thousand militia fighters who had been loyal to the governor found themselves out of work and blamed the British. Because their patron was no longer a member of the government, many Helmand fighters joined the Taliban. But the Taliban were not a monolithic entity. Here Ledwidge helpfully clarifies the shifting nature of Afghan alliances and local politics: a fighter's decision to support or oppose the government might have less to do with ideology than with local dynamics of power, employment, and respect.

Many Taliban fighters in Helmand were simply "accidental guerrillas"—local people with local grievances fighting foreign troops regarded as invaders with no business being in their territory.² When British troops moved into Helmand, they met unexpectedly stiff resistance from "Taliban" fighters. The conflict soon took a brutal turn: "Mini-sieges erupted across the province, and British units found themselves involved in their own little 'Rorke's Drifts,' heroically holding off savage hordes. These fights—which saw British numerical weakness more than compensated for by huge amounts of air-delivered high explosives and

1. Subtitle: *British Military Failure in Iraq and Afghanistan* (New Haven: Yale U Pr, 2011).

2. See David Kilcullen, *The Accidental Guerrilla: Fighting Small Wars in the Midst of a Big One* (NY: Oxford U Pr, 2011).

an attendant depopulation of the towns at the centre of the fighting—set the scene for the rest of the British time in the province” (36). Ironically, British political bumbling created a new problem. By 2009, according to Ledwidge, the campaign was going so badly that US Marines were sent to stabilize the situation.

After explaining Britain’s involvement in the Helmand conflict, Ledwidge begins his assessment of the war’s human costs in what can come across as a morbid accounting ledger. On the British side, as of 18 January 2013, over 440 soldiers had been killed and 2,076 wounded. Of the latter, 593 sustained life-threatening injuries and 247 suffered amputations. For the Afghans, however, “there is no agreed metric for calculating civilian death figures” (67). NATO and the United Nations, for instance, use different methodologies and different definitions of “civilian.” Although the Taliban inflicted most civilian casualties, British troops were also responsible for some of them. Ledwidge examines the number of compensation claims paid by British forces between December 2005 and May 2012, concluding that the Ministry of Defence (MOD) paid £824,000 to settle 249 death and 131 personal injury claims. This is a conservative estimate, however, since it only accounts for those Afghans willing to apply for compensation. But civilian suffering was not limited to death or injury. The conflict also created a steady stream of refugees. Ledwidge cites an Amnesty International report indicating that, in the first half of 2011 across Afghanistan, 91,000 people fled their homes. Many refugees blamed the British for their plight. One man angrily declared “if I had a knife I would cut off the head of the British who made me leave Helmand” (95).

In Part II, Ledwidge analyzes the war’s financial costs. The MOD estimated that Britain had spent £17 billion in Afghanistan from 2001 to 2012, but the House of Commons Library later revised that figure upward to £17.3 billion. According to Ledwidge, however, the MOD estimate only accounts for the war’s direct military costs, not the wider range of additional, indirect costs associated with the procurement of supplies bound for Afghanistan and the salaries of personnel deployed there or performing support services in Britain. These logistical costs are tremendous—to sustain UK forces, the Royal Air Force operates an “airbridge” into Helmand to the tune of £198 million (for 2011-12).

Ledwidge concludes with a summation of the Afghan War’s direct military costs as reported by MOD, the costs of purchasing additional aircraft and new equipment, the costs of maintaining an army “overinflated by 20 percent for at least five years” (121), and the costs of “return and reset,” including the repair or replacement of damaged materiel. In Ledwidge’s estimate, the Helmand campaign has consumed £31.1 billion. On the civilian side, the Department for International Development (DFID) has spent almost £950 million in assistance for Helmand, but, because DFID’s mandate is “institution building,” much of that money has gone to the Afghan government, where it is highly vulnerable to widespread fraud and corruption. Further, “it is almost impossible to verify what is really being done with the money, for the very simple reason that it is too dangerous to send Western assessors to project locations. At best, local assessors are subcontracted, and the results of their researches are all too often incomplete or inaccurate.” It is therefore “impossible to monitor their work” (148).

Turning in Part III to Britain’s actual achievements in Afghanistan, Ledwidge describes its attempts to improve governance and infrastructure in the midst of war as “hot stabilization,” where the military is employed to protect Afghan civilians and those conducting development and governance work, thereby mitigating the conditions that create conflict. But Taliban intimidation and co-option of local leaders and communities, combined with government corruption and the presence of foreign troops make for a “toxic cocktail” (172). During its eight-year involvement, Ledwidge writes, Britain managed to establish what “might be considered the basis of ‘government’” (174) in only three of Helmand’s fourteen districts. In addition, efforts to check the narcotics trade antagonized Helmandi farmers.

In Ledwidge’s view, British involvement in Afghanistan has also failed to make Britain safer from terrorism. NATO’s military involvement has generated new enemies, who perceive its forces as foreign occupiers. The Afghan campaign “has been a quite excellent recruiting tool [for Al Qaeda,] playing directly into its key selling point: that the West is bent on occupying and controlling Muslim lands” (204). Ledwidge believes that the “real” reason for Britain’s heavy involvement in Afghanistan is “the perceived necessity of retaining the closest possible links with the U.S.” (205) and that the true threat to Britain’s security is its relationship

with Pakistan and the social and economic challenges faced by Pakistani youths in the United Kingdom. The alienation of British citizens poses a greater challenge to their nation's interests than the Taliban's bid for political power in Afghanistan.

Although *Investment in Blood* sometimes reads like a balance sheet, Ledwidge accomplishes more than a simple summation of British losses. The book is also a cry for help, an indictment of the British government for neglecting its wounded veterans. The greatest medical challenge facing soldiers occurs after they have completed their terms of service. In discussing their plight, Ledwidge descends from the lofty heights of broad statistical analysis to the hard specifics of personal experiences. One wounded officer, for example, spent three years appealing to the MOD for injury compensation. Hundreds of veterans have encountered similar bureaucratic hurdles and received little or no assistance. Injured soldiers receive excellent health care at the front lines, but “the problems begin when [they] return to the UK” (131).

The British government, Ledwidge maintains, has not budgeted anywhere near sufficient funds for the future health care costs of injured veterans. Instead, charities such as Help for Heroes, which raised £100 million in its first three and a half years of existence, have provided the bulk of assistance. A government agency does exist for this purpose—the Service Personnel and Veterans Agency—but it “enjoys nothing like the remit of the U.S. Department of Veterans Affairs” (137). Ledwidge observes that private charities' effectiveness has masked the state's insufficiencies.

The great value of *Investment in Blood* lies not in the numbers themselves, but in what they reveal—the British government spent billions of pounds fighting in Afghanistan but has shirked its obligation to care for those who fought. Frank Ledwidge reminds us of a nation's supreme duty to its soldiers: “we sent them, now we must take care of the consequences” (64).