

## War and Medicine

### David Cotterrell on Afghanistan

#### David Cotterrell talks about his time in military hospitals in Afghanistan, a trip supported by the Ministry of Defence and the Wellcome Trust.

D: They had a very tight itinerary planned for me, which I didn't stick to entirely, but the core focus was really to get me from Brize Norton through military channels, forward past Kandahar to Camp Bastion, which is the central field hospital in the middle of the desert.

They deal with dentistry and primary care and all the things of a local health centre, but they just happen to have this extraordinary need to also be the main kind of operating theatres.

Any casualties that came out of Helmand Province would be routed through, so there was this kind of conduit for, you know, one person out of a group of 12 might get shot; they would appear in front of you in Camp Bastion. So the field hospital was this narrow conduit with two operating bays and about four resus tables and they would essentially be dealing with a fairly regular intake of Afghan, Taliban, British, civilian, people with bullet, shell, shrapnel wounds and mine injuries. And in a way the most extraordinary thing was this kind of incredible saturation of knowledge inside an environment that appeared quite primitive from outside. They had surgeons that dealt with a whole range of expertise, all working inside a tent in a very dusty, dirty environment.

The amazing thing was that people would be calm when they came in and I was expecting it to be kind of dramatic screaming, like in Hollywood. But people had already either self-administered morphine or been treated to some extent in the helicopter and they arrived bewildered and probably not really fully aware of their surroundings.

It felt like it was a very extreme form of work in that a chest wound, a single bullet hole, became something which didn't seem to cause panic. It wasn't necessarily a terrible drama because there was such knowledge about how you deal with something like that. They were able to find more people – possibly unexpected survivals – than you would normally have in a hospital and that was because of the narrow focus of what was done there. Although the primary healthcare was running as well, essentially these are young, incredibly fit people that are mainly being treated for trauma wounds, and the healthcare and the route to hospital and the route to these people has been laid out in advance. And knowing where the soldiers are, knowing from the moment of the point of wounding, that healthcare will be applied and that they will be brought into this environment and the expectation and understanding of what's coming, meant that I think for some it was kind of a rewarding experience as well. Because they would find their skills being used to save lives and possibly to see a level of recovery which might be something you would hope for in civilian life but be less able to really plan for.

That was intended to be my trip really, really just to try and understand what I saw at Camp Bastion. But from there it became necessary for me personally to try and find some understanding of how Camp Bastion fitted into a grander picture and I struggled to understand how to contextualise an environment where casualties came from the air and then flew out again without any understanding of where they were coming from or going back to. So from there I went forward to Sangin in the poppy-growing area and I stayed with the Commandos for a period of time to try and kind of get some sense of – some kind of more detailed and complex image of the landscape that these people were being brought from. And why they felt a desire to return to the communities that they'd been pulled away from during some kind of firefight or trauma.

At Sangin the context is quite different – the medical facilities are much more limited. They have what's called 'Role One' facilities, which are essentially kind of medical posts. In Sangin it was in one room of the base, which happened to be an old warlord's house that had been bombed out and sandbagged by the marines and various others that had lived there and made into a kind of secure base. So there was one room with packeted

medicines and bandages and various other materials for conducting kind of emergency treatments there, but nothing like the scale of what could be done at Bastion. For many of the soldiers that would get injured nearby Sangin, they wouldn't get treated there at all, the helicopters would extract them straight back to Bastion. But what was interesting was that in Sangin the Role One facility was pretty much the only primary healthcare facility in the area. So you'd have civilians taking huge personal risk by arriving at the base in order to get treated.

There is a very different kind of aesthetic, strangely, to the environment at Sangin to Camp Bastion. In Camp Bastion it was possible to wear an ironed uniform, which was clean at all times, and people would have an amazing choice of food, which appeared quite fresh. And in Sangin the toilets were tubes going into the ground, the food was dried ten-man ration packs and the washing facilities were either solar showers, which you'd heat up in the sun, or otherwise the river that happened to run directly through the compound. They had a rope wrapped across the river that you'd hold onto because otherwise you'd get swept straight into the village and there were stories of soldiers having to sprint back from there in their boxer shorts, carrying their body armour. Essentially there was a feeling that you were, that it was possible to understand visually, the connection between you and the conflict. I didn't see people firing at me. I didn't feel personal threat, but it was obvious that the reason for this base being there was its proximity to not only the local population, but also to a very big political situation. It was in the way, basically.

There were no presumptions made, I took just about every kind of recording equipment I could carry with me in the hope that one of them might be relevant.

I'm not a photographer, but I became [one]. I had all the trappings of a photographer while I was there because it was easier for me and for those around me to understand my role if I recorded what I saw with a camera.

There were certain times where – I took a video camera – certain times where the video camera became a kind of an extra set of eyes and it allowed me to see things that I felt uncomfortable being present for. I recorded the complexity of a major incident when there was a potential for 14 casualties coming in and you saw the entire tent complex come to life and all of these people that were on standby suddenly were back on duty. And so the camera was there to in a way be a kind of silent witness to something that I wasn't sure if I'd be able to watch myself.

I found quite moving the experience of seeing an aerial mode evacuation. Basically watching intensive care patients travelling through the night, being cared for on the transition between an environment which was purely military, where medical equipment seemed anomalous, through to an environment where the military would look anomalous back in Birmingham. And this kind of... I'd witnessed part of that journey to Kandahar and I'll be attempting to document panoramically this low-light environment where people are quietly working on patients that may never remember the experience of the journey themselves.

I think it was... I mean the main thing was recognising that the complexity of any situation and the complexity of the community, in that I didn't love the military by the time I left, but I became... I had enormous respect for individuals and I certainly didn't feel any kind of any clear kind of position against or for the organisation as a whole. The thing is, as you get closer you recognise the diversity. What I saw essentially was a huge level of professionalism from the people attempting and having a clear understanding of their own role, but also there was a lack of peripheral vision that I achieved as I got closer. So while I was sitting on the couch watching Channel 4 news I feel I understand the entire world in half an hour.

At the position where you are closest to the reality of the situation in Sangin, the hour-and-a-quarter briefing that might last for the beginning of the day would tell me nothing beyond a kilometre and a half away and I would have no knowledge if Kabul had fallen or if Pakistan had declared martial law. It's not just that there was an ignorance to being an armchair commentator, but also that there is an impossibility of an understanding even staring with close proximity at a situation. It involves this complexity of understanding which it's hard for any individual to achieve.

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