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THE ATTACHED TRANSCRIPT WAS TYPED FROM A RECORDING AND NOT COPIED FROM AN ORIGINAL SCRIPT. BECAUSE OF THE RISK OF MISHEARING AND THE DIFFICULTY IN SOME CASES OF IDENTIFYING INDIVIDUAL SPEAKERS, THE BBC CANNOT VOUCH FOR ITS COMPLETE ACCURACY.

“FILE ON 4”

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ACTUALITY OF MUSIC

CUFFE: Another body is received with full military honours at the Brize Norton airbase in Oxfordshire as conflicts in Iraq and Afghanistan continue to take their toll. There’s a military covenant which offers armed forces and their families a duty of care, but in File on 4 we investigate three deaths which families claim could have been prevented. They give us an insight into the conditions soldiers are asked to operate in, and they raise serious concerns about the front-line medical care given to those injured in the field.

PAUL SMITH: When I asked for the med pack and medic, there was a stunned silence, and then a few moments later we were told that none of those things were available. I was left feeling quite betrayed and let down by my own side.

CUFFE: We also hear from grieving relatives about the long delay in getting an inquest and the obstacles the Government seems to put in their way when they try to seek the truth.

SUE SMITH: My son was a soldier for three years, he was my son for twenty-one, and I think we have got the rights, as parents, to know, and I am sick to death of being fobbed off and basically treated with contempt, as if I'm an idiot. I am not an idiot.

SIGNATURE TUNE

CATHERINE SMITH: There was a knock at the door and it was Captain Thompson, who was the liaison officer, and he said, "Can I come in?" I said yes. I said, "Has there been an accident?" He said, "It's a bit more serious," he said, "We have to tell you Jason has died."

CUFFE: Catherine Smith's son, Jason, was a territorial soldier, anxious to prove himself as good as any regular. In 2003, he was deployed to Iraq with the Kings Own Scottish Borderers and arrived at his post in Al Almarah as summer temperatures soared. Jason Smith didn't die in combat, but as the result of heat stroke.

CATHERINE SMITH: Every time you ask, can you explain, but nobody could explain, so I eventually asked a GP who had lived in South Africa and had actually dealt with heat injury, as they call it, and he said there must have been something else went wrong to be in that state and it doesn't happen suddenly. So of course I kept saying that to them, and they all kept telling me everything's fine, everything went fine, he just couldn't take the heat.

CUFFE: The Ministry of Defence held a Board of Inquiry into Jason's death. This is an internal investigation, and his mother wanted to know what it said. She kept pressing for information but was getting nowhere. Then in April last year, the Army's Director of Personnel Services wrote a letter to her solicitor:

READER IN STUDIO: As I have previously stated, I would dearly like Catherine to understand that Jason's death has been fully investigated and that there are no underlying issues at all.

CUFFE: But information has since emerged – both from an inquest last November and from File on 4's own investigation – that this is far from the complete truth.

ACTUALITY OF JOHN HORSEMAN WITH PILLS

HORSEMAN: That's zomorph, that's 100 ml capsules. I take two of them a day. Again it's morphine. That's my blood pressure tablets, because of my kidney problem, I have to have

CUFFE: John Horseman is permanently disabled with a rare condition brought about by the extreme heat in Iraq. He gets through each day on doses of medication. A comrade of Jason Smith's, he was deployed to Iraq at the same time.

HORSEMAN: The heat was unbelievable. It was like putting your oven on to the highest temperature and chuck your head into it. We're running round in Saxons, it's a microwave on wheels in Iraq. There were guys chucking water over their driver to keep him cool so he didn't pass out. There were pallets and pallets and pallets of water everywhere and we were just told to drink them, and yet it's like again run a hot bath and drink a hot bath. That's what the water was like out there, you didn't get cold water. He did not get cold water.

CUFFE: John Horseman collapsed with heat stroke and was evacuated home a week before Jason died. He'd been stationed in the main camp, which had some air-conditioning. But Jason Smith was with C Company at a sports stadium a few miles away, where there was no respite from the heat. Corporal Jim Black was the company's ambulance driver, also based at the stadium.

BLACK: You cannot describe it – it is a hell hole, that's what it is. When the sun comes down and it hits concrete or anything, it bounces back off the concrete and it makes it that much hotter. There's no air in there, so the sun was just coming straight down at you. I'm sure that the reports were saying it got up to 85 at one stage. Now that is 130 or 140 fahrenheit, something like that. The wind was blowing through the broken windows and it was like having a hairdryer plonked in front of your face, and that was 24/7.

CUFFE: And could you go anywhere to get cool?

BLACK: No, nowhere whatsoever. There was just empty rooms. You went into empty rooms or something like that and it was just stifling hot. You could maybe get out the wind a wee bit, but it was just far too hot. There was just nowhere to get out of the heat at all, nowhere whatsoever.

CUFFE: How was this affecting you all?

BLACK: You just couldn't take enough water on board just to hydrate yourself.

CUFFE: Each soldier was given a card with instructions on how much water to drink and the need for extra salt. The inquest into Jason's death found that some of the information was seriously wrong, the rest was inconsistent or wholly inadequate. Not surprisingly, more and more soldiers were suffering from heat related illness. If they were so dehydrated as to need a drip with fluids, they were supposed to be referred to hospital. But John Horseman says this procedure wasn't always followed.

HORSEMAN: Because the guys were dropping that fast with the heat, we were actually told that our leave was in danger. If anyone else dropped down or was sent home with heat exhaustion, our leave would be cancelled. We wanted our leave, we wanted to see our families, we wanted to see our kids, so you'd shut your mouth. You'd actually then start going to your mate, "Come on, keep going, keep going," because your leave was gold dust.

CUFFE: Who monitors the number of times that you suffer from heat stroke?

HORSEMAN: The medical team were the ones that was watching what was going on.

CUFFE: And do you think they were under pressure not to identify too many people?

HORSEMAN: Definitely. Definitely. I went down with heat exhaustion and I had a sore back, that's what it was put down to. It wasn't reported.

CUFFE: So the medical teams weren't reporting incidents of heat stroke?

HORSEMAN: No, no. In my view no.

CUFFE: This account of pressure on soldiers not to report is supported by ambulance driver, Jim Black. It was his job to take anyone with severe heat stroke to the nearest medical facility.

BLACK: Not unless they really are suffering we would have taken them out to the hospital, but then again we had to get permission to take them into the hospital. It wasn't just the medic saying, "I need to take him into hospital." We couldn't go in on our own. We had to get an escort, so obviously we had to get an OC to get an escort to take us in, and sometimes, well, it just didn't happen. We had to wait quite a bit at times.

CUFFE: So the medic might recommend that somebody go to hospital, but the Commanding Officer would not allow it?

BLACK: Well they would say they didn't want him to leave here, because if he leaves here we'll not get him back, and that was basically what he said. And they were short of bodies on the ground as it is, so that's basically what was happening.

CUFFE: We don't know when Jason Smith first became ill, because the MoD says his medical records have gone missing. But his mother Catherine has a letter from him, written on July 29th.

READING OF JASON'S LETTER

CATHERINE SMITH: I was so dehydrated the other day, the medics could not get a vein to put in a drip, so I had to drink water with sugar in it. Even though I have been drinking three to four bottles per day. How is Dad getting on? Your loving son, Jason.

CUFFE: So it seems that instead of being referred to the medical unit, Jason was simply given glucose and put on bed rest. At the inquest, the coroner said the army's failure to follow this and other procedures for dealing with heat illness significantly increased the risk of a fatal outcome. Two weeks later, Jason Smith was again suffering from the heat and went to lie down. That evening he crawled out of his bed to get help. Jim Black, who was away from the stadium at the time, received an emergency call to get his ambulance back there fast.

BLACK: There was lot of people trying to cool Jason down, putting water over him and fanning him down with damp cloths and everything, but he was just far too hot. And obviously with not having any cold water, it was just like putting him into a kind of warm bath, it wasn't cooling him down or anything.

CUFFE: And there was no fan, there was nothing you could cool him down with?

BLACK: No, there was no fans or anything like that, not a thing. You didn't have enough power to do anything like that. We got him down the stairs into the ambulance and the medic that was with me at that time, he got a drip into Jason, which was a saline drip, which is cold, so when it goes into the body it cools the body down, and I got told to start to make my way to Camp Abu Naji with him. I think we'd done about a mile or something like that, and all of a sudden he just ripped the drip out and I think he'd started to take a sort of fit or seizure.

CUFFE: In cases of seizure, the standard medical procedure would be to medicate him to calm him down and to give oxygen. Was there anything in the ambulance that the medic could have used to calm him down or did he give him oxygen?

BLACK: No, there was nothing actually in the ambulance. We didn't have any drugs or anything like that. They didn't carry that sort of thing. They had aspirins and things like that. I mean, the only thing we could give somebody with dehydration was a saline drip that was a liquid drip to cool the blood down and get the sugar balance right in his blood, and that was the only thing we could do. There was no oxygen in there, in the ambulance. There was oxygen cylinders but there was nothing there.

CUFFE: Nothing in the cylinders?

BLACK: Well there was a little drop in it, but we couldn't get it onto him because he was just going, you know, it was too late by then. We just couldn't get it into him, nothing.

CUFFE: On arrival at the medical unit at Abu Naji, Jason Smith suffered from cardiac arrest and attempts to resuscitate him failed. A former Captain from the Royal Army Medical Corp, Stewart Murray, was running the unit that day.

MURRAY: After he died, my doctors told me about the incident. It was our first death at that facility for our unit and they told me that they were very concerned that he hadn't received oxygen. This is something that's available before the ambulance arrived – or should have been – and was certainly available on the ambulance, and yet he had not received oxygen. For a collapsed patient of any sort, the immediate response to that, as well as other matters, would be to give him high flow, high rate oxygen, and this hadn't happened. Jason had been ill for some days before the day he died. The record keeping of these meetings seemed to be appalling. So Jason had been ill for some time and it wasn't picked up on. I very strongly feel that if his early onset illness had been spotted and appropriately managed and treated, that he would still be alive today, and I am utterly convinced of that.

CUFFE: In his narrative verdict, the coroner said that the presence of air conditioning may well have been the single most important factor in preventing heat related injuries. This was available at the nearby camp, but not in the stadium – even though Jim Black says the company quartermaster had been asking for it.

BLACK: The CQMS at the time actually had asked for generators and some sort of air conditioning.

CUFFE: And how long had he been asking for this?

BLACK: Oh, for two or three weeks into the tour he'd been requesting this sort of stuff.

CUFFE: But if he asked about two and a half weeks after arriving, that means that by the time Jason died, that request had been in for ...?

BLACK: Three weeks, three or four weeks, maybe even longer.

CUFFE: At the camp they had air conditioning in some of the rooms and generators. Do you think they could have spared you any?

BLACK: Oh aye, I think they could have, aye. Oh yes, there was a big generator sat there doing nothing. I mean, I used to pass it every day, because every time I went into Camp Abu Naji with the ambulance that generator was still there, it was still not attached to anything, and it was just sitting there doing nothing. It was crazy.

CUFFE: And what happened after Jason died?

BLACK: Now I had been away nine days and there was a big generator, there was an air conditioned room, an air conditioned tent. The guys told me that that stuff was there three days after Jason died.

CUFFE: And do you think that was coincidence because it had been on order and it was just lucky that it had arrived then?

BLACK: No, that was there because Jason died, that's all it is. I think it was the shortfall of the army. It should have been there and Jason would be alive today.

CUFFE: We asked the Ministry of Defence about issues arising from the death of Jason Smith. Why, for instance, had the army not supplied air-conditioning in the stadium earlier, despite official requests? In a written statement, the MoD said it was unhelpful to re-examine facts that had been looked at by the coroner. But Catherine Smith doesn't think all the facts have been examined.

CATHERINE SMITH: We got into the inquest and the coroner was sitting and he kept lifting this book up and I kept looking at it, and I said to the lawyer, "There's something wrong somewhere. This is all we've got," - odd pieces of paper had been sent for one thing and another. I said, "But look at his." About three or four times the size of that, in front of him. And so I couldn't hold my tongue, I'm afraid. I stood up and said to him, "Excuse me," I said, "but what you have, we don't have." That was when we discovered there's quite a lot of this missing. It wasn't until we were near enough second last day, we discovered there's two Board of Inquiry reports, so that's missing, his medical notes are missing. The lawyer wrote to the coroner, the coroner kept sending back letters, he cannot release paperwork because of the MoD situation, but he didn't know we didn't have the main file.

CUFFE: So it turned out that the Army had held two Boards of Inquiry. The findings of the first investigation were rejected – this is the report that Mrs Smith found she was missing and her lawyer is now challenging the MoD to produce it. The second inquiry had a narrow remit and concentrated on whether Jason was fit enough to be in Iraq. A video taken out in Iraq shows him to be tall and heavily built, but the report described him as obese. The family's solicitor, Jocelyn Cockburn, is now calling for a judicial review of the inquest, because she thinks there are systemic failings that haven't been addressed.

COCKBURN: We have notified the coroner that we will be taking judicial review proceedings, the aim of which will be for the court to order that a fresh inquest into the death of Jason Smith is held.

CUFFE: But what will a fresh inquest tell you that you don't already know?

COCKBURN: Well, we've found out that there were very serious failings here, but Mrs Smith isn't convinced that the evidence we heard has got to the bottom of the real issue here regarding the treatment of soldiers suffering from heat injuries, and there is a risk, in her mind, that this will reoccur, and therefore this is one of the major reasons she wants to have a fresh inquest, to make sure that the MoD will learn lessons.

CUFFE: This isn't the only case that raises serious questions about the standard of medical care and facilities for treating the injured.

ACTUALITY

CRAW: We're going to try and get a manikin for the mess dress and then he's got his glass case for all his medals for Northern Ireland and Iraq and his medal for looking after President Bush when he was in Northern Ireland.

CUFFE: James Crow's son Andrew was an experienced soldier, a Lance Corporal in the Argyll and Sutherland Highlanders. But he died after his gun discharged on a firing range in Iraq in January 2004. Mr Crow was told it was an unfortunate accident brought about by a momentary lapse of concentration.

CRAW: An ex colonel asked by the Army to go over and do the inquiry told us the facts and the findings and what went on that day in Iraq. And he also told us that Andrew died instantly. Now I went to track down the last man with Andrew, trying to help him survive, and he told me Andrew stayed alive himself for an hour, and he helped him to survive the next forty minutes, he told me, so that was an hour and forty minutes he was with him and he kept him alive. The most important thing was to try and get the truth what happened to Andrew that day and to clear our son's name.

CUFFE: The soldier who tended to Andrew Crow after he was injured was Lance Corporal Paul Smith, who'd had a couple of weeks' first aid training. The account he gives shows that this was not simply the momentary lapse the MoD had described, but the culmination of a hastily prepared exercise and a disregard for safety procedures.

PAUL SMITH: I arrived in theatre at 0300 hours in the morning of the 7th January. Basically we got a couple of hours sleep and by nine o'clock in the morning we were on the firing range. So very quickly after arriving in theatre we were out in the field in Iraq.

CUFFE: Is that normal practice?

PAUL SMITH: Normal practice is you'd usually get about eight hours sleep before going onto any live firing. It's more sensible that way. You wouldn't drive an HGV truck without having eight hours sleep, so it's an unwritten rule, should we say.

CUFFE: And you'd been travelling for how long before then?

PAUL SMITH: We'd been traveling since early hours on the 5th January.

CUFFE: What state would you say that you were all in?

PAUL SMITH: I would say exhausted and drained.

CUFFE: The soldiers were trying out a new weapon that day – the Minimi machine gun. It seems Andrew Craw's gun was jamming and, thinking it wasn't loaded, he tried kicking it. Paul Smith heard the shot.

PAUL SMITH: I found Andrew Craw lying on the ground. He had a wound to his hand and a wound to his head and I started dealing with the casualty at that point. He was semi-conscious, he was reacting to my verbal commands, such as I would ask him to squeeze my hand or move his hand for me, and he would do that. However, he wasn't alert to any sort of pain or couldn't speak. When I asked for the med pack and medic there was a stunned silence, and then a few moments later we were told that none of those things were available.

CUFFE: So there was nothing you could do for his wound?

PAUL SMITH: There was. I carried some what we call first field dressings, which is nothing more than an absorbent bandage, but the initial thing that I would have done at that point would be to put an airway in and to give fluids to bring up the blood pressure and none of these were available to me. I then asked for the helicopter evac to the range conducting officer, who informed me that all three forms of communications that he had were not working.

CUFFE: The officer had to drive to the nearest post where he could call for an air ambulance. It was ninety minutes before the helicopter arrived, but by then it was too late. At the inquest, the coroner highlighted the fact that the soldiers hadn't had the required hours of training before testing a new weapon. The range controlling officer was described as having a cavalier attitude to army procedures. The range did not comply with standing orders because there was no communication and no appropriate medical facilities. The full truth of what happened only came out because Mr Craw tracked down Paul Smith as a witness, but it took three years to have the evidence heard at an inquest.

CRAW: I couldn't believe what I was hearing, and I just kept on being upset after upset and crying after crying, and the things that was done wrong that day was unbelievable, and the things the medic had to work with that day was unbelievable. He had nothing.

CUFFE: And what's it been like for you as a family going through that long process?

CRAW: That three years for the Craw family has been absolutely nightmare, and his mum and I are at the grave twice a day since it happened, and we're still attending the grave twice a day till this day now.

CUFFE: Paul Smith was so traumatized by the experience that he has since had to be medically discharged from the Army.

PAUL SMITH: I was left feeling quite betrayed and let down by own side. I was very very helpless in what I could do for Andrew. There was nothing really above what I was doing – applying direct pressure to the wound and sitting and waiting for an agonising ninety minutes. Words cannot describe the emotions that go through you, from rage to utter helplessness. I should never have been put in that position in the first place. This was a basic range run incompetently. You expect, when you're going out to a place like Iraq, that some people will die due to enemy fire. You don't expect for things like that to happen on a silly training accident without the correct provisions in place.

CUFFE: In a written response, the MoD says conduct on the range was thoroughly investigated by the Board of Inquiry and Royal Military Police, and that it considered the possibility of disciplinary action against certain individuals, but was advised that there was insufficient evidence. These cases highlight concern about the provision and adequacy of medical care. At field hospitals there are teams of trained doctors and nurses, but the army's front-line medical response is provided by soldiers in the medical corp. Stewart Murray, who was at the unit where Jason Smith died, was a former ambulance technician in the NHS. After joining the army Medical Corp as a Captain, he was a manager in a unit with up to two hundred staff.

MURRAY: Almost within the first week of joining and mixing with the soldiers and asking the medical questions, it became apparent to me very soon on that the level of competency was shockingly low, and we were deployed some months later to Iraq, and I simply did not feel my soldiers were up to the job before we went, and having seen them perform and so on in Iraq, then my fears were brought to bear. I very strongly feel it's a failure by the Ministry of Defence to, I was going to say to train its medics. In actual fact I think the training they get is comparable to an NHS ambulance technician's training, and in some ways they even have supplementary skills. However, the difference lies in that an NHS technician/paramedic is doing the job every day. The difference is in the armed forces, once you've done your training you then get very very little/no experience of injuries or illness until you're sent out on operations and expected to react appropriately, by yourself. And when I hear of a soldier dying in Iraq or Afghanistan, my immediate thought is, I wonder had there been a more competent medical person in the vicinity, would that soldier still be alive today.

CUFFE: Captain Murray has since been medically discharged from the army. In its written statement, the MoD insists its medical support is of an excellent standard and says:

READER IN STUDIO: We recognise the importance of providing effective medical and health support to our people and continue to invest in clinical improvements. The Defence Medical Service has shortfalls in a small number of specialist areas, but we are taking action to address these where necessary. There is no question of British Forces deploying on operations without the appropriate medical support.

CUFFE: As we've already heard, the one thing families really need is information about the way their loved ones died, but this can only be done through a full inquest - and here they run into major problems.

ACTUALITY IN OXFORD

CUFFE: Because the bodies of soldiers are flown back from Iraq and Afghanistan to Brize Norton in Oxfordshire, responsibility for inquests falls to the Oxford coroner. This court, which was once the old Assizes building, has been overwhelmed by the volume of cases. It reached such crisis point at the end of last year that the Government had to send in more staff to deal with the backlog, but even so, some families have had to wait three years for a hearing. And if they don't get legal aid and can't afford a lawyer, they may find the whole inquest is over and done with in a couple of hours.

Jocelyn Cockburn, who represented both the Craw family and the mother of Jason Smith, says they have fewer rights than people whose family members have died in prison or police custody.

COCKBURN: I represent families in custody deaths, in police custody or prison custody, and their experience is very different to the experience of these military families. What happened in about 1999 was the police and prison service came forward with voluntary disclosure, so for quite a long time now we haven't had any difficulty in getting hold of documents. This doesn't happen in the military cases. There is a real feeling that the family have been excluded and really have to fight to find out

COCKBURN cont: what happened to their loved one. And on the scope of the inquest, it should be similar to a custody death. The coroner should be required to look at the wider questions of whether there were failings, you know, not just specifically relating to the death, but whether lessons can be learnt to prevent other fatalities.

SUE SMITH: My son was a soldier for three years, he was my son for twenty-one, and I think we have got the rights as parents to know. It's no wonder people don't trust the MoD, because you can't get anything out of them, and I am sick to death of being fobbed off and basically treated with contempt, as if I'm an idiot. I'm not an idiot.

CUFFE: Today Sue Smith heard a coroner rule that her son had been unlawfully killed. Twenty-one year old Phillip Hewett, a private in the first battalion of the Staffordshire Regiment, was patrolling with Second Lieutenant Richard Shearer and Private Leon Spicer when they were killed by a roadside bomb in July 2005. Mrs Smith was told that her son was killed while driving the lead vehicle on a night time patrol in Al Almarah. The rest she's had to piece together for herself.

SUE SMITH: Finding out his injuries, eventually after about ten months of asking and nobody had told me, I actually wrote for the post mortem results and I had to read the post mortem results to find out how my son was killed, because nobody will tell you. They just don't want to know. It's awful.

CUFFE: So you'd asked those questions of the MoD, but they hadn't given you the answers?

SUE SMITH: No, they sent me a three page report in which they said Phillip had a neck injury, which caused him difficulty breathing. I work in care, so I thought, well why didn't they give him a tracheotomy or something? Surely they could have done something for him. I asked the question again and I still didn't get a satisfactory answer, so then I wrote to the coroner and got the post mortem results, and I actually found out from that that shrapnel had actually severed Phillip's jugular vein. So Phillip had actually lay at the side and bled to death, which I shouldn't have to read, but nobody would tell us the truth.

CUFFE: Some people might think, well it's better for the families not to know that kind of detail.

SUE SMITH: But shouldn't that be there for the family's choice? I need to know for closure for myself, to know that my son wasn't screaming out in agony and shouting for me. I need to know that, because I need to know that as a mother.

CUFFE: The short record of events presented to Sue Smith reveals that, at the time of Phillip's death, the Staffordshires were under substantial threat from Iraqi mortar and rocket attacks. They weren't patrolling in armoured tanks or Warriors, but in Snatch Land Rovers, soft-skinned vehicles that have been widely criticized as unsuitable for a situation like the one in Iraq. The army's explanation is that Warriors are recognised as antagonizing the local population. It has since sent new armoured vehicles to Iraq. In preparation for the inquest, John MacKenzie, who represents Phillip Hewett's family, has had to put pressure on the MoD to get documents such as witness statements.

MACKENZIE: This is the bundle of statements that the MoD prepared. The coroner has an unblocked out copy, we've been given this one, with every single name removed.

CUFFE: It doesn't make for easy reading presumably.

MACKENZIE: It doesn't. You're trying to work out the narrative. There's no rationale behind it. We're going to see the names eventually. It's just insulting and upsetting for the families to see that there is absolutely no trust on the part of the Ministry of Defence. These are the relations of serving soldiers who were killed in the line of duty. You cannot be trusted to see the original statements, we're going to delete them.

CUFFE: The MoD says that the documentation that's provided to families is redacted in line with MoD policy and the law. John MacKenzie thinks there may be another reason for their unwillingness to disclose information.

MACKENZIE: These soldiers are required to carry out patrolling routines in dangerous conditions, and the absolute basic is to provide them with a properly armoured patrol vehicle in which they may be reasonably safe. This is an area that they are very very sensitive about. They don't want it in the public domain that the equipment provided to troops is so inadequate that they cannot safely carry out their role. But as a feature, an additional feature to that, that I think they are even more sensitive about, when you get an incident like this, where three soldiers are killed and two severely injured, because of the inadequacy of the patrol vehicles that a particular unit has to use, the morale of that entire unit nosedives, and it is with the regiment for years to come.

CUFFE: Then surely the MoD is justified in withholding information?

MACKENZIE: That's one solution – don't tell anybody. The other solution, of course, is to provide proper equipment.

CUFFE: Phillip Hewett's mother, Sue Smith, was once proud to be part of the wider military family, but the moment he died, she felt excluded. There was one incident in particular which set the tone for what was to come.

SUE SMITH: We waited for Phillip's possessions to arrive. When they did arrive, there was half a box of stuff. My son had been in the army three years, and I had nothing returned because it had all been either stolen or misplaced. The only stuff that I had returned to me was the stuff from Iraq. The stuff from the barracks had been left in bedrooms unlocked, unsecured, and so that stuff was taken. As soon as they said he was dead, I said, "I want his St Christopher back, that's all I want," and that was gone. A lot of the lads have left letters. I'll never know if there was a letter, because I never got the stuff, and that does hurt, because I can't see him not having left something for me. He may not have, but I'll never know.

CUFFE: I suppose that was just a terribly unfortunate incident. What do you think the MoD could have done to prevent that happening?

SUE SMITH: Well it's not just an unfortunate incident, because most parents don't get all the stuff back. There's always stuff missing. This is happening all the time.

CUFFE: The Military Covenant promises Britain's armed forces a duty of care in return for them risking their lives for their country. But after hearing File on 4's evidence, Shadow Defence Secretary, Liam Fox, says he believes it's a one-sided bargain.

FOX: There are too many failures on the Government's side of the bargain, and the bottom line is that not only is there a duty of care, but in order to recruit and retain our armed forces, they and their families have to be dealt with in a way that they find acceptable in our contemporary society. And when they don't feel that, they leave. And in the last two years we've had more people leaving the army than joining. In the long run that is unsustainable, and the Government had better get a grip on it before matters get any worse.

CUFFE: Isn't it unrealistic to expect everything to go smoothly and all procedures and protocols to be followed in a situation like the one we're facing in Iraq and Afghanistan?

FOX: Well, I think it's unrealistic to expect there to be no casualties in a war situation, but I think it's reasonable to expect that those who are in charge of our servicemen and women do what they can to minimise the risk, and that means that they've got the appropriate equipment, it means that they've got armoured vehicles that will sufficiently protect them from the kind of risks that they face. It means that if they are injured there are sufficient resources to make sure that they can be extracted from the battlefield and get to military facilities as quickly as possible. All these things need to be in place because they are all about minimising the risk to our troops, which is inherent in the Government's duty of care.

CUFFE: File on 4 wanted to talk a senior member of the Armed Forces or a Government minister about the families' concerns, and we gave a list of questions we felt should be asked. But the Ministry of Defence wanted to impose conditions restricting the editing of their interview, conditions we felt unable to accept. So instead of an interview, they gave this written statement:

READER IN STUDIO: The MoD goes to great lengths to support the families of those who have been killed on operations: this includes the appointment of a dedicated family liaison officer, as well as help with travel and subsistence at inquests. As you would expect, while the primary focus is on their immediate and nominated next of kin, every effort is made to ensure that the rest of their family receive support and are kept fully informed of all relevant developments.

CUFFE: But that's exactly what families say isn't happening. And it's not just those who've taken part in this programme. We've spoken to a number of organisations representing the armed forces and military families, who all tell us that the lack of information and trust is a major source of grievance. They speak of a sense of betrayal.

SIGNATURE TUNE