Advances in Social Sciences Research Journal - Vol.1, No.7

Publication Date: November 27, 2014

DOI:10.14738/assrj.17.535

Abiodun, A. J. (2014). Consequences of Violent Conflicts on the Health Sector in Nigeria: A Critical Appraisal. Advances in Social

Sciences Research Journal, 1(7), 109-114



Consequences of Violent Conflicts on the Health Sector in Nigeria: A Critical Appraisal

Abiodun, J. Oluwabamide

Department of Sociology, Ahmadu Bello University Zaria, Kaduna State, Nigeria

ABSTRACT

Because the consequences of violent conflicts are usually enormous, no nation can encourage them. They range from loss of human lives, destruction of properties. to population displacement. Any time a society experiences violent conflicts, it faces a great challenge, which would in turn create multiple challenges to key institutions and/or sectors within it such as health, security, economy etc. In Nigeria, a country where conflicts are endemic, year in year out, it witnesses one form of violent conflict or the other with serious consequences on human lives. This has increasingly brought more serious emergencies to the health sector, which is indeed, one of the first and/or immediate bearers of the burdens of conflicts in any society. This paper therefore, examines the role of the health sector in managing the consequences of conflicts in Nigeria. It appraises the sector in view of the increasing challenges facing it. It is recommended that the health sector in Nigeria should be practically overhauled with a view to making it ever ready for emergencies of any magnitude.

Keywords: Enormous, health care, violence, consequences, the government

INTRODUCTION

Since her independence in 1960, Nigeria has witnessed many violent conflicts which have impacted negatively not only on the country's unity but also its development. It may be said that there was hardly a year in which the government did not have one conflict or the other to grapple with. The conflicts are mostly violent in nature.

Though conflicts are inevitable in Nigeria because of its plural or heterogeneous nature, but it should not be allowed to consume the nation. The country, which is made up of diversities of cultures and ethnic nationalities have suffered serious setbacks emanating from violent conflicts, which arisen from misunderstandings among its peoples or among its constituent parts. The situation has often been such that as the government tries to deal with the consequences of a conflict in one part of the country another one has already began in some other parts.

Nigeria has recorded quite a large number of violent conflicts ranging from communal, political, to religious conflicts consequences of which have been seriously devastating to the country. In every conflict, people are either wounded or killed, properties are destroyed and people are displaced. Furthermore, each time conflict occurs it affects the stability not only of the people or communities concerned but also that of the entire country. Worst still, it slows down development and makes governance a difficult task.

However, in recent times, conflicts have not only increased in Nigeria but have also become increasingly violent. This is because increasingly, live ammunitions, explosives and/or bombs are now used. This has made death tolls and number of persons wounded in every incidence of violence to be very high. Obviously, the immediate consequences of violent conflicts are becoming too cumbersome to manage. This state of affairs has indeed, created serious challenges to the health care sector which manages the wounded victims of violent conflicts as well as the corpses of those killed. This paper therefore, examines the role played by the health sector in managing the consequences of conflicts in Nigeria in view of the additional challenges that incessant emergencies from violent conflicts have posed to it.

RECORD OF CONFLICTS IN NIGERIA

Within the fifty four (54) years of her independence, Nigeria has experienced many violent conflicts. It is necessary at this juncture to identify some of them. This shall be done by dividing them into two: distant past and recent past. Some of the major conflicts that occurred in Nigeria in some distant past include ethnic and religious conflicts in Kano, the Tiv-Jukun communal conflict, the Zango Kataf conflict, the Ife-Modakeke conflict, the Niger Delta conflict etc

In Kano, a major city in northern Nigeria, both inter and intra-religious conflicts have been recorded. Intra-religious conflicts include the 'Maitatsine's riot of 1980, the Shite attacks of 1996 an 1997 [1]. The inter-religious conflicts on the other hand, include the 1982 Faggo violence, Reihard Bonke riot of 1991, the Akaluka incident of 1994, the Osama Bin Ladin riots in protest of U.S. attack on Afghanistan of 2001 [2,3,4]. The Tiv and Jukun communities in Taraba state (northern Nigeria) were involved in a prolonged dispute over land, traditional rulership, political authority and fear of domination and marginalization [5]. The conflict which began in 1990 persisted for more than two years.

The Zango Kataf conflict was a riot, which occurred in Zango Kataf area of Kaduna state in (northern Nigeria) 1992. The riot broke out as a result of an order given by the Local Government Council to relocate a market [6]. It was an attempt to carry out out order that sparked off the riots. On its part, the Ife-Modakeke conflict was an intra-ethnic (Yoruba of southern Nigeria) conflict. The conflict persisted for more than one century [1]. While the Ifes sought to drive the Modakekes away from what they (Ifes) claimed as their land, the Modakekes regarded where they are as their ancestral home.

Furthermore, the Niger Delta region of Nigeria witnessed several conflicts which were perpetuated by the youths or youth vigilante groups in the area [7,8]. The conflict emanated from the injustices of succeeding governments in Nigeria to the people of the oil rich Niger Delta region. Youths, women, children and elders from the region frequently protested against government's injustices against them. Youth agitations later transformed into armed groups [9]. Armed militia groups which according to Ejibunu, [9] became prominent after 2003 transformed the Niger Delta agitation to a very violent one with the use of live ammunitions, explosives and/or bombs.

It is pertinent to note that all the above mentioned conflicts were very violent and the consequences of each of them were very enormous as a large number of people died. Nevertheless, despite the devastating effect of these conflicts, successive governments were able to manage them and their consequences on the nation.

The recent past conflicts on the other hand, are those ones that are still fresh in the memories of Nigerians because they are very recent. They are much more devastating and involved the regular use of live ammunitions, explosives and bombs. The terror and carnage of the Jos crises is very high. In the city of Jos (northern Nigeria), thousands of people have been killed in repeated incidents of violence in 2001, 2004, 2008, 2010, 2011 even up to date. For example in December, 2010, dozens of people were killed in gun and machete attacks in and around Jos during an outbreak of communal violence. The violence was a follow-up to the detonation of at least three bombs in Jos on 24th December, 2010 which killed more than 80 people [10]. Prior to this incidence there had been many sectarian violence in the city which took the lives of

hundreds of people [11]. The killings in Jos is still re-occurring; some incidences have been reported in the dailies in 2014 [12, 13]. The causes of this conflict are not quite clear. However, they are believed to range from ethnic, religious to political factors [11].

There are other recent conflicts. The Wukari sectarian violence of July, 2010 and years following it [14, 15]. Though this violence cannot be compared to the terribly devastating and prolonged Jos violence, it was a recent occurrence. However, there are still other terrifying (violent) conflicts in recent times in Nigeria. This is also the incidence of a feud between the Tiv community and Fulani cattle rearers in Yelvata Guma Local Government Area of Benue State [16]. Another recent violent conflict was the post-election violence of April 2011. The violence which cuts across a number of states in Northern Nigeria was devastating. The impact of the violence was very enormous. Still, another recent conflict is the conflict between cattle rearers and farmers in two communities in Nasarawa State [17].

However, the most worrisome dimension of violent conflicts in Nigeria is the incessant bombing in various communities especially in the northern part of the country. Virtually all the incidences of bombing in Nigeria are associated with the Islamic sect, Boko Haram. Since 2009 to till more than one thousand people have been killed by members of the sect [10, 18, 19,20,21].

THE CONSEQUENCES

The consequences of virtually all the violent conflicts discussed above have been very enormous. In all the conflicts, very large number of lives were lost. Put together, hundreds of thousands of lives were lost. However, it should be noted that while some died instantly during each violence, others died later in hospitals/clinics.

Another consequence of the conflicts is the destruction of properties. Properties worth several billions of Naira have been destroyed in multiples of violent conflicts that have occurred in Nigeria. In most of the conflicts, houses were burnt, public utilities and/or social amenities were destroyed.

Furthermore, the conflicts have brought about population displacement. Usually, to avoid being killed during violence many people left their homes and sought for refuge elsewhere [21]. Some sought for refuge in neighbouring communities within the same state or other states within the country. Many Nigerians have abandoned their ancestral homes as a result of communal conflicts.

MANAGING THE CONSEQUENCES: THE ROLE OF THE HEALTH SECTOR

The most urgent and significant response to violent conflicts and their consequences are quelling the violence, preventing the wounded or critically injured victims from dying and providing pressing relief materials for persons displaced. All these involve the activities of the security agencies, the health sector and relief agencies respectively. However, in this paper, the focus is on the health sector. Therefore, the role of the health sector in managing the consequences of violent conflicts in Nigeria shall be discussed in this section.

In virtually all the violent conflicts discussed in the preceding sections, the health sector of the country played a very significant role. In each of the violence, human beings were either injured or killed. The Security agents drafted to the location of each violence to quell it, usually collaborated with relief agents to, as a matter of urgency took all wounded persons to the nearest safe hospital or clinic for immediate attention. Also, corpses of those killed were deposited in mortuaries which are part of health facilities in hospitals.

For example, injured victims of all incidents of bomb blasts in different parts of Nigeria were urgently taken to nearby hospitals. Thus, with respect to the bomb blasts at the Headquarters of the Nigeria Police Force on June 16, 2011, Daily Trust [18] reports as follows:

Doctors battled to save the lives of eleven people who were rushed to three hospitals following the explosions which wreaked havoc at the headquarters of the Nigeria Police Force in Nigeria yesterday. ... At the National Hospital, Asokoro General Hospital and Garki General Hospital, victims who sustained various degrees of injuries were in stable condition, according to doctors. ^{p6}.

From the Newspaper report quoted above, the important role of the health sector in managing the immediate consequences of violence in Nigeria is quite obvious. The phrase "doctors battle to save the live of" is an indicator that health care providers are often engaged in serious emergency tasks when injured victims of violent conflicts are brought to the hospitals. Both health care providers and health facilities are utilized in such situations. This implies that the health sector plays a very significant role through its personnel and facilities close to scenes of violence.

In most of the communal conflicts which occurred in the rural areas available health care providers and facilities are always overstretched. These are areas where facilities are already not adequate for the people. In most cases, health care personnel in rural clinics tried the little they could with the limited facilities at their disposal and while sometimes they succeeded at other times they did not.

It should be noted that health personnel sometimes endanger their own lives when they attend to victims of violence. Perpetrators of the violence could come to the hospitals or clinics where victims are being cared for to attack them. Despite such risks, health personnel still go ahead to save the lives of victims of violent conflicts. This also shows how critical the role of the health sector is, in managing the immediate consequences of violent conflicts.

CHALLENGES FACING THE HEALTH SECTOR

Despite the vital role of the health sector in managing the consequences of violent conflicts in Nigeria, it faces some challenges. While some of the challenges are age-long, some have emerged only recently as a result of incessant cases of violence and bombings in the country. The latter is regarded here as recent because it has created extra burdens for the health care sector in Nigeria other than its traditional one. What then are the challenges facing the health sector in Nigeria?

Firstly, lack of funds. In Nigeria, the burden of health care financing is carried by the government alone. Though at times the government is assisted by some international organizations and donor countries in financing specified health care programmes, still the funds available to the sector are grossly inadequate. Government bears the burden of constructing hospitals, recruiting staff and the providing the necessary infrastructures.

Secondly, inadequate human resources. It has been observed that people are the most important resources of any country. That notwithstanding, in Nigeria, health care personnel are still inadequate. Though over the years the government has increased the number of institutions where health workers are being trained still health personnel are inadequate considering the very high rate of population increase in the country. In addition, Nigeria still looses a number of health professionals to brain drain. That is, quite a number of doctors and nurses have left the shores of the country to search for greener pasture in other countries. This trend has not stopped.

Thirdly, in Nigeria health facilities are inadequate. Hospitals and clinics are very few compared to the population of the country. Worst still, the distribution of health facilities is lopsided. Most of the available health facilities are located in the urban centers rather than the rural areas where more than 60% of the population live [22, 23].

Fourthly, in Nigeria, the cost of healthcare is still high. Drugs, laboratory tests and medical procedures are generally out of reach of the majority of the population, whether rural or urban. Most of the rural people are poor, hence, they cannot afford the charges of the available illequipped health centres around them. Most of the persons injured during violent conflicts cannot afford health care charges. Thus, newspapers have reported that victims of bomb blast cried for help [24].

Fifthly, the menace of corruption. Though the health sector needs more funds, the money allocated to it are sometimes diverted into personal pockets. Thus, Oluwabamide and Akpan (25) have observed as follows:

Among all the factors inhibiting the success of Nigeria's health care system, corruption is the most critical Frankly speaking, the nation's successive health care policies are no doubt, good but poor implementation has been the problem. - - - large scale corruption occurs mostly at the implementation level. P. 35

Every year, huge sums of money are allocated by the government for the provision of health facilities throughout the country. Nevertheless health facilities are still quite inadequate especially in the rural areas. Primary Health Care centres which are expected to be within the reach of the rural people are absent in a good number of rural communities. Meanwhile, funds are said to have been released at various times, for the provision of these minimal health facilities in all rural communities, but there are no such facilities in most of the communities to show that the funds are used. Even in those rural communities where primary health care centres are provided, other basic health care facilities such as drugs are absent.

CONCLUSION

It is no gainsaying that ordinarily health issues take the pride of place in the agenda of virtually all the nations of the world. This is because health is an important precondition for development. In fact, health is one of the indices for measuring a society's level of development. Furthermore, the health sector sustains human life, a function which lays credence to its significance in every human society.

It is pertinent to note that for some time Nigeria's health sector has not been performing well. Despite a wide range of efforts being geared towards health care delivery, the sector still performs below expectation. Hospitals and clinics are inadequate. Worst still, the available ones are in poor conditions, especially the few ones in the rural areas where majority of the people live. Drugs are not available in most hospitals and clinics except the few elitist ones in the urban areas. A number of patients who would have been saved, died in hospitals due to lack of drugs and other relevant facilities or their inability to afford the cost of treatment. Thus, the question arises; should this situation continue? The answer is no. The health sector cannot continue to be in shambles considering additional challenges it needs to face in this modern times. The challenges of increasing number of incurable diseases such as HIV/AIDS and most recently, Ebola and the increasing rate of emergencies such as very high number of victims of violent conflicts and bomb blasts, calls for serious concern.

The government should seriously overhaul the health sector for better performance. Funds meant for specific health care delivery projects should be strictly monitored to ensure that they are properly spent. Like other segments of the society, the war against corruption should be pursued vigorously in the health sector. Furthermore, the government should practically partner with the private sector in health care delivery. Lastly, the government should make it mandatory for owners of big business enterprises in the country to pay specific amount of money into an account that would be meant for managing emergencies in hospitals.

References

Albert, I.O. Ethnic and Religious Conflicts in Kano In. O. Otite and I.O. (Eds.) *Community conflicts in Nigeria: management, resolution and transformation.* Ibadan, Nigeria. Spectrum Books, p.142-183.

The Guardian, 6th October, 2001, p.1 and 2.

Newswatch, 29th October, 2001, p.36-44.

Alubo, O, *Nigeria's ethnic conflict and citizenship crises in the central region*, 2008, Ibadan, Nigeria. Department of Political Science University of Ibadan.

Best, G.G, E.A. Idyorough, and Z.S Shehu, Communal conflicts and possibilities of conflict resolution in Nigeria: A case study of Tiv-Jukun conflicts in Wukari Local Government Area, Taraba State In. Otite. O. and I.O. Albert (Eds). *Community Conflict in Nigeria: Management, Resolution and Transformation*. 1999 Ibadan, Nigeria: Spectrum Books.p.82-177.

Akinyele, A., J.A.AWuyep, and M.N.A. Shafia, Zango Kataf Crisis: A case study". In Otite O. and I.O. Albert (Eds.) *Community conflicts in Nigeria: management, resolution and transformation*. Ibadan, Nigeria: Spectrum Books, 1999 p.222-246.

Akpan, N.S, *Conflicts in Nigeria's Niger Delta: Issues and response and management'* Journal of Educational Research and Development. 2005 3(2):59-64.

Oluwabamide, A.J, Managing the consequences of communal conflicts in Nigeria, In Modo, I.V.O, A.J. Oluwabamide, O. Akpan and A. Ekpa (Eds) *Issues in peace and conflict resolution in Nigeria*. Lagos: Lisjohnson Resources Publishers, 2006, p.145-166.

Ejibunu, H.T. (2007). Nigeria's Niger Delta crises: Root causes of peacelessness (http://www.aspr.ac.at/epu/rsearch/rp_0707.pdf (2007)

ECN: Commercial conflicts in Nigeria, www.eyesonnigeria.org/EON/conflict.html.

Daily Trust. Many Killed in Jos Violence, January 18, 2010a p.1

Daily Sun. Ten more killed as gunmen attack plateau village, Thursday March 6, 2014 p.3

Daily Sun. Eleven killed as gunmen attack two communities, Tuesday July 15, 2014 p.5

Daily Trust. Four Killed in Taraba Sectarian Violence, Wednesday, July 14, 2010b. p.2

The Punch. Gunmen kill 20 in fresh Taraba clash, Monday September 15, 2014 p.

Daily Trust, 9 Killed as Tiv, Fulani Clash, Thursday, May 26, 2011a. p.1

Daily Trust. Seven Killed in Nasarawa Herder-Farmer Clash Monday, June 20, 2011b, p.2

Daily Trust, Scores Killed in Force Hqtrs Blasts Friday June 17, 2011c, p.1

Daily Sun. Terrorists kill 21 in Bauchi, Borno attacks, Wednesday July 2, 2014 p.5

The Nation. Kaduna death toll hits 110 as bomber strikes in Kano

Oluwabamide, A.J. and P.A, Essoh, *Leadership and conflict prevention in Nigeria: An appraisal.* National Association for Science, Humanities and Education research Journal, 2010, Vol. 8(3):13-17.

Kyari, F. Population growth and health needs: A case study of Plateau State In. National Population Commission (Ed). *Data Needs for Sustainable Development in the 21st Century*. Abuja. National Population Commission, 2003, p.123-133

Oluwabamide, A.J., health sector and the transformation agenda of the federal government in Nigeria. Meditaranean journal of social sciences vol.5 (10) p.530-586.

The Nation, please don't let me die: blast victim seeks overseas treatment, Friday July 25, September 2014. P.

Oluwabamide, A.J. and N.S, Akpan, *Corruption and the underdevelopment of Nigeria: The case of rural health care delivery* International Bi-Lingual Journal of Anti-Corruption, Law, Humanities, Social Sciences and Development Studies, 2010. Vol. (1): 133-137