

NIGERIA: CHOLERA AND COMMUNAL CONFLICT

25 June, 1999

Information Bulletin N° 01

The Situation

Between April 2nd and today, Nigeria has experienced three armed communal clashes, the latest and most violent one in the oil rich Niger delta. More than 300 people were killed, more than 24,000 have lost their homes and now live as internally displaced in public places made available by the authorities.

During the same period, cholera has struck in 7 states of Northern Nigeria. Between March and May, a total of 2,976 cases were reported with a mortality rate of 23,90%. Since the beginning of June, local health officials have reported 60 deaths, 20 of which occurred in the last week.

Communal clashes:

In the state of Anambra violence broke out on April 2nd and continues up to today. 8,000 persons have been displaced. The economic activities in the area of conflict have come to a complete standstill, markets have been closed down and most of the people, predominantly farmers, are unable to return to their farms as movement of people is severely restricted. Schools and other government establishments have been shut down, many people have been killed while many others injured and hospitalised. Following these events, the Federation launched an Information Bulletin on May 19th, 1999.

On May 15th, more armed clashes broke out between three ethnic groups (Ijaw, Urhobo and Itsekiris) in the Niger delta. They reached their peak in early June and continued till June 13th. According to the UN-information service IRIN, more than 200 people were killed, over 15,780 persons lost their homes, their belongings and were displaced. Over 3,000 persons had to be evacuated by plane. A state of emergency was declared in Warri and the surrounding villages, schools and government establishments were closed and economic life came to a complete standstill.

On May 22nd till May 27th, communal clashes disrupted the life in Kafanchan, rendering more than 2,000 people vulnerable.

Cholera:

An outbreak of cholera was confirmed by the Ministry of Health in Kano, Lagos, Kwara and Edo State on May 10th. The disease has since spread to Borno, Katsina and Kaduna states. During May, the Ministry of Health drew up a plan of action in co-operation with WHO, UNICEF, the Nigeria Red Cross Society (NRCS) and MSF.

Both cholera and communal clashes are fully considered in the Federation's 1999 Emergency Appeal for Nigeria (Appeal 01.06/99) under the Health and Disaster Preparedness and Planning (DPP) Sectors. While the Health component is 80% funded, the DPP component has received only 10% of the anticipated support. The Federation will immediately release CHF 50,000 from the Disaster Response and Emergency Fund (DREF) to initiate further relief and assistance action.

Cross/Red Crescent Action

Communal clashes:

Following the April 2nd clashes, Anambra State branch of the NRCS, with the support of the government security forces, has been assisting the victims of the communal conflict with First Aid, evacuation to hospitals in safe areas, psychological support and assessment of the impact of the conflict. NRCS has distributed 20 bales of used clothes out of their emergency stock, donated by Swedish Red Cross, to 2,971 most vulnerable victims. The ICRC Regional Delegation in Lagos has provided dressing material, 1,000 blankets, 25 plastic sheets, 200 jerry cans, 200 cooking pots and 1,000 plates, cups and spoons. The ICRC has promised more non-food items. Assisted by CHF 60'000 released by the Federation from the DREF on the 19th May, the NRCS is providing soap and baby food as well as 12 kg of rice, 2 kg of beans and 1 kg of vegetable oil per person for a month. First Aid, psychological support, and regular visits to the victims in the hospitals will continue.

Further to the more recent clashes which occurred in May and June in the Oil Delta region, more than 120 NRCS volunteers from 5 Divisions (namely, Warri, Okpe, Udu, Uvwe and Ughelli) are involved in providing assistance to the displaced and injured victims of the communal clashes, including First Aid to the injured victims, transporting the sick and the wounded to hospitals, and supporting the medical personnel. Chevron Nigeria Ltd., Shell and NNPC have lent support in the form of air evacuations, and as a result the NRCS has been involved in the evacuation of more than 3,000 displaced people, mainly women, children and elderly persons, from the affected areas to safer places. ICRC provided 5 boxes of dressing material to NRCS for the First Aid Squads. 20 bales of used clothes, provided by Swedish RC were also distributed to the displaced persons.

Cholera outbreak

Responding to the cholera outbreak, the government (assisted by MSF, UNICEF and NRCS) established 5 treatment centres in Kano. In addition, an outbreak of measles in Kano, Borno and Katsina States has further limited the hospitals' capacity to provide treatment for the cholera patients. All agencies as well as the governmental authorities admit that the present facilities and capacities cannot cope adequately with the cholera outbreak.

The NRCS is involved in surveillance, tracing of patients, transport to treatment centres, chlorinating water sources, and assisting the hospital staff. The National Health Officer and Federation Health Delegate have visited Kano and Borno State. The National Society also distributed 7,000 packets of ORS to the affected States.

Assessment of Needs

NRCS staff from Headquarters, especially the National Officer for Training and Disaster Preparedness, joined the NRCS branches in all the affected areas to assess the needs and to provide initial assistance for the most vulnerable. The government and MSF provided additional information concerning the cholera outbreak. A more in-depth Situation Report will be issued in the next few days once information is gathered and confirmed, clearly indicating the most recent development as well as the outstanding needs.

Immediate Needs w

Communal clashes:

In the Oil Delta, the NRCS is planning to provide initial assistance to some 5,640 displaced and vulnerable victims with non-food items and food aid. While the ICRC immediately provided 2,000 blankets, 500 mats, 1,760 pots, 1760 jerry cans, 2,000 pieces of soap and 2,000 sets of spoons, cups and plates, NRCS urgently requires funding to procure a further 3,640 blankets, 5,140 mats, 1,756 jerry cans, 3,640 plastic plates, cups and spoons, 2,256 cooking pots, 3,640 pieces of soap, 203.4 MT of rice, 33.84 MT of beans, 516.92 MT of vegetable oil, and 1200 tins of baby milk. The NRCS will also conduct health education campaigns amongst the displaced population in order to avoid an increase in diarrhoea and malaria.

Cholera:

The NRCS plans to continue support to the government's treatment centres, initiate a campaign for control and prevention of cholera as well as health education in a total of 17 targeted Local Government Areas (LGAs) in the states of Lagos, Kano, Borno, Katsina, Edo and Kaduna. Medical material will be given to the medical personnel in identified hospitals, which deal with cholera cases, house-to-house awareness campaigns, and the establishment of 10 school units per LGA are planned for health education. Further needs will be specified and detailed in the upcoming Situation Report.

Conclusion

Since 1995, Nigeria has experienced more than 11 incidences of internal violence, affecting more than 202,500 victims. During the same time, health epidemic mitigation operations reached more than 2 million people in need. With the assistance channelled through the Tripartite project, the NRCS has concentrated for the last 18 months on improving their response capacities in all types of disasters: floods, explosions, epidemics and communal clashes. The capacity building in these areas was exactly what the 1999 Emergency Appeal for Nigeria was intended to address, and the National Society would be in a much stronger position to respond to the current situation if the required funding was made available. As it now stands, the NRCS's First Aid and Emergency Response Squads have proved to be an efficient tool for timely intervention in times of crisis. Branches and HQ have developed capacities for needs assessment, planning, reporting, co-ordination and quick intervention.

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summary

The Disasters

Communal clashes:

In the state of Anambra violence broke out on April 2nd and continue up to today. 8,000 persons have been displaced. The economic activities in the area of conflict have come to a complete standstill, markets have been closed down and most of the people, who are predominantly farmers, are unable to go to their farms as movement of people is severely restricted. Schools and other government establishments have been shut down, many people have been killed while many are injured and hospitalised. The Federation launched an Information Bulletin on May 19th, 1999.

Starting on May 15th, armed clashes between three ethnic groups (Ijaw, Urhobo and Itsekiris) in the Niger delta reached their peak in early June, and continued till June 13th. According to the UN-information service IRIN, more than 200 people were killed, over 15,780 persons lost their homes, their belongings and were displaced. Over 3,000 persons had to be evacuated by plane. A state of emergency was declared in Warri and the surrounding villages, schools and government establishments were closed and economic life came to a complete standstill.

On May 22nd till May 27th, communal clashes disrupted the life in Kafanchan, rendering more than 2,000 people vulnerable.

Cholera:

An outbreak of cholera has been confirmed by the Ministry of Health in Kano, Lagos, Kwara and Edo State on May 10th. A spreading of the disease to Borno, Katsina and Kaduna states has been confirmed. Between March and May, 2,976 cases have been recorded with a mortality rate of 23,896%. During May, the Ministry of Health drew up a plan of action in co-operation with WHO, UNICEF, the Nigeria Red Cross Society (NRCS), and MSF.

The Response so far

Government Action w

Communal clashes:

Anambra State: The government provides shelter to the displaced persons and maintain law and order.

Oil Delta: The government declared a state of emergency in Warri and surrounding villages, soldiers and policemen are patrolling the streets. All schools and government establishments have closed down. A 20-hour curfew had been imposed on the affected areas but is likely to be reduced to 12 hours as soon as the security situation improves. The new President, Mr. Obasanjo, went last week to Warri to broker a peace accord. Shelter for the displaced persons in public buildings is organised by the government. The authorities provide permits for NRCS volunteers, thus facilitating their assistance to the victims.

Cholera: Assisted by MSF, UNICEF and NRCS, the government established 5 treatment centres in Kano. An outbreak of measles in Kano, Borno and Katsina States limits the hospitals' capacities to take on the cholera patients. All agencies, including the government authorities admit, that the present facilities and capacities cannot cope adequately with the cholera outbreak.

Red Cross/Red Crescent Action w

Communal clashes:

Anambra state: The Anambra State branch of Nigeria Red Cross Society (NRCS) with the support of the government security forces has been assisting the victims of the communal conflict in the area of First Aid, evacuation to hospitals in safe areas, psychological support and assessment of the impact of the conflict. NRCS has distributed 20 bales of used clothes out of their emergency stock, donated by

Swedish RC, to 2,971 most vulnerable victims. The ICRC Regional Delegation in Lagos has provided dressing material, 1,000 blankets, 25 plastic sheets, 200 jerry cans, 200 cooking pots and 1,000 plates, cups and spoons. The ICRC has promised more non-food items. NRCS is providing soap and baby food as well as 12 kg of rice, 2 kg of beans and 1 kg of vegetable oil per person for a month. First Aid, psychological support and regular visits to the victims in the hospitals will continue.

Oil Delta: More than 120 NRCS volunteers from 5 Divisions namely, Warri, Okpe, Udu, Uvwe and Ughelli are involved in the assistance to the displaced and injured victims of the communal clashes. They are providing First Aid to the injured victims, transferring the the sick and the wounded to hospitals, where they also assist the medical personnel. In collaboration with Chevron Nigeria Ltd., Shell and NNPC, which provided aeroplanes, NRCS has been involved in the evacuation of more than 3,000 displaced people, mainly women, children and elderly persons, from the affected areas to safer places. ICRC provided 5 boxes of dressing material to NRCS for their First Aid Squads. 20 bales of used clothes, provided by Swedish RC have been distributed to the displaced people.

Cholera:

NRCS is involved in surveillance, tracing of patients, transferring them to treatment centres, chlorinating water sources and assisting the personnel in the hospitals.

Other Agencies' Action w

NRCS was the only humanitarian organisatin so far to assist teh victims of the communal clashes in all three regions.

WHO, UNICEF and MSF are supporting the government hospitals with material and medicines against cholera.

Co-ordination w

Communal clashes: NRCS works closely with the government authorities, who provide security in the areas of the communal clashes and have issued permits for free circulation to NRCS' volunteers

In the cholera operation, NRCS' volunteers will conduct the health education campaigns under the supervision of governmental health staff, and will co-operate with teachers in schools, where they intend to sensitize the students against cholera and related diseases.

Nigeria has experienced an on-going series of communal clashes since April 2, the latest and most violent one taking place in the oil rich Niger delta in the southwest of the country. Over 300 people were killed, and more than 24,000 lost their homes and belongings and currently live as internally displaced in public places made available by the authorities. In Anambra State, violence broke out on April 2 and continues today, displacing over 8,000 persons. The economic activities in the area of conflict have come to a complete standstill, markets have been closed down and most of the people, who are predominantly farmers, are unable to go to their farms as the movement of people is severely restricted. Schools and other government establishments have been shut down, many people have been killed, while many are injured and hospitalised. The Federation issued an Information Bulletin on May 19, 1999.

Armed clashes between three ethnic groups (Ijaw, Urhobo and Itsekiris) in the Niger delta (southwestern Nigeria) also reached their peak in early June, and continued until June 13. Over 3,000 persons had to be evacuated, and a state of emergency was declared in Warri and the surrounding villages. Schools and government establishments were closed and economic life came to a complete standstill. From May 22 until May 27, communal clashes also disrupted daily life in Kafanchan, afflicting more than 2,000 people.

A cholera epidemic has concurrently struck 7 states (primarily Kano, Lagos, Kwara and Edo) in, with a total of some 2,976 cases reported and a mortality rate of approximately 24%. The subsequent spread of the disease to Borno, Katsina and Kaduna states has been confirmed by the Ministry of Health (MoH). During May, the MoH established a plan of action in co-operation with WHO, UNICEF, the Nigeria Red Cross Society (NRCS), and MSF.

Both events are fully considered in the Federation's 1999 Emergency Appeal for Nigeria (Appeal 01.06/99) under the Health and Disaster Preparedness and Planning (DPP) Sectors. While the Health component is 80% funded, the DPP component has received only 10% of the anticipated support. The Federation will immediately release CHF 50,000 from the Disaster Response and Emergency Fund (DREF) to initiate further relief and assistance action.

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Further to the more recent clashes which occurred in May and June in the Oil Delta region, more than 120 NRCS volunteers from 5 Divisions (namely, Warri, Okpe, Udu, Uvwe and Ughelli) are involved in providing assistance to the displaced and injured victims of the communal clashes, including First Aid to the injured victims, transporting the sick and the wounded to hospitals, and supporting the medical personnel. Chevron Nigeria Ltd., Shell and NNPC have lended support in the form of air evacuations, and as a result the NRCS has been involved in the evacuation of more than 3,000 displaced people, mainly women, children and elderly persons, from the affected areas to safer places. ICRC provided 5 boxes of dressing material to NRCS for the First Aid Squads. 20 bales of used clothes, provided by Swedish RC were also distributed to the displaced persons.

The ICRC Regional Delegation in Lagos has also provided dressing material, 1,000 blankets, 25 plastic sheets, 200 jerry cans, 200 cooking pots and 1,000 plates, cups and spoons, and has indicated further support of non-food items. In Kafanchan, the ICRC immediately provided 1,000 blankets, 1,000 sets of cups, plates and spoons, 200 pots, 200 jerrycans, and 20 rolls of plastic sheeting .

Cholera outbreak

Responding to the cholera outbreak, the government (assisted by MSF, UNICEF and NRCS) established 5 treatment centres in Kano. An outbreak of measles in Kano, Borno and Katsina States has limited the hospitals' capacity to provide treatment for the cholera patients. All agencies as well as the governmental authorities admit that the present facilities and capacities cannot cope adequately with the cholera outbreak.

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Assessment of Needs w

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Immediate Needs w

Communal clashes:

The NRCS has requested support to procure 3,000 pieces of soap and 200 tins of baby food, as well as 33,49 Mt of rice, 5,582 Mt of beans and 2,791 Mt of vegetable oil per person for a one month distribution.

In the Oil Delta, the NRCS is planning to provide initial assistance to some 5,640 displaced and vulnerable victims with non-food items and food aid. While the ICRC immediately provided 2,000 blankets, 500 mats, 1,760 pots, 1760 jerry cans, 2,000 pieces of soap and 2,000 sets of spoons, cups and

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The NRCS plans to continue support to the government's treatment centres, initiate a campaign for control and prevention of cholera as well as health education in a total of 17 targeted Local Government Areas (LGAs) in the states of Lagos, Kano, Borno, Katsina, Edo and Kaduna. Medical material will be given to the medical personnel in identified hospitals, which deal with cholera cases, house-to-house awareness campaigns, and the establishment of 10 school units per LGA are planned for health education. Further needs will be specified and detailed in the upcoming Situation Report.