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150-RPS Niger Regards General

# INTERNATIONAL SERVICE DIVISION

NIGERIA/BIAFRA RELIEF PROCRAM

(Not for publication or quotation)

# SITUATION

As a result of the war between the Federal Government of Nigeria and secessionist Biafra that began in July 1967, many thousands of people, civilian and military alike, have died on both sides of the conflict; still more are homeless, sick and starving. Near Asaba, for instance, refugee women and children await the services of a harried nurse in a clinic where the meager supply of medicines has been exhausted. Although large stockpiles of food awaiting distribution are on the piers of Lagos, millions of children in refugee camps only a few hundreds of miles away suffer from severe malnutrition and starvation. And, meanwhile, the rows of graves outside the refugee camps quickly lengthen.

Nigeria's worst rainy season since 1892 dramatically increased the logistical problems of emergency food distribution. Also hampering distribution are war-time shortages of gasoline and spare parts and destruction of roads and bridges.

A long-range large-scale problem faces the Nigerian government. Members of many African communities were living on a subsistence level previous to the war; the problem of malnutrition existed already. Now that the war has interfered, the new problem is what will happen when the slight reserve the refugees have breaks down. In addition, many more refugees are hiding in the forests than have come to relief camps. In quantitative terms, once the fighting comes to an end, there will be five or six times more refugees than current programs embrace. And since the severe rainy season prevented this year's crops from being planted, there will be less food than normal at a time when more than normal is needed.

# BACKGROUND

Service Committee program involvement with Nigeria has predated the civil war by some 15 years. During the 1950's, Nigerian graduate students in European universities took part in International Seminars in Europe. In the late 1950's and 1960's, after Nigerian independence was won, Nigerian diplomats posted abroad attended Conferences for Diplomats in Europe, Asia, and the U.S. Since 1963, when our first seminar in West Africa was held, mid-career and senior governmental and professional people have taken part in AFSC seminars in West Africa. Between 1960 and 1967, AFSC had a work camp program and field staff in Nigeria.

In the current crisis, the contacts developed earlier have placed International Affairs staff in a favorable position to take a direct role in

peacemaking efforts. Of nearly a hundred Nigerian past participants in our programs, International Affairs staff has been in close contact with many who are now in top governmental, diplomatic, professional, business and academic posts in Nigeria or Biafra or assigned to posts elsewhere in the world. When successive attempts at mediation failed to produce a settlement, Quaker representatives, since they were already well acquainted with key people on both sides, were urged by several Heads of African States to see if they could set up completely private and unpublicized discussions between the warring parties. There has followed a series of consultations in Lagos, in the Biafran government headquarters, in London, Paris, New York, Washington and Lisbon. On these occasions, Quaker representatives have been able to convey proposals and ideas from one side to the other which would not otherwise be known and to urge steps which might not otherwise be considered. AFSC representatives are trusted and heard by both sides, and our access to top officials on both sides continues.

Feeling a special responsibility to speak to the overwhelming human needs brought about by this tragic civil war, the Board of the American Friends Service Council of Great Britain, authorized a three-man Mission of Inquiry to explore the relief needs in Nigeria/Biafra. The Mission spent eight weeks, from mid-July to mid-September, in Nigeria/Biafra in order to evaluate the relief needs of both sides, and to recommend an appropriate role for Quaker Service in helping relieve the suffering. In addition, AFSC representatives supervised the distribution, in both Nigeria and Biafra, of \$105,000 made available to AFSC for the purchase of locally available food and emergency medical supplies.

Channing B. Richardson, Professor of International Affairs at Hamilton College, headed the team. Additional members of the team were David G. Scanlon, Professor of International Education and Director of Columbia University's Center for the Study of Education in Africa, and Dr. Christian Hansen, Assistant Professor of Preventive Medicine at Tufts University Medical School and staff physician at the Tufts Mississippi Delta Health Center.

# PROPOSED PROGRAM

Upon the recommendation of the Mission of Inquiry, the Service Committee is recruiting 15 doctors, nurses, food distributors, mechanics and field administrators for service in Federally-controlled territory. The work of these volunteers will be carried out in close association with both national and state Nigerian authorities and in consultation with other private agencies.

The emphasis of the Quaker staff will be two-pronged. First, instead of attempting to import food supplies from abroad, they will work toward the more effective mobilization and distribution of already available food stocks--intra-regionally as well as inter-regionally. Second, these skilled volunteers will strive to provide medical services to groups of mothers and children many of whom have had no access to such services for more than a year.

To varying degrees, refugees of all tribes have experienced the toll of factional divisions and inter-tribal hatreds; all have been reduced to isolation from their fellow countrymen by the bitter and desperate civil war which has persisted for 16 months and from which continuing guerilla activities may result even after the formal end of hostilities.

Insofar as possible, the Quaker program will be a catalytic effort to assist Nigerians from varying backgrounds in governmental positions and private occupations to work together for their mutual aid and towards the solution of their common problems. Nigerian national and state authorities have responded warmly to AFSC offers of supportive effort in this complex and tender task.

The program will be directed initially to the meeting of emergency food and medical needs, but it is intended to move as soon as possible towards the reintegrative community aspects of resettlement, education and self-help through encouraging and supporting increased Nigerian efforts to reassume relief and rehabilitation responsibility.

#### BUDGET

An annual budget of \$200,000, not including from \$200,000 to \$300,000 per year for food and medical supplies, is projected for a period of three to five years.

#### CONCLUSION

AFSC work in this situation is an example of the way in which the total resources of the Service Committee can be mobilized to deal with a specific problem. Information and contacts initially supplied by International Affairs staff in West Africa helped the International Service Division to undertake an AFSC refugee relief program. Further, although the relief operation in this highly charged political climate is inevitably plagued by problems of publicity, it has benefited from the confidence previously established by the private and unpublicized peacemaking efforts.

AFSC work will be carried out strictly on a humanitarian basis without regard to the tribal background or political affiliation of the refugees involved. These war sufferers are from many tribal backgrounds including Yoruba, Ijaw, Ibo, Ibibio, and Efik; all of them have been uprooted by the war. It is also our intention to establish a similar team in Biafra.

Because the civil rather than international nature of the conflict raises the issue of Nigerian sovereignty, it is difficult for the United Nations and many national governments including the United States to offer aid. The International Committee of the Red Cross was asked to assume the overall administration of relief for Nigeria and the secessionist areas, but ICRC agreed to undertake this responsibility only for the duration of formal hostilities. Therefore, it is quite likely that ICRC will be leaving Nigeria, thus increasing the burden of the Nigerian government. As the American Friends Service Committee is one of the few private relief agencies that has been given permission by the Nigerian government to work under its auspices, the AFSC program will be in an unusual position to offer support to indigenous Nigerian agencies.

# REPORTS

The privacy and lack of reporting which is central to the effectiveness of this International Service program limit specific documentation. However, on a confidential basis, more information can be supplied if requested.

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AMERICAN FRIENDS SERVICE COMMITTEE INTERNATIONAL SERVICE DIVISION
160 North 15th Street
Philadelphia, Pa. 19102

Reports General

# NIGERIA/BIAFRA RELIEF

10 October 1968

# GENERAL SITUATION IN NIGERIA/BIAFRA:

As a result of the civil war that has ravaged Nigeria for fifteen months, many thousands of people, civilian and military alike, have died on both sides of the conflict; still more are now homeless, sick and starving. Near Asaba, for instance, refugee women and children await the services of a harried nurse in a clinic where the supply shelves contain not so much as an aspirin or an anti-malarial tablet. Although large stockpiles of food awaiting distribution are on the piers of Lagos, millions of children in refugee camps only a few hundreds of miles away suffer from severe malnutrition and starvation. And, while the war continues with the inexorability of a Greek tragedy, the rows of tiny graves outside the refugee camps quickly lengthen.

#### SPECIAL PROBLEMS OF THE NIGERIAN/BIAFRAN TRAGEDY:

Complications have plagued the relief situation of the Nigerian civil war and have increased the necessity for immediate action:

- 1. Nigeria is currently suffering from the worst rainy season since 1892. The rainy season, now three months longer than usual, has not only prevented what planting might be done, but has dramatically increased the logistical problems of emergency food distribution.
- 2. Because of the war and weather conditions, food distribution is chaotic at best. With the shortage of gasoline and spare parts and with the

destruction of bridges and roads, stockpiles of food occupy warehouses in one section of the country while there is mass starvation less than a hundred miles away.

- 3. A mutual suspicion characterizes people on both sides of the conflict. As a result, many would choose to starve rather than to taste food if they question its safety.
- 4. It is clear that there is a long range problem which faces the Nigerian government. In quantitative terms, the relief effort has not yet been mounted on the scale that will become necessary. Once the fighting comes to an end, there will be five to six times as many refugees to be cared for as are now embraced by present programs. Evidence points to the fact that the condition of thousands of refugees who are still hiding in forests is far worse than that of refugees now in camps.
- 5. Because the civil rather than international nature of the conflict raises the issue of Nigerian sovereignty, it is difficult for the United Nations and many national governments including the United States to offer aid.

  Although the International Committee of the Red Cross has been asked to assume the overall administration of relief for Nigeria and the secessionist areas, ICRC has agreed to undertake this responsibility only for the duration of hostilities. Therefore, it is quite likely that ICRC will be leaving Nigeria, thus creating an organizational vacuum. This increases the need for private voluntary agencies whose focus is non-political and non-partisan.

# AFSC RESPONSE -- MISSION OF INQUIRY, SUMMER 1968:

Deeply concerned by the overwhelming human needs brought about by this tragic civil war, the Board of the American Friends Service Committee, in consultation with the Friends Service Council of Great Britain, authorized a three-man Mission of

Inquiry to explore the relief needs which the war has created in Nigeria/Biafra. The Mission spent eight weeks, from mid-July to mid-September, in Nigeria/Biafra in order to evaluate the relief needs of both sides, and to recommend an appropriate role for Quaker Service in helping relieve the suffering. In addition, the Mission supervised the distribution of \$105,000 made available to AFSC for the purchase of locally available food and emergency medical supplies.

Channing B. Richardson, Professor of International Affairs at Hamilton College, headed the team. The other two members of the team were David G. Scanlon, Professor of International Education and Director of Columbia University's Center for the Study of Education in Africa, and Dr. Christian Hansen, Assistant Professor of Preventive Medicine at Tufts University Medical School and staff physician at the Tufts Mississippi Delta Health Center.

# GENERAL ITINERARY OF THE MISSION OF INQUIRY:

Lagos: July 18 to present

Channing Richardson arrived in Lagos on July 18 and established headquarters for Quaker Service. In Lagos he developed close contacts with Nigerian governmental officials including Mr. Timothy Omo-bare, the newly appointed Commissioner of Rehabilitation. In addition, Channing Richardson was active in the weekly meetings of the National Advisory Committee of Voluntary Agencies and conferred with representatives of ICRC, the Nigerian Red Cross, the Christian Council of Nigeria and other voluntary agencies.

Very shortly after his arrival, Channing Richardson was joined by John Volkmar, Director of the International Dialogues in West Africa Program of AFSC, who assisted with the Quaker Service program.

Beginning on September 8, Bradford and Jean Abernethy of Rutgers University assumed the responsibility of interim Field Directors. They are based in Lagos and are making field trips to outlying areas.

Growing out of his conversations and meetings in Lagos, Channing Richardson reported:

General Gowon called a meeting of all voluntary agencies to make explicit the fact that his government cannot accept help from relief agencies which do not use aid channels authorized by the government. (Richardson, 7/23/68)

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We are convinced that good personnel is needed out here at once; more will be needed in the coming months. Any team we send should be a two-year operation at the minimum. In any case, no team or individual should come for less than six months, and one year is preferred. Since many of the present teams of other agencies will terminate after January, there will be a big drop in team strength. At present, no one knows and few dare guess the ultimate dimensions of need, but there is no question but that it is immense. (Richardson, 8/16/68)

Mid-Western State: Benin City, Agbor, Asaba, Warri, Kwale, Auchi, Idah (Central-West State), Agenebode, Ogwashi-Uku; August 7-14; September 8-12.

Soon after they arrived, David Scanlon and Christian Hansen traveled some 1300 miles in the Mid-Western State, visiting refugee camps and mission hospitals in areas which had been recaptured by Federal troops. While in the Mid-Western State the Mission members distributed emergency relief funds for the purchase of locally available food and medical supplies.

The following excerpts from David Scanlon and Christian Hansen's reports give their reactions:

Dave and I have just arrived at a small refugee center in which some 50 mothers and children are living in very crowded conditions. The tragedy here is the absence of any teenage or older adult males, which, of course, reflects the fact that they have either been killed or have fled. (Hansen, Agbor, 8/8/68)

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It was one of the most pitiful sights to walk through the buildings and see the refugees sitting on their mats with their few belongings piled beside them. We estimated that they received  $2\frac{1}{2}$  pounds of bulk food (rice and beans) per week whereas by minimum standards they need 20 pounds. This is the kind of place where the phrase "women scraping their bowls" really means "scraping." Yet, despite everything, they can smile. (Scanlon, Catholic Mission, Asaba, 8/9/68)

The lepers were kept in a separate building. They shamed you by their cheerfulness. An old man with no fingers was trying to weave; a woman leper, her leg horribly swollen with an ulcer that went through to the bone, smiled and clapped her hands. (Scanlon, St. Patrick's Refugee Camp, Asaba, 8/9/68)

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It's estimated that there are still approximately 14,000 to 15,000 people hiding in the bush outside Ibiusa where they have been living on cassava (a starchy rootstock) and water. The real question is: what condition will they be in when they eventually return to town? (Scanlon, Ibiusa, 8/9/68)

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During the fighting around Asaba, 60% of the homes were leveled and destroyed. In some areas people are actually living in what literally were formerly latrines which have been merely covered over with a layer of dirt. (Scanlon, Asaba, 8/11/68)

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One has to remember that members of many African communities were living on a subsistence level previous to the war; the problem of malnutrition was already there. Now that the war has interfered, the real problem is what will happen when the slight reserve that they perhaps have breaks down. At what point, at what line, does extreme malnutrition become starvation? (Scanlon, Lagos, 8/15/68)

Central-Eastern State: Enugu, Onitsha, Okigwi, Awgu, Awka; August 15-16.

Dr. Hansen was fortunate in being able to fly to Enugu as guest of Mr. Timothy Omo-bare, Commissioner of Rehabilitation. In Enugu, a former Biafran capital retaken by Federal troops nine months previous to Dr. Hansen's visit, the only medical attention available for some 600,000 people was that provided in several out-patient clinics by medical personnel of a Red Cross team. The irony of this situation, Dr. Hansen reported, was that the program was primarily medical whereas protein and quantities of calories were what was really needed to counteract the extensive malnutrition of the patients. As Dr. Hansen described it,

The scene at the government hospital at Enugu was like the Arrowsmith novel. While hundreds of mothers held their sick children, a doctor would go quickly down the long lines and pick out the children who seemed to be dying. These children were then moved to the front of the line where he would try to take care of them first before moving on to the others. (Hansen, Enugu, 8/20/68)

I found the Enugu trip a moving experience, extremely moving—the numbers and conditions of the people, the starvation and the tiny skeletons. (Hansen, Enugu, 8/20/68)

Biafran Portion of Central-Eastern State: Owerri, Agwe, Agota, Emekuku, Umuahia, Ule, Anporo; August 27-31, September 19-20.

Through the contact of Quaker United Nations Program staff with the Biafran representations in New York, London and Lisbon, it was arranged for David Scanlon and Christian Hansen to visit Biafra to observe the relief needs there. The Mission members found conditions of mothers and children in Biafra worse than they had anticipated; in fact, they felt that children were in worse condition than any photographs they had seen.

In keeping with the Quaker practice of endeavoring to give relief on both sides of civil conflicts, the team members were able to distribute funds to hospitals, refugee camps and missions for the purchase of foods which were locally available from peasant farmers. Following David Scanlon and Christian Hansen's return, another Quaker mission composed of Walter Martin of Quaker United Nations Program and Adam Curle of Harvard University visited the Biafran portion to distribute more emergency relief funds.

A note from one of the recipient institutions gives some indication how much even such a modest effort can mean:

On behalf of the starving children in Biafra and especially on behalf of the Kwashiorkor children in my Parish I wish to thank you for your generous gift given to me by Mr. David Scanlon and Dr. Christian Hansen. This money will enable me to buy food for the 6,000 children attending the six feeding centres set up by me for this purpose.

Kwashiorkor, a dreadful protein deficiency, is killing between 3 to 10 thousand children daily. Thousands of refugees from the war zone have filled our towns to overflowing. Other thousands are packed into refugee camps that have neither enough food nor enough medicine.

That you are even thinking about us is most consoling. The fact that you took the trouble to send out representatives to find out the true nature of things is simply marvellous. We thank you from the bottom of our hearts, and together with the thousands of starving children we ask God to bless you all.

The Mission members had advised authorities of the Nigerian Federal Military Government in advance of their visit to Biafra. Upon their return they gave an account of the needs of the people in the secessionist areas to Commissioner Omo-bare as he had requested.

The following excerpts from David Scanlon's diary of August 27-30 give some indication of the Mission's findings:

There is still some land where the harvest is coming in, but the prices are phenomenal. A 200-pound bag of rice costs 85 pounds sterling, whereas on the Federal side, the same amount sells for 9 pounds sterling. There is hardly a lizard left in Biafra--they are selling for two pence in the market; rats go for five shillings.

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One camp, formerly a Presbyterian primary school in Anporo, had 125 to 150 refugees on Saturday; by the time we were there on the following Wednesday, there were over 3,000. The people were practically sleeping on top of each other. One of the saddest things was the new graves behind the school. I'm not sure how many there were-perhaps 75 fresh from the night before. Most of them were two to three feet long; obviously they belonged to little children.

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At the Emekuku Hospital we saw many children sitting outside in the sun. They were severely malnourished as evidenced by the prominence of the bony structure of their chests, the marked swelling of their feet and an overpowering lethargy--all cardinal signs of kwashiorkor. Many of them had severe skin lesions which were being treated with gentian violet. We saw several children whose blood count was so low that they were suffering from heart failure. All of the children are severely anemic; their hemoglobin counts range from 12 to 40 whereas the normal is around 80.

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We saw infants who were a month or two in age and weighed several pounds <u>less</u> than at birth. Their mothers were attempting to feed them, but because of their own malnutrition, there was a lack of breast milk.

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It is difficult to describe one's feelings on seeing this horror: two or three tiny bodies to a bed, the majority in the advanced stages of kwashiorkor, their skin painted violet. And one knows that 40% of those children will die. The younger the child, the sooner the death.

There is still a train that runs from Aba to the north. It went through Umuahia while we were there. It was unbelievable to see how many people were hanging on the train--the tops of the cars, the space between the cars were jammed with people trying to escape from the war zone. On top sat children with the look of hunger and malnutrition that is so common. It is a depressing sight. They do not know where they are going; they are trying to escape, but the noose is drawing tight.

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The warm greeting and reception we have had from the Biafrans leaves us with a great sense of humility. We have done really very little in proportion to the problem. It is a humbling experience and we can only hope that we will be able to really help to the maximum of our resources.

South-Eastern State: Calabar, Uyo, Abak, Ikpa, Oron, Ibon; September 10-13.

Through the good offices of Commissioner Omo-bare, David Scanlon visited the South-East State, the area with the greatest number of refugees in the territory reccupied by the Federal Government. There David Scanlon found that due to some administrative bottlenecks, there had been deplorable delays in the shipment of food stockpiled in Calabar to the region of refugee concentration in the Uyo area and south of Ikot Ekpene.

David Scanlon described his trip to Philadelphia AFSC staff:

I flew in on a Red Cross plane leased from All Africa Airways and marked with Red Cross symbols. Three days a week these planes fly food supplies to Enugu and Calabar for the ICRC, but on the alternate days, the Red Cross symbols are painted out and they fly in arms for the Federal Military Government.

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Although comparisons of human misery are almost impossible to make, I would say that refugees in the Calabar area are in the worst shape of any in the Federally Reoccupied Territory. Kwashiorkor is widespread. Refugees live on four meals a week where a meal consists of whatever happens to be available to the relief agency on the day of distribution. Usually this is rice, garri or beans.

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In the South-East State there were many examples of a problem in relief administration resulting from a lack of adequate coordination. Medical teams should work closely with food distributors, for if not, the medical teams find that of necessity they become

more concerned with food distribution.

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I rode, as always, on top of the cargo--in this case, it was ten tons of custard. It is very distressing for the Nigerians, who need protein so badly, to be given foodstuffs like custard. Although it is healthful and provides some nourishment, custard is very low in the list of the most needed and acceptable foods.

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When I flew back on the Red Cross plane they were loading ten tons of Sego Liquid Diet. Sego Liquid Diet is rich in needed calories; however, it is a food unknown to the local people and when taken by persons in an advanced state of malnutrition, causes diarrhea. This illustrates two points:

- 1) that care must be taken to evaluate carefully the uses intended for any new food and
- 2) that preferably, local foods such as rice, garri, beans and stockfish should be used.

### AFSC RELIEF RESPONSE TO MISSION FINDINGS:

Upon the recommendation of the Mission of Inquiry, the Service Committee is recruiting 15 medical, food distribution, transport and administrative staff for service in Nigeria/Biafra. The work would be carried out in close association with both national and state Nigerian authorities and in consultation with other private agencies. The emphasis of this Quaker staff will be on the more effective mobilization and distribution of local food stocks within Nigeria, intra-regionally as well as inter-regionally, instead of on placing special efforts on the importation of food supplies from abroad.

This staff will help extend impartial medical services to groups of uprooted mothers and children many of whom have had no access to medical services for more than a year. These persons in need are from many different tribal backgrounds including Yoruba, Ijaw, Ibo, Ibibio, Efik, and others; over all of them the tides of war have swept. To varying degrees, each has experienced the toll of factional divisions and internecine hatreds; all have been reduced to isolation from their

compatriots by the bitter and desperate civil war which has persisted for 15 months and from which continuing guerilla activities may result, even after the end of formal hostilities.

Insofar as possible, the Quaker program will be a catalytic effort to assist Nigerians from varying backgrounds in governmental positions and private occupations to work together for their mutual aid and towards the solution of their common problems. Because of the close relationships which the AFSC has maintained with authorities on both sides of the conflict, there is ample reason to believe that Quaker assistance will be welcome.

The program will be directed initially to the meeting of emergency food and medical needs, but it is intended to move as soon as possible towards the reintegrative community aspects of resettlement, education and self-help through encouraging and supporting increased Nigerian efforts to reassume relief and rehabilitation responsibility. In order to carry out such a program, the Quaker staff must not only be resourceful and highly adaptable, but prepared to meet the pressing needs of the moment and to adapt the pattern of operations to altered needs and changing conditions.

For this program an annual budget of \$200,000, exclusive of the cost of food and medical supplies, is projected for a period of three to five years.