



## **Civilian's Contributions and the Management of Health-Related Issues in the Nigerian Military during the Nigerian Civil War, 1967-1970**

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**Abstract.** This work looks at the Nigerian federal military government's medical outsourcing during the Nigerian Civil War as a way to complement its medically challenged logistics. Thus, it pays attention to civilians' contributions on health-related issues during the Nigerian Civil War, 1967-1970, which contributed to winning the war strategy. Salient aspect put forward by the paper includes services of paid and volunteer health workers from the Medical School of the University of Ibadan, who diagnose, cure and rehabilitate injured and sick soldiers to complement the overwhelmed medical corps of the Nigerian Army. The paper utilises historical and analytical methods to interpret primary and secondary sources. By implication, it posits that the civilian services sustained the war for it prolong period, most especially interrupted civilian blood donation and transfusion to the injured soldiers on the front lines. Such civilian services were motivated by international organisations such as the Nigerian Red Cross, which assisted Military Hospitals, visiting the wounded soldiers, holding prayer sessions with victims and distributing gifts of biscuits and other provisions to the wounded soldiers. Nigerians offer spiritual therapy coordinated by Gideon International Organisation; The Jama'atul Nasril Islam under the Grand Khadi of Northern Nigeria and Sheikh Abubakar Mahmud Gumi, augment and complement the health logistics of the Nigerian military, which improves its combat effectiveness. It gives hope to the wounded and sick veterans as they feel some people are there for them and improve their spiritual, psychological and emotional well-being. It contributes to scholarship on Nigeria's Civil War Win-the War efforts.

**Keywords:** Win-the-War, Spiritual therapy, War Support and war pharmaceutical

### **1. Introduction**

Wars are destructive in their nature and leave in their wake casualties in high death tolls, spread of diseases, and disabled, wounded and physically, emotionally and psychological victims with long lasting scars on their minds and bodies. This led to the demand on medical practitioners and philanthropic contribution to complement the efforts of states and militaries in order to mitigate the pains and effect of wars on the victims and their families very necessary. For instance, during the Battle of Solferino (1859), the Swizz business man, Henrich Dunant, was shocked by the number and pains of the thousands of wounded soldiers unattended in the battle ground that he took to humanitarian cause that culminated in the establishment of the International Committee of the Red Cross (Henri, 1862). During the Nigerian Civil War, there was the wide spread of medical emergencies among the wounded, disabled and sick soldiers on both sides which naturally overwhelmed the logistics and medical capacity of the Federal Military Government and Biafra. However, there is no serious writing on the management of such health crisis. This research is a study of how the medical response shortcoming was complemented by Nigerian civilians and expatriates through the donation of medical equipment, blood, beverages etc to the wounded and sick soldiers while others volunteering their medical services. Using archived newspapers, oral interview, unpublished thesis and other secondary sources such as books and journal articles, the paper identifies that such important area in the medical and Civil War history of from the Nigerian perspective is yet to be investigated which impedes our understanding of the complexity of the Nigerian Civil War and medical history in Nigeria.

## 2. Conceptual Clarification

### 2.1 Civil War

This is a politically motivated large scale, sustained, intense and destructive physical violent conflict that occurs within a country mostly among large important factions of its citizens over the monopoly of physical force within the state in order to secede, change governmental policies or change a given administration (Gersovitz & Kriger, 2013). According to scholars two important factors caused the civil war, which are the greed based and the grief based. The greed based is explain in a certain way that a given group wish to hijack power to accumulate wealth or monopolises state resources while the grief base tends to look at how frustrations, marginalization and injustice lead a certain group to engaged the government in a violent conflict (Anyawu, 2002).

### 2.2 Health Related Issues

In the context of this paper means sickness, disability, physical, emotional and psychological wounds or injuries as well as hygiene and spiritual disturbance incurred by soldiers during or after a battle.

### 2.3 Health Management

This means the preventing, controlling, curing as well as rehabilitating of patience and potential patience of sickness, injuries (both physical and psychological) through the use of drugs, surgery, physical and psychological therapy, spirituality, diets, stipulated exercise among other techniques deployed by the physician.

### 2.4 Background to Medical Contributions in the Management of Healthcare in Wars

Warfare is injury and disease generic because troop's congestion and its devastating effect severe health problems to troops, civilians and attendants such as infectious disease, malnutrition, fatigue, psychological problems such as post-traumatic stress disorder (PTSD) injuries and death. This is more so in modern Industrial Warfare starting from the Second Half of the 19<sup>th</sup> century where the automation of war by the use of assault and automatic rifles, heavy artillery, armor and chemical, nuclear and biological weapons made it more devastating when it comes to casualties (Khorram-Manesh, Krzysztof, Burkle, & Yohan, 2022); the large number of casualties made it difficult for the easy treatment and evacuation which affected the hygiene of camps causing dysentery, trench fever, infections etc for example during the

First World War, about 40000 Britons lost a limb (BBC, 2004).

To assuage this, many mechanisms have been made in order to attend to and confront such health issues. This includes the employment of health workers, the creation of medical corps/unit, medical hospitals etc in order to rehabilitate and cure the sick and injured soldiers. In the case where soldiers suffer from PTSD psychological therapy is applied to deal with it. In order to complement this effort, philanthropists, organizations (profit and nonprofit) and private individuals also voluntarily contribute on humanitarian ground to the curing of sick and (physically/psychologically) injured soldiers.

For example, during the Crimean War in the mid-19<sup>th</sup> century, Florence Nightingale, a British nurse known as "the lady with the lamp", served with her team of nurses to help the wounded soldiers in Constantinople as well improving camp hygiene etc which reduced casualties drastically (Hugh, 2017). Another case study was the activities of the Swizz business tycoon, Henry Dunant (1828-1910), that served the wounded soldiers during the Battle of Solferino (1859) in northern Italy (Henri, 1862). Dunant was passing through the fields of Solferino immediately after the battle on 24th June 1859 and was shocked by the state of the neglected dying and wounded soldiers on the battle ground, Dunant mobilized and organized the village people to provide free treatment for the agonizing soldiers. He also used his money to buy medical supplies and build makeshift hospitals for the healing and comfort of the injured soldiers after which he pursued the establishment of the International Committee of Red Cross (ICRC). He later won the first Nobel Prize for Peace in 1901 (ICRC, 2025).

## 3. The Nigerian Civil War, 1967-1970

The Nigerian Civil war was a large-scale conflict fought between the secessionist state of Biafra (former south eastern Region of Nigeria) headed by Lt. Colonel Odumegwu Ojukwu and the Federal Military Government of Nigeria under General Yakubu Gowon. The war started on 6<sup>th</sup> July 1967 and ended on 15<sup>th</sup> January 1970 after 30 months of bloody encounter. Biafra land and its fringes on the Nigerian side were the battle theatre, the war caused the death an physical and psychological of thousands of troops, civilians (Obinna, Chine, Ugochukwu, & Omonijo, 2011) and wanton destruction of properties worth billions of Naira from both sides, it also led to displacement of about 2 million Nigerians and the creation of massive IDPs, at the end of the war the federal government was able to terminate the existence

of the Biafran Republic and reintegrate the region into larger Nigeria (Philip, Nigeria and Biafra : My story,, 2003).

There was no single causation for the war so to say but rather they interplay in consortium. Causes ranging from the arbitrary 1914 amalgamation of Nigeria by Lord Deltry Lugard; accusation of marginalization by the Igbos; fear of Northern hegemony; the January, 15, 1966 coup (Operation Damisa) and the July counter coup; the failure of the Aburi Accord in Ghana to settle the dispute; the oil politics and the declaration of the state of Biafra by Ojukwu. All these causes are being explained by scholars as immediate and remote causes that led to the war (Udida, 2008; Terhembra, 1980). However, it is out of the focus of this work to delve into such long arguments.

The war was fought in three theatres. In the Northern Sector, the 1 infantry division of the Nigerian Army took charge. On July 5<sup>th</sup> 1967, General Gowon gave orders to the 1 Area Command, later 1 Division, under the leadership of LT. Col. Muhammad Shuwa to launch a “police action” in order to arrest Ojukwu at Enugu for sedition. On July 12 1967, 2, 20 and 23 battalion captured Ogoja town and by July 14 after intense battle the University Town of Nsukka was captured by the Federal Troops of the 1 Division (Ntukogu, 2019). Meanwhile, the federal troops continued their offensive and marched towards Enugu on 12<sup>th</sup>, September, 1967, setting a chain of reaction that would lead to relocation of Biafran capitals from Enugu to Umuahia and Owerri in the course of the war (Okorie, 2015).

On the western sector with places such important places such as Benin, Asaba and Onitsha across the River Niger, the war here was characterised by the contest for the Midwestern cities of Benin and Asaba, “Niger crossing” debacle, and Onitsha (Osakwe, 2014; Yusuf, 2020). Overwhelmed from the Northern and the Southern sectors of the war, the Biafran 101 Division under Col. Victor Banjo with about 3,000 invaded the Midwest on 9<sup>th</sup> and 8<sup>th</sup> 1967. The move was calculated to run over Asaba, Benin, Ore, Ibadan and then to capture Lagos, the capital of Nigeria as of then (Alexander, 1980). The troops were able to reach Ore (present day Ondo state). This transformed the course of the war from police action to total war on the federal site (Orji, 2014).

In response, the federal government created the 2 Division of Nigerian Army under Col. Murtala Muhammad (Obi-Ani & Ambrose, 2022). The 2<sup>nd</sup> Division took back the Midwest including the towns of Benin and Asaba (resulting in the controversial Asaba Massacre) (Elizabeth, Bird, & Frazer, 2017) on

the bank of the River Niger in September 1967 and was ordered to proceed to capture Onitsha. The federal troops, had two choices; either to cross through Idah or Asaba. The headquarters favoured the former but Murtala stubbornly chose the latter despite enamous casualties (Osackwe, 2014). Murtala made successive unsuccessful attempts to cross the Niger which all ended in futility and scandalous disaster, he later followed the long Idah route connecting with the 1 Division and capturing Onitsha at the cost of another disaster in Abagana.

The Atlantic theatre of the war was the littoral sector with the Bight of Biafra (Gulf of Guinea) on the Atlantic Ocean; its terrain is coastal, riverine, creeks, mangroves and muddy areas in the extreme south. Dictated by its terrain, it is most suitable for amphibious landing and as littoral warfare deployed by the 3 Marine Commando. Added to this, it was the only theatre that had the Nigerian Navy performing a joint operation along with the army and air force demanding more cooperation and communication for success (Laurence, 2015). Fighting here was also intense for economic and strategic reasons as it was the host of oil fields and installation, Biafra’s sea bounded gateway, hence the economic blockade, and lastly, the location of the last hold of Biafra, Owerri. (Olusegun, 1980; Okpara, 2019; Itiri, 2019). After many campaigns in Port Harcourt, Bonny and Calabar, the 3 Marine Commando linked up with 1 division at Umuahia and entered Owerri on 9<sup>th</sup>/1/1970. Lt. Col. Ojukwu fled Biafra after handing over the command to his deputy General Philip Effiong who surrendered to Col. Obasanjo of the Third Marine Commando on 12<sup>th</sup>/1/1970 at Amichi. On 15/1/1970 Effiong, leading Biafra’s delegation, read the surrender speech at a ceremony by hosted by the Head of state, General Gowon, at Dordan Barracks in Lagos formally ending the 30 months war with “No Victor, Nor Vanquish” (Philip, 2011).

### **3.1 Health Related Issues and the Call for Contributions for its Management during the Civil War**

The war witnessed massive destruction and casualties on both sides. The massive mobilization of troops (Nigeria had 250, 000 soldiers at the end of the war as against the 10,000 soldiers before the war) (Doron, 2025), use of airplanes, ships, modern assault rifles, armored vehicles, explosives, tanks, improvised weapons such as Ojukwu Bucket, ogbunigwe etc and the long duration of the war (30 months) in swampy, littoral and thick forest region made destruction and causality very high among both belligerents. Among the Federal troops, which is the case study of this

paper, there were victims of reptiles and insects, diseases as well as gun and explosive wounds. Retired Lance Corporal Mustafa Bulama, a veteran of the 82nd Infantry Battalion of the 1 Division, Nigerian Army, is a living victim of bomb explosives in Battle of Ezekulesi (Lance Corporal M Bulama (retired), personal communication, 7/8/2023). There were also the cases of trauma and PTSD among others (Obinna, Chine, Ugochukwu, & Omonijo, 2011). Though the military use some of its healthcare facilities in Lagos, Ibadan, Kano and Kaduna (the 44 Military Reference Hospital Kaduna) and teaching hospitals available in Lagos, Ibadan and Zaria, (Otu, 2019), however, the enormous demand place by sick and wounded soldiers being daily evacuated from the front overwhelmed the modest health logistics available to the medical corps.

This pressure led the military to start requesting for donations and contributions from Nigerians in medical practitioners, volunteers, blood, surgicals, drugs, antibiotics, dressings etc to take care of the wounded and sick soldiers. To achieve this, the federal military government used many strategies. One of such strategies was the use of the media to plea for medical contributions and logistics from Nigerians as well as other non-supports such as prayers, food, vehicles, etc. this was both published in local languages such as Hausa and English on newspapers such as Daily Times, New Nigerian, Morning Post etc or announced in Radio Nigeria, Kaduna (Now Federal Radio Corporation of Nigeria, Kaduna Zonal Office) (Nuhu, 2021).

The Federal Military Government also used traditional rulers to appeal to people for support because of their peculiar importance in the eyes of their people (Daily Times, 14/8/1967; (Daily Times, 18/8/1967). There were also organized tours by State governors and administrators (Daily Times, 22/8/1967) or pleas and goading for support and contributions by highly placed officials and individuals in the society (New-Nigeria, 16/9/67).

### **3.2 The Response of Nigerians to Health Care Outsourcing During the Civil War**

In other to complement the effort of the Nigerian military medical corps, individuals, organizations,

business, professional organizations, religious groups, professionals etc contributed in managing the health of the injured and sick soldiers as a result of the Nigerian Civil War from 1967-1970. These contributions include surgical of various sizes and purpose, drugs, injection worth thousands of pounds, religious books and prayer pamphlets, professional services for free, blood, beverages etc. Most of the contributions were made through the auspices of the “Troops Comfort Funds”, a coordinated arrangement of receiving financial, medical, food and other donations to the Nigerian troops during the Civil War (New Nigerian, 27/7/1967).

#### **3.2.1 Material Donations**

In this regard many private individuals, businesses, professional bodies donated drugs, dressings surgical etc to wounded and sick soldiers. For instance, Tutu Chemist, which was the sole subsidiary of Soviet Pharmaceuticals in Nigeria as of 1967, gave £500 worth of drugs and surgical dressings as donation to the injured and sick federal troops as a result of the war. Similarly, the Pharmaceutical Association of Nigeria donated drug and dressing materials worth £500; more ever, the African Apostle of Church of Nigeria donated drugs worth £285. The Drug House Nigeria Limited, Lagos, donated drugs, surgical and dressings worth £200 (New Nigerian, 4/9/1967); similarly, Niger City Chemist Lagos donated drugs and medical supplies worth £250 for the troops (Morning Post, 6/10/1967). The Medical School of the University College, Ibadan also sent money for medical supplies from its Medical Relief Fund to the troops (New Nigerian, 23/4/1968), Similarly, the Pharmaceutical Society of Nigeria gave dressings, antibiotics and drugs to the troops valued £700 (New Nigerian, 2/10/1967); Sara Trading Coy, Kaduna, donated 72 packages of pensics (New Nigerian, 27/7/1967). At another level, Western Chemist Opticians Limited, Ibadan distributed eye glasses and pharmaceuticals to affected soldiers (Morning Post, 23/8/1967). Similarly, Drug Houe (Nigerian) Limited donated drugs, surgical and dressings worth 200 pounds, first aid kits among others (Morning Post, 23/8/1967).

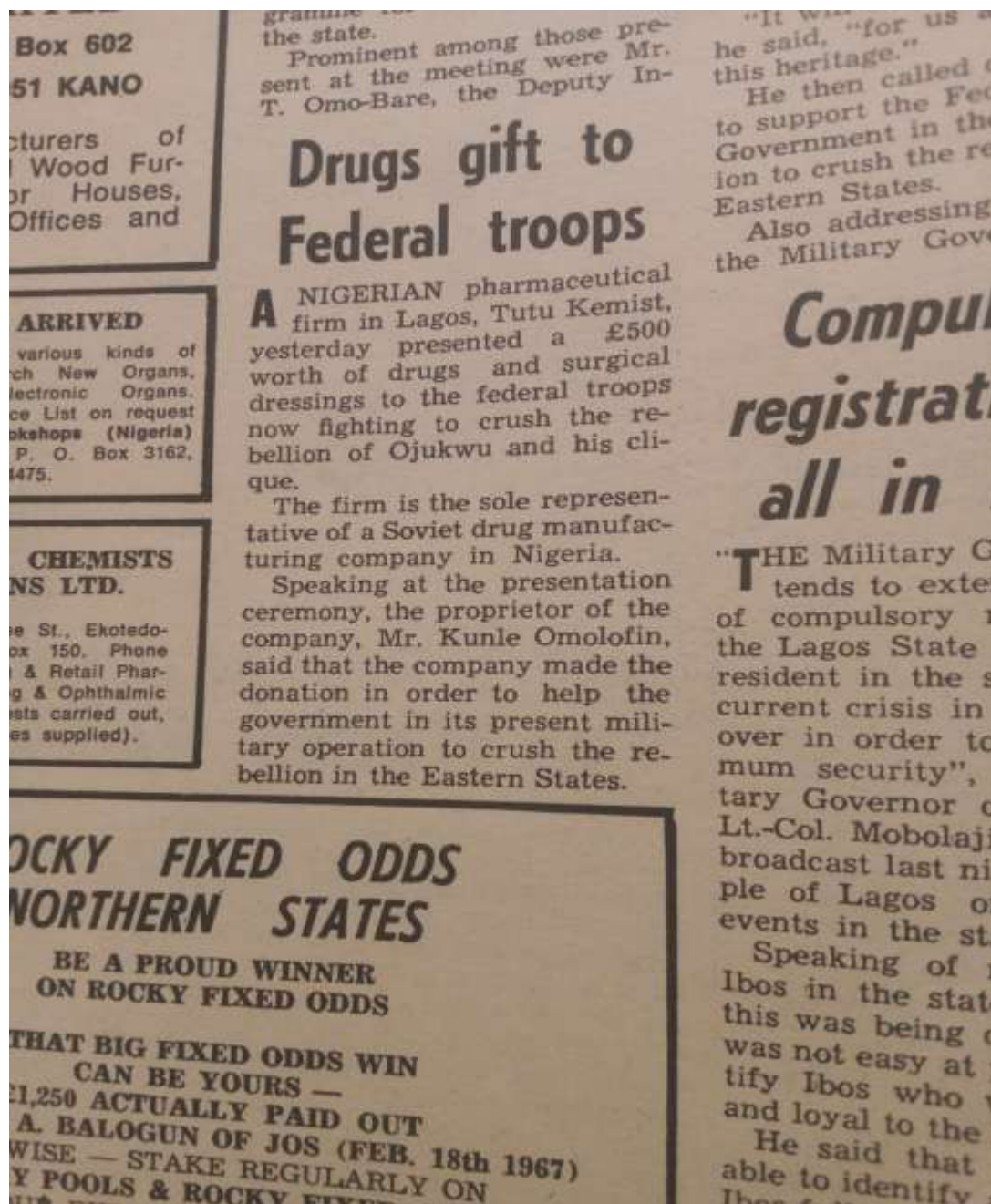


Fig.1: An Archived News Paper from 1967 reporting medical donations during the Nigerian Civil War, Source: *New Nigerian*, 1967

### 3.2.2 Health Workers

The Medical School of the University of Ibadan sent 26 doctors and 6 trained nurses to the war front to diagnose, cure and rehabilitate injured and sick soldiers in order to complement the overwhelmed medical corps of the Nigerian Army. Similarly, other health practitioners in the university hospital volunteered their night shifts and weekends to attend the wounded soldiers admitted the facility (New Nigerian, 23/4/1968).

### 3.2.3 Blood Donation

As bomb and other explosives along with ammunitions kept injuring soldiers on the front line daily and a lot of blood was being loose from the bleeding soldiers, there was the need for instant blood transfusion on some of the wounded soldiers in other to salvage their lives, the demand for blood overwhelmed whatsoever arrangement was already in place. The enormous cost of the war would make buying blood a very difficult arrangement as according to the Federal Commissioner for Finance, Cheif Obafemi Awolowo the financial burden of executing the war was £980, 000 per day (Zderek, 1972), the military plea for blood donation by Nigerians (Mornig Post, 15/8/1967). To this effect, Nigerians responded positively with blood donations. For instance, Rivers State youth in Lagos donated blood to be used in the treatment of the “sick, wounded and disabled soldiers who are fighting on the side of the federal military government” (Morning Post, 12/8/1967). At another level, the Nigerian Morning Post reported that another five hundred Mid-westerners residing in Lagos volunteered to donate blood (Morning Post, 22/8/1967). When the Nigerian Youth Movement (NYM) pledged to donate blood for the wounded and sick soldiers admitted to the University Teaching Hospital, Idi-Araba, Lagos, about youths 5000 volunteered (Morning Post, 29/8/1967).

### 3.2.4 The Nigerian Red Cross

The Nigerian Red Cross also provided for assistance e in the Military Hospital Kaduna by visiting the wounded soldiers, holding prayers session with them and distributing gifts of biscuit, and other provisions to the wounded soldiers which was heartily received by the commander (Morning Post, 1/10/1967). They also provided humanitarian assistance to wounded soldiers in both divides and mobilised 3000 relief workers apart from the gift of the sum of £5000 for the health of the wounded soldiers and war victims (Morning Post, 29/9/1967).

### 3.2.4 Spiritual Therapy

Many Nigerians offered special prayers to wounded death, sick, disabled and wounded soldiers which reduce their pains psychologically, spiritually and physically. They also present them with religious books, prayer pamphlets, sermons food and beverages etc to uplift their hope and increase their chance of overcoming the illness. This gave them encouragement and serve as spiritual therapy in their healing process. For instance, The Gideon International Organization, Lagos Chapter, presented 500 copies of the New Testament to the troops in order to improve their spirituality (Morning Post, 23/8/1967). The Jama’atul Nasril Islam under the Grand Khadi of Northern Nigeria, Sheikh Abubakar Mahmud Gumi donated Juz’uAmma (a portion of the Quran) to wounded soldiers at Armed forces Hospital in Kaduna and Kano as received by Lt. A. Rimi who was in charge of the armed forces hospitals (New Nigerian, 3/12/1969).



**Fig.2:** A Newspaper report from 1967 showing Jam’atul Nasril Islam members presenting gifts of the portion of the Holy Quran to wounded soldiers at a military hospital in Kaduna. Source: New Nigerian, 1967.

### 3.2.5 Beverages and Recreational

Many Nigerians also presented milk, sugar, beer, bread, chicken, egg, vegetables etc to the wounded soldiers in a move to improve their chances of recuperation. For instance, the Nigerian Air Force Officers Wives Association (NAFOWA), Kaduna branch, presented such goods to wounded soldiers in Armed Forces Hospital, Kaduna as depicted in the newspaper report below.



**Fig.3:** An Archived Newspaper showing the Wife of the Commander Nigerian Air force Kaduna, Mrs Obada presenting a Carton of Bear Captain Opileye at a Military Hospital. Sources”: New Nigerian, 1967.

#### 4. Impact of Medical Contributions to Troops Health Management

The medical contributions by Nigerians helped in no small way to assuage the pain and improve the health and nourishment of the disabled, sick and wounded soldiers. It also augmented and complement the health logistics of the Nigerian military which improve its combat effectiveness. It gives hope to the wounded and sick veterans as they felt some people are there for them and improve their spiritual, psychological and emotional wellbeing.

#### 5. Conclusion

This work looks at the Nigerian federal military government medical outsourcing during the Nigerian Civil War as a way to complement its medically challenged logistics. The work finds out that Nigerians in response contributed to the war effort through the troops comfort fund and other individual and non-individual initiatives by donating blood, dressings, drugs and surgical worth thousands of pounds for the treatment of the wounded and sick soldiers. The research concludes that the medical contributions by Nigerians complement the efforts of the Nigerian

Federal Military government in attending to the sick and wounded soldiers and play a part in Nigeria’s overall success in the war.

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