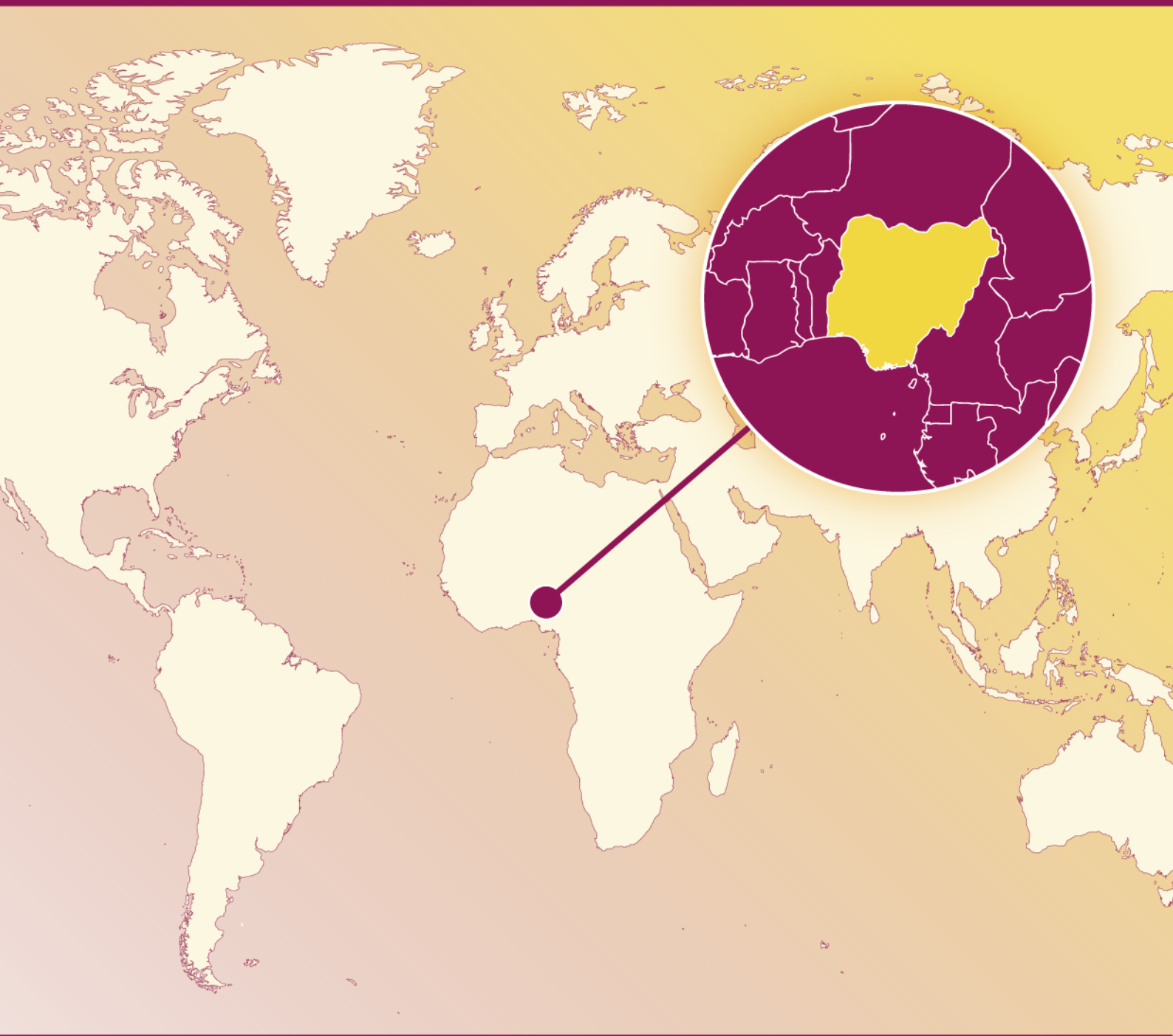


NIGERIA

Violence Against Health Care in Conflict 2022



Letter from the Chair



The more than 1,900 incidents of violence against health care in war and situations of political unrest described in this report are by far the highest number documented by the Safeguarding Health in Conflict Coalition since it began reporting a decade ago. The more than 700 assaults by Russia on health care in Ukraine are the most committed in a single year in one country.

Russia's atrocities in Ukraine have brought global attention to assaults on health care in war, highlighting pervasive violations of long-standing humanitarian norms. But in less visible conflicts and civil strife, the numbers of acts of violence and the stories behind them are equally grim: doctors imprisoned – and sometimes killed – in Myanmar and Iran for treating people in need of care; female health workers in Afghanistan harassed and sometimes beaten as they seek to provide health care for women and children; community health workers murdered in Afghanistan, Pakistan, and elsewhere as they go door to door to immunize children against polio and other infectious diseases.

In the face of the profound harms communities and health workers endure from this violence, the international community has long been passive, even ignoring commitments it has made to prevent attacks and hold perpetrators to account. Impunity for the violence has continued, and even the tracking of attacks has faltered. The World Health Organization's (WHO) system for collecting and disseminating data on attacks on health care in emergencies is plagued by inadequate reporting, lack of transparency, and resistance to reform. After being criticized for reporting zero attacks in Ethiopia despite evidence of looting or damage to hospitals and health centers during the conflict in Tigray, the WHO removed Ethiopia from its public dashboard on attacks on health care.

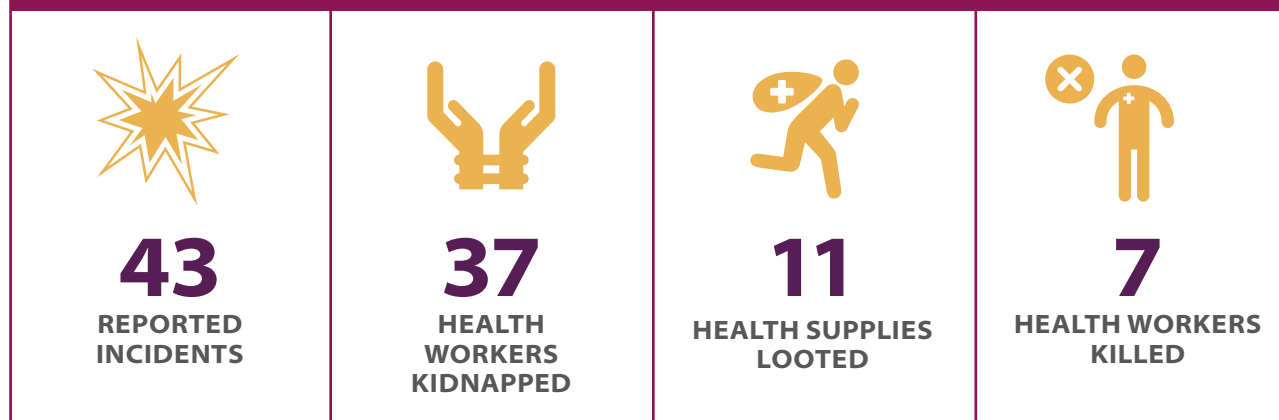
If we mobilize, however, the war in Ukraine could prove an inflection point. Never have calls for accountability for attacks on health care been as loud and sustained as now. We have an opportunity to press for justice for the people of Ukraine in the face of these atrocities and to extend that demand to people everywhere. The time for accountability for these devastating assaults on health care throughout the world is *now*.

A handwritten signature in black ink, reading "Len Rubenstein".

Len Rubenstein
Chair, Safeguarding Health in Conflict Coalition



REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS



↓ Source: 2022 SHCC Health Care Nigeria Data

OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 43 incidents of violence against or obstruction of health care in Nigeria in 2022, compared to 56 in 2021. In these incidents, 37 health workers were kidnapped, seven others were killed, and health supplies were looted from pharmacies and health centers. This undermined health care providers' ability to maintain safe staffing levels to effectively meet patient needs and stock health facilities with the necessary supplies. At least 17 incidents took place in Nigeria's northeastern Borno and Yobe states, with 26 reported elsewhere. This factsheet is based on the dataset [2022 SHCC Health Care Nigeria Data](#), which is available for download on the Humanitarian Data Exchange (HDX).

THE CONTEXT

Insecurity impacting health care in Nigeria was widespread in 2022. Activity by Boko Haram and Islamic State West Africa Province (ISWAP) non-state groups in Nigeria's northeastern Borno and Yobe states affected health workers and health supplies, while the growing presence of armed groups – locally referred to as 'bandits' – in Niger, Sokoto, and Zamfara states increasingly affected health workers. In southern Nigeria, 29 health workers were kidnapped.

VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2022

Incidents were reported throughout 2022 and continued to be widespread, occurring in 19 of Nigeria's 36 states. Most incidents affected health workers working for the national health structure, while four were reported as directly affecting LNGOs and INGOs. High numbers were reported in Borno state, where the looting of medical supplies from health centers was frequently reported, as was the case in 2021. In contrast to the looting of medical supplies, which is concentrated in the north of the country, health worker kidnappings and killings were widespread across the country. Elsewhere, incidents doubled in Zamfara state in 2022 from two in 2021 to four.



ISWAP fighters were frequently named as perpetrators of incidents in Borno and Yobe states, with one attributed to Boko Haram in Borno. Nigerian Armed Forces personnel were named as perpetrators of two incidents that involved the arrest of a health worker for treating a ‘bandits’ leader with gunshot injuries in Sokoto state and the fatal stabbing of a female INGO health worker by an intoxicated Nigerian soldier in Borno.¹ Members of the Eastern Security Network, a paramilitary organization of the Indigenous People of Biafra separatist group, kidnapped a nurse outside her pharmacy in Enugu in October.² Other perpetrators of attacks were not identified. In most cases, perpetrators were armed with firearms. The exceptions were four incidents involving health facilities and ambulances being set on fire by ISWAP fighters in Borno, Kaduna, and Yobe.



STILL LOOKING FOR ANSWERS

On November 17, 2022, a Médecins du Monde (Doctors of the World, or MdM) staff member was killed by a Nigerian soldier while about to board a UN Humanitarian Air Services (UNHAS) helicopter that had just landed at Damboa military base in Borno state. A UNHAS pilot was also injured in the attack, and a dozen humanitarian workers present were put at risk. Because roads to the Damboa area are too dangerous to use, MdM, like other organizations, uses UNHAS flights. UNHAS uses Damboa’s military base, which has a perimeter that is supposed to be safe and secured by the army.

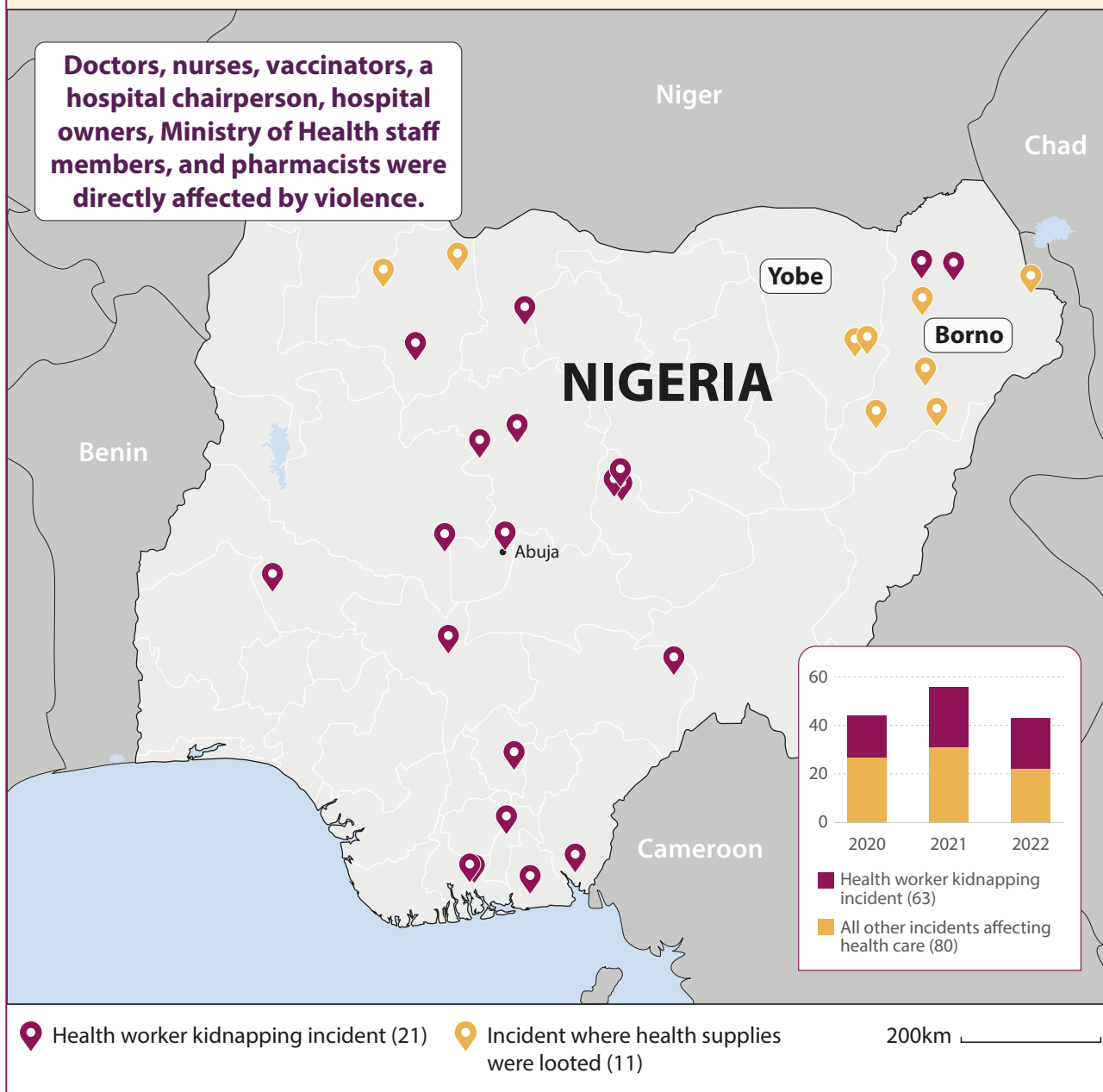
MdM has been calling for complete transparency around the circumstances of the attack, publicly through a statement published shortly after the incident, and privately to both Nigerian civilian and military authorities and UN officials. MdM representatives traveled multiple times to the country in the aftermath of the incident to try and achieve accountability, and MdM also asked other stakeholders for support. The military leadership in the Borno state capital, Maiduguri, apologized to the humanitarian community for the incident and gave assurances that it would try to prevent a similar incident in the future. Yet, several months later, MdM continues to request a copy of the military report on the incident, without success.

Full transparency with MdM on the circumstances of the attack is key to make sure the drivers of the assault are known, and all involved stakeholders need to take measures to improve the safety and security of all humanitarian workers in Borno state.



Reported incidents affecting health care in Nigeria, 2022

The looting of vital medicines was often reported in northeast Nigeria, while 95% of reported health worker kidnapping incidents took place outside of Nigeria's northeast region.



As in the two previous years, almost half of all incidents recorded in 2022 involved the kidnapping of one or more health workers. Most kidnapped health workers were abducted by unidentified attackers outside Nigeria's northeast in areas where kidnappings for profit are common. In Borno state, health worker kidnappings were reported, but less often, with six health workers being abducted by Boko Haram fighters and two by ISWAP. These armed groups also forcibly abducted staff to provide care to fighters and communities in areas with limited health services. For example, Boko Haram kidnapped six staff in December and took them to the group's Mantari camp to treat its wounded fighters.³ ISWAP abducted a



principal medical officer in March, who was forced to treat wounded fighters and their families before being released almost a year later in February 2023.⁴ A female doctor kidnapped by ISWAP in August escaped during fighting between ISWAP and Boko Haram in December.⁵

NORTHEASTERN BORNO AND YOBE STATES

Incidents in Borno and Yobe most frequently involved the looting of vital medicine and other health supplies from hospitals and pharmacies. In most cases, no health workers were present, suggesting that access to health supplies was an important motivation for these incidents. The five exceptions were three vaccinators being attacked by gunmen in Yobe in the ambulance in which they were traveling; health workers being kidnapped by Boko Haram and ISWAP in Borno; and ISWAP fighters setting up a makeshift hospital in Borno and supplying it with medical equipment they had stolen during attacks across the state.⁶ Most of the doctors at the hospital were reported to be Libyans or Somalis, who provided treatment to wounded ISWAP fighters while civilians in the area were denied assistance. The looting of medical supplies temporarily reduces access to vital medication. Repeated lootings severely affect reliable supplies and can put health workers at risk from frustrated patients and their families.

Health workers are targeted because they are perceived to be critical to the society and government, and attack on them is believed to cause severe damage on the society, governments and humanitarian entities' efforts in health response.

A nurse in Yobe state

THE IMPACT OF ATTACKS ON HEALTH CARE IN NORTH-EASTERN NIGERIA

A joint study by IRC, GZDI, and FSACI in September 2022 in Borno, Adamawa, and Yobe states revealed the impact of attacks on health facilities and the kidnapping of health staff in northeastern Nigeria. The study included the perspectives of 477 frontline health workers on the main risks they face and the impact of attacks on health care. In all three states, respondents identified kidnapping as the main risk to their safety. They said that attacks by armed groups on health infrastructure and fighting they encountered on their way to or from facilities pose additional significant risks. According to the study, 13% of health facilities were heavily damaged and put out of action as a result of such violence by the end of 2022. In addition, the violence exacerbated the serious shortage of skilled health workers, particularly doctors, nurses, and midwives, because many are reluctant to work in inaccessible rural areas due to ongoing armed conflict.

The suspension of health services, absence of staff, and shortage of medical supplies as the result of violent attacks have had a direct effect on communities' access to health care. After almost half of the reported incidents, communities faced additional difficulties accessing the health services they needed. An immediate impact reported by respondents in the joint study included the unwillingness of the population to visit health services or stay overnight out of fear of attacks. After an incident, it is common for a health facility to close or significantly reduce its services, forcing communities to delay seeking assistance. During protection monitoring activities in the affected areas, communities highlighted the lack of updated information as a main barrier to accessing health care: if a hospital closes, people do not know where else they can go to seek services.



The impact of violence on health services extends to nutritional services provided as part of the health system: respondents reported that access to nutritional services was impacted in one-third of the incidents reported by these respondents. The suspension of ready-to-use therapeutic food distribution, patients' inability to reach facilities, and their general fear of seeking services were the main reasons for the reduced access to these services. This reduced access has occurred in the context of a nutritional crisis, with 1.4 million children under the age of five estimated to suffer from acute malnutrition.



KEY SURVEY FINDINGS

The joint study referred to above detailed the direct impact of the violence plaguing the region and found the following:

- Four out of ten respondents had been exposed to an attack against health care.
- 80% of respondents who had been exposed to an attack experienced at least one more.
- 79% of respondents who experienced or witnessed an attack experienced signs of heightened distress.

OTHER STATES WHERE INCIDENTS WERE REPORTED IN 2022

Incidents recorded outside of Nigeria's northeastern regions often involved health workers working with the national health structure being kidnapped by unidentified attackers. In total, 29 health workers, including doctors, nurses, hospital owners, Ministry of Health staff members, and pharmacists, were kidnapped. Fourteen were abducted from health facilities in Akwa, Enugu, Niger, Rivers, and Zamfara states.⁷ Ten doctors were abducted by 'bandits' together with relatives of patients at a hospital in Niger state in October.⁸ The remaining 15 were abducted from their homes, while traveling to or from work, and from a school. At least 13 of the 29 victims were male (almost all doctors), and three female (a doctor and two pharmacists).⁹ Ransoms were demanded as a condition for release in several kidnapping cases, suggesting staff may have been targeted for their perceived wealth. Other incidents affecting health workers included the arrest of a health worker in Sokoto state, the shooting and killing of five staff members, and the killing of a health worker by an attacker using a machete.¹⁰

Other incidents involved the destruction of nutritional supplies, the kidnapping of a Ministry of Health staff member in an attack on an INGO-supported health center in Zamfara state, and the hijacking and setting on fire of an ambulance by ISWAP in Kaduna.¹¹



ATTACKS ON VACCINATION CAMPAIGNS IN NIGERIA IN 2022

Nigeria has one of the world's least immunized populations. Figures from the [WHO](#) show that in 2021 diphtheria tetanus toxoid and pertussis (DTP3) immunization levels among one-year-olds stood at 56%, compared to 81% globally. Uptake of vaccinations – notably against COVID-19 – has been undermined by concerns over supposed adverse effects and [conspiracy theories](#). In 2022, staff from vaccination campaigns were attacked on two occasions in Yobe and Zamfara states:

Yobe: Three vaccinators were injured when the ambulance they were traveling in was attacked by unidentified perpetrators in July.¹²

Zamfara: A vaccinator was killed by 'bandits' led by Bello Turji, a high-profile bandit leader, in November. The incident came on the [final day](#) of an integrated immunization campaign against measles, meningitis, and COVID-19 in the state that had started the previous month, and followed the 'bandit' group's decision to ban the presence of the Nigerian government in the area.¹³

For more information on attacks on vaccination campaigns in Nigeria, explore the '[Attacked and Threatened](#)' global map by selecting 'vaccinations' and zooming in on Nigeria. The map is continually updated with new and backdated reports. Access the [data](#) on HDX.



- 1 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Nigeria Health Data. Incident numbers: 31647; 35944.
- 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Nigeria Health Data. Incident number: 35084.
- 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident number 36505.
- 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident numbers 36505; 340766.
- 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident number 34441.
- 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident numbers 35339; 34076; 34441; 36505; 31701.
- 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident numbers 36204; 35440; 35128; 35084; 31751.
- 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident number 35440.
- 9 There is no gender disaggregated data available for the remaining 10 kidnapped health workers.
- 10 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident numbers 31647; 32138; 33216; 34112; 35086; 36080; 35944.
- 11 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident numbers 35128; 34034; 32468.
- 12 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident number 35339.
- 13 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Nigeria Data. Incident number 36080.

SAFEGUARDING HEALTH IN CONFLICT

The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators.

www.safeguardinghealth.org

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