Implications of Communal Conflict on Human Health and Corresponding Indigenous Conflict Resolution Styles in the Contemporary Nigerian Society

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ABSTRACT: *This study examined the incidents of communal conflicts and the implications of these conflicts on human health in the contemporary. Despite the fact that health problems associated with conflict are largely preventable, attention is yet to be directed towards communal conflict preventive approaches; hence societies are experiencing high human health problems. The persistence of the problem further suggests that there is little understanding of the dangers and effects of conflict on human health especially in conflict laden societies. The eruption of communal conflicts usually results in massive loss of lives and destruction of properties. It also hinders, man power growth, labour strength, socio-economic development, social cohesion and political stability. Communal conflicts have the proclivity or tendency to undermine the health of the society. In order to control the explosion of communal conflicts in Nigeria, the study investigates communal conflicts and the danger it poses to human health with the aim of providing information on the immediate and root causes of communal conflicts, management and prevention of conflict in the society. This will assist in creating a holistic healthy society.*

KEY WORDS: *Communal, Conflict, Human Health, Indegeneous, Resolution,*

I. INTRODUCTION

People living in a society develop different personalities and aspirations, and achieve, to various degrees, the goals which they set for themselves. Similarly, communities, social groups or societies are structured and organised to achieve the goals decided by the organs and members of the society. But in the process of achieving these goals, conflict could arise. This means that different people pursuing different goals in contiguous or separate territories have the potential of creating situations of conflict (Otite, et al 2006).

According to the World Health Organization health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. The fatalities, injuries and disabilities suffered during attacks and front-line fighting are obvious examples of the impact of conflict. However, there are also health consequences from the breakdown of services and from population movements. The diverting of human and financial resources away from public health and other social goods contributes to a decline in the overall health and well-being of a population. These indirect consequences may remain for many years after a conflict ends. Conflict around the world has a devastating effect on the health and well-being of the community. Threats to women and girls increase the likelihood of reproductive health problems including STI's, unwanted pregnancy, and maternal mortality (UNFPA, 2001).

From a health perspective the same events that traumatize the community also destroy or diminish the health care system. Essential services such as primary and reproductive health care are often disrupted or inaccessible during conflict situations. In addition to direct physical harm, research has linked traumatic events with poorer daily functioning, physical limitations and chronic medical conditions (UNFPA, 2001).

Various traumatic events may manifest differently according to culture and context. The majority of the work systematically documenting responses to traumatic events has been conducted in western contexts where the focus is more on the individual. Trauma, lack of Social support and services can have long term consequences on the mental and social well–being of individuals. The concept of human health focuses on an individual in all of his/her human dimensions, beyond political boundaries. Human health reinforces human development. Of many health problems, those considered most germane to human security are health crisis during conflict (Lincoln, 2004). Threats to human health include war and conflict as well as poverty and impoverishment. These threats to human health are recognized as highly interactive. Rather than simply rely on the nation state, human health calls upon all sectors of society – government, business, and civil society to take measures that would lead to a conflict free society where human health would be the ultimate. Protective strategies should be employed to prevent, ameliorate, and otherwise dampen or reduce the likelihood and impact of human health threats. A diplomatic effort to prevent communal conflict is one example. Another might be the introduction of health insurance that protects families from the catastrophic economic consequences of

devastating communal conflicts and the empowerment strategies that seek to educate and create enabling conditions for the dispossessed so that people are better able to achieve their own good health (Lincoln, 2004).

The attainment of health is not possible without peace and equitable development. Purely medical approaches are ineffective without social, economic, and political preconditions for good health. Throughout the past century, specific health achievements have been knowledge-based and socially-driven. Knowledge not only enables us to develop new technologies like drugs and vaccines but also basic education enables people to shape their behaviour for producing their own health.

Conflict can be functional and dysfunctional. Dysfunctional conflicts are destructive and cause loss of lives, property, man-hours, investment opportunities, hunger and starvation when open violence, wars, mass strikes, and other forms of disruption occur. On the other hand, functional or creative conflicts are constructive and reflect the differences and variety of human opinions and activity which exists in any free society. If creative conflicts between groups which are major sources of innovation, new ideas, institutions and social change are suppressed altogether, a nation becomes stagnant and static (Dzurgba, 2006).

What is Conflict?

Conflict has been conceptualized differently by several scholars based on their goals, interests and aspirations. According to Rechler (2001), conflict is the pursuit of incompatible goals by different groups; or as a linear phenomenon that consists of stages like initiation, escalation, maintenance, abatement and termination. Conflict is an indispensable phenomenon in human social interactions. Thus conflict is defined as a state or quality of ongoing relationships among social entities, such as persons, groups, or organizations. It results from lack of agreement over an issue and is expressed in words and actions. Conflict is an escalated competition at any system level between groups whose aim is to gain advantage over other groups (Angaye, 2003).

Conflicts refer to disputes, disagreements, quarrels, struggles, fights and wars between individuals, groups and countries. In every nation there is no complete agreement on how to share wealth, power and status among individuals and groups, and how to effect necessary changes and reforms. Since different groups and individuals have diverse interests, the aims of some groups will conflict with those of others. Conflicts occur when deprived groups and individuals attempt to increase their share of power and wealth or to modify the dominant values, norms, beliefs or ideology (Angaye, 2003).

According to Otite, et al (2006), conflict is a situation of contention and encounter, and of irreconcilability or incompatibility involving two or more parties over access to or control of commonly prized and valued limited resources.

Conflicts may involve the use of verbal attacks or of arms in a struggle, and lead to warfare or to social disorganization and disharmony. This may require conflict resolution or management. People do not always like conflicts and hence they activate their provisions to resolve, transform or manage such conflicts. Continuous encounters and intermediate conflicts have a chance of leading to societal disorganization and breakdown which may constitute an obstacle to socio-economic and socio-political development. Hence although conflicts are naturally inherent in heterogeneous and competitive situations, individuals and societies are pre-occupied with the resolution or transformation of conflict and the normalization of social, inter-personal, and inter-group relations. Conflict and consensus are two sides of a coin (Otite, et al 2006).

Causes of Communal Conflicts

The premise of conflict in Nigeria consists essentially in the struggle by individuals and groups to control the limited resources. Diverse exclusive ethno-cultural interests and societal goals of political and economic survival which involve strife and struggles, provide fertile grounds for conflicts. Conflict can thus be caused by various factors derived from various sources. Although the causes and sources of conflict are analytically distinct yet they overlap and are very closely related (Otite, et al 2006)

The divisive interplay of politics, ethnicism and religion in Nigeria has led to rising nationalism and militancy of various ethnic movements, seeking self-determination, local autonomy, separate identity and true federalism. The existence of artificial and arbitrary boundaries that split ethnic groups among different local government areas (LGAs) and states has resulted in boundary disputes and demands for re-unification or separation. Accusations and allegations of neglect, oppression, domination, exploitation, victimization,

discrimination, marginalisation, nepotism and bigotry are common. It is difficult to know who is marginalising who in Nigeria because all ethnic groups from the biggest to the smallest complain of marginalization (Otite, <u>et al</u> 2006).

However, most of the communal conflicts in the minority areas in the South and Middle Belt are caused partly by land, boundary, and chieftaincy disputes but mainly by domination and oppression; frustration-aggression-displacement; divide-and rule policies and diversionary scapegoat techniques. The inequalities in the distribution of power, wealth and status, and domination and oppression by bigger groups and their collaborators within the smaller groups have frustrated the minority Ogonis, lbibios, Tivs, Igalas, Itsekiris, etc. who seem to reduce their built-up tensions by fighting among themselves rather than unite and face the real oppressors. The breakdown of such vehicles of social control as the family, education, law, religion and the political system has increased ethnic and communal conflicts. The inability of many homes to make ends meet with the family income tends to increase immorality, broken fatherless/motherless homes, divorces and drunkenness, leading to street fights. (Otite, <u>et al</u> 2006).

II. IMPLICATIONS OF COMMUNAL CONFLICTS ON HUMAN HEALTH

Conflict-Related Morbidity

Epidemiologists also seek to estimate the effect of conflict on disease by using retrospective mortality studies called "verbal autopsies." The International Rescue Committee's surveys in the Democratic Republic of Congo, for example, found that infectious disease was the country's biggest killer, far outstripping direct conflict deaths and injury. Cross-national analysis of summary disease data has also found that civil wars greatly increase the risk of infectious disease (UNHCR, 2006). The most important immediate causes of deaths in complex emergencies are acute respiratory infections, diarrheal diseases, maternal and neonatal morbidity, tuberculosis, and vector-borne diseases such as malaria. Disease risk is increased by several conditions common in complex emergencies, including overcrowding and inadequate shelter; malnutrition; insufficient vaccination; poor water and sanitation conditions; exposure to "new" diseases, for which affected populations have not developed immunity; and lack of, or delay in, treatment. In recent years, researchers have also become concerned with the effect of conflict on particular communicable diseases, such as Hiv-Aids, (UNHCR, 2006).

Conflict-Related Mental Health

Another use of population-based surveys lies in assessing the impact of complex emergencies on mental health. Although this remains a comparatively neglected area of study, the existing evidence suggests, not surprisingly, that mental illnesses increase in emergency settings, and that multiple human rights violations may have cumulative and negative mental health impacts (UNHCR, 2006). Like indirect conflict mortality, adverse mental health impacts are part of conflicts' overall human costs, and should be factored into broader impact assessments. Mental health impacts can also have important political consequences. Consider, for example, one study of links between traumatic experiences during the 1994 Rwandan genocide and attitudes towards post-conflict justice. Nearly a quarter of respondents displayed post traumatic stress disorder (PTSD) symptoms, and they were less likely to have positive attitudes toward the Rwandan national trials and interdependence with other ethnic groups. Furthermore, persons who experienced multiple traumatic events were more likely to have positive attitudes toward the International Criminal Tribunal for Rwanda but less likely to support national and local justice and reconciliation processes. Consider also a study of mental health and attitudes among Kosovar Albanians following the 1998–99 war, which revealed an association between traumatic war time events, decreased mental health, impaired social functioning, and strong respondent emotions of hatred and revenge toward Serbs (Trauma Interventions in War and Peace: Prevention, Practice and Policy, 2003).

Violent conflicts have a large and visible impact on health outcomes. In particular, armed conflicts generally have a very high impact on mortality rates, while most forms of violent conflict will cause injuries, ill-health and severe psychological damage to those involved in fights, to those living in war-torn communities and to displaced populations. These effects are often aggravated by a variety of factors, even after the end of conflict, such as the breakdown of health and social services and the loss of social capital and/or political trust (UNFPA, 2001).

There is, however, surprisingly little knowledge on the health consequences of violent conflict, partially due to difficulties associated with research on health issues in conflict areas, and partially due to the destruction of registration systems and possible misrepresentation of politicised information on the true levels of mortality and morbidity.

III. RISKS TO HEALTH DURING CONFLICT

Conflict will inevitably cause loss of lives, physical injuries, widespread mental distress, a worsening of existent malnutrition (particularly among children) and outbreaks of communicable diseases. Internally displaced and refugee populations are at particular risk. Common, preventable diseases such as diarrhoea, threaten life. Chronic illnesses that can normally be treated lead to severe suffering. The dangers of pregnancy and childbirth are amplified (Trauma Interventions in War and Peace: Prevention, Practice and Policy, 2003).

Conflict will also reduce people's personal security and restrict their access to food, medicines and medical supplies, clean water, sanitation, shelter and health services. People's coping capacities are already severely strained: many will find the privations of war overwhelming and need both economic and social support. The pattern of conflict has an immediate impact on civilian suffering. If water supplies are damaged, sanitation impaired, shelter damaged, electricity cut, or health services impaired, mortality rates start to rise. If these risks are to be minimized, those involved in conflict must give priority to ensuring that civilians can access these basic needs. If access is impaired, it must be restored as rapidly as possible. Population movements and crowding in temporary shelters increase the risk of waterborne disease outbreaks such as cholera, typhoid and dysentery, measles and meningococcal meningitis.

Inhuman Treatment

According to UNFPA, 2001 the safety and security problems reported at the onset of conflict and thereafter included:
➢ Abductions
➢ Sexual violence
➢ Women and girls have been raped in front of the male members of their families, who were beaten and forcibly restrained by the attackers. Women reported that most rape victims did not scream during or after the rape and did not report incidents as a means to avoid scandals in the community.

Health problems as a result of the conflict are Physical injuries and disabilities as a result of beating and other violence, Miscarriages, excessive bleeding caused by beatings or by running long distances, fleeing from attacks, husbands of women that were raped abstained from sex because of fear of diseases - although they do not divorce or totally desert them, malnutrition, psychosocial disturbance and nightmares, STDs, extra torture after rape such as knives assaults to their private parts; fistula, and other damage to vaginal, and urinal passages, women reported having been raped in front of the male members of their families, who were beaten and forcibly restrained by the attackers (UNFPA, 2001).

Indigenous Conflict Resolution Styles In The Contemporary Nigerian Society
Societies are organised in such a way as to maintain their continuity. The human capital is replenished from generation to generation through the family and heterosexual function of procreation and socialization and enculturation of the young this is to enable people acquire the values, norms and expectations of office holders. Rules and regulations are enforced and conformity expected despite deviant and criminal behaviour of some members. When divergent goals and perspectives clash within or between incorporated ethnic or other interest groups, initiatives and mechanisms are mobilized to restore normalcy and achieve as high a degree of social equilibrium as possible. There are hardly any societies in total equilibrium (Otite, et al 2006).
The pursuit of different personal and group goals always impel or incline people away from complete harmonious relations, to relations of conflict. It may thus be stated that, conflict and consensus are two sides of the same coin of our social reality, and both equilibrium and conflict theories may apply in order to have a comprehensive understanding of our societies (Kuper, et al 1971).
Conflicts can become dysfunctional and create problems for social structures and functionaries. There is also the possibility of societal breakdown or secession, as was attempted during the Nigerian civil war of 1967-1970. Conflicts acts as catalysts for development their prolongation or even their occurrence can become intolerable in societies. Hence, quick steps are taken to resolve them (Nnoli, 1978).

Conflicts can hardly ever be totally resolved. Since conflicts are always occurring and are hardly ever settled, management of it permits peaceful or stable conditions for society to continue to exist and to develop. A situation of conflict is not stable; it is a dynamic one which, for its settlement, requires discussions, transactions or negotiations and movements from hard-line positions towards flexibility and compromise. The settlement of conflicts also demands diplomacy, cajoling, and persuasive social pressures from different sources including various categories of kin. It involves dialogue, collective bargaining, and negotiated settlement (Otite, et al 1999).

Several steps are taken to remove conditions of conflict. These include peace building meetings or workshops, arbitration and reconciliation, counselling and facilitation. The parties involved in conflicts may resort to the courts to settle their grievance (Otite, et al 1999).

Peace packs can also be introduced and enforced by warring communities either by themselves or through the efforts of dispute brokers, according to our indigenous ways of dispute settlement. In this case leaders of the two parties to the conflict, for example over the ownership of a pond or farmland, may swear at the altar or shrine of a given deity. They could undertake blood pack by pricking their hands to let off some drops of blood on the altar, and offer sacrifice with a fowl or goat, together with kola nuts which all the parties involved consume openly. It has also been the practice in recent years in Nigeria that delegations of prominent members of the ethnic groups, and traditional rulers help in resolving conflicts. Usually, a combination of these approaches is used to reach a negotiated settlement, and to transform or manage conflicts in Nigeria, for example between Ife and Modakeke people of Osun State, Tiv and Jukun, Chamba and Kuteb of Taraba State, Aguleri and Umuleri communities in Anambra State and communities in conflict over farmlands in the Mangu-Bokkos area of Plateau State (Otite, 2000).

Africans have their indigenous dynamic ways of settling disputes and resolving conflicts. An important aspect of dispute and conflict settlement is dialogue. Talking, negotiating, clapping, humour, and even shouting are social therapies in conflict resolution. They can be described as curative social medicine in conflict resolution. And when parties in conflict decide to take their case to the indigenous courts, the emphasis of judges-elders is not on punishment or imprisonment. Emphasis is placed on objective discovery of the truth, followed by recompensation, restitution, and reconciliation. The focus is on a restoration of harmony and consensus, while realizing the frequent occurrence of conflicts in the family, ward, town, or between sections of a polity or kingdom (Otite, et al 2006).

IV. CONCLUSION

Conflict resolution in Nigeria requires honest and capable leadership and good governance to reduce The Level Of Unemployment, Poverty, Oppression, Domination And Marginalisation, And Raise The Standards Of Living Of All The Nigerians.The legal, religious, educational and political systems should be strengthened and improved so that only genuine practitioners are retained and profiteers are pruned. The Anti-corruption Commission should work harder to fish out the corrupt in any profession, especially corrupt politicians who have started to pollute the body polity with their ill-gotten wealth. If the poor decide to campaign, vote and man all polling booths freely, a popular, capable, but not too wealthy candidate could defeat corrupt, unpopular money -bag.In Order To Check Conflicts Arising From Artificial And Arbitrary Boundaries, Genuine Demands For Mergers And Reunion With Kith And Kin, Determined Through Popular Opinion, Referendum Or Boundary Commissions, Should Be Effected Without Undue Delay.Conflicts Are Natural Events And Despite Losses In Human And Material Resources Societies Have Never Ceased To Exist. Conflict May Thus Lead To The Promotion Of Happiness And Development In New Ways. Conflicts Leads To Change, For Good Or For Bad. The Only Regular Feature Of Society Is Change And Conflict Is A Regular Feature Of Social Reality. Consequently, Consensus And Cooperation Is A Positive Consequence Of The Resolution And Management Of Conflict.

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