



## Biafra at 50 and the Birth of Emergency Public Health

The evening news in the late 1960s projected images of two civil wars raging on opposite sides of the planet—in Vietnam and Nigeria. Although American intervention was a cause of the humanitarian catastrophe in Vietnam, American intervention was intended to prevent a humanitarian catastrophe in Nigeria. In Vietnam, the Johnson Administration sought to divide a people who had been

united for millennia by a common language, culture, and history, whereas our “One Nigeria Policy” sought to unite people who had been separated for millennia by disparate languages, traditions, and histories. For Vietnam, American public opinion sought to limit our involvement and shorten its duration; for Biafra, the American public advocated increased commitment and prolonged

involvement. Despite such contrasts, the two catastrophes had equivalent impacts in terms of mortality: at least one million and perhaps two million lives were lost in each.

### FAMINE AS A WEAPON

On May 30, 1967, Nigeria’s Eastern Region, the ethnically distinct Igbo heartland in the ethnically complex nation, declared its independence as the Republic of Biafra. Although independence failed after a bloody struggle to achieve it, the Biafran story deserves a place in our memory. Biafra and

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Vietnam were the first wars to be fought as much on television as on the battlefield—so much so, in the case of Biafra, that it has been claimed that it was the first war in which a combatant used famine among its people as a weapon against its enemy.

Vietnam is seared in our national memory, but Biafra is not. In a March 2018 editorial in *AJPH* entitled “Unforgotten: Biafra 50 Years Later,” Daniel Tarantola correctly notes that the French Red Cross provided an early and vital role in the Biafra relief effort, an initiative that eventually enlisted the support of 30 agencies from many countries, including the United States.<sup>1</sup> Biafra is not really “unforgotten,” but it has faded from Americans’ attention. This is not the case in Nigeria, where secessionist agitation has been renewed. The United States provided half of the commodities flown into Biafra, and as the end of the conflict neared, more than 90% of the commodities distributed were gifts from the American people. International partnerships often involved US affiliates, such as the American Friends Service Committee, Lutheran World Relief, Catholic Relief Services, CARE, Save the Children, the Salvation Army, the World Council of Churches, and other agencies. Working together, this partnership performed life-saving support for the relief action, which included personnel, aircraft, financial support, and medical supplies to both sides. As an agency with a history of humanitarian support for prisoners of war, the International Committee of the Red Cross’s complex coordination role in Nigeria–Biafra was unprecedented. Agencies that its

coordination supported were national Red Cross Societies and humanitarian non-governmental organizations that had no prior experience with providing international relief services.

Despite this humanitarian contribution, the Biafra relief action continues to be the subject of debate, with accounts that are either laudatory—noting that thousands of lives were saved at the time<sup>2</sup>—or fundamentally critical, claiming that the relief action prolonged the conflict by providing cover for Biafra’s clandestine arms importation activities.<sup>3</sup>

## ERRORS, CONTRADICTIONS, AND CONFUSION

Neither perspective is correct. Although many lives were saved, seldom-noted strategic errors, contradictions, and operational confusion were also part of the humanitarian effort. Initiators of the airlift were Irish priests who aligned their concern for their parishioners with the logistics capabilities of arms smugglers. To some observers, this alliance provided logistics cover that enabled the Biafran military to import arms that prolonged the conflict and thus added to Biafran suffering. But soon after the launching of the airlift, its internationalization led to the participation of the International Committee of the Red Cross and affiliated societies, such as the French and Swedish Red Cross. Their participation had the immediate effect of separating the airlift from any connection with Biafran military operations whatsoever. The

continuation of the airlift was both clandestine and humanitarian, however. To the Nigerian government, this was an act of war. By directing its air force and military to attack the relief action, Nigeria demonstrated to those of us who were involved that we were not providing cover for anyone. The airlift was a target, not anyone’s cover.

No one knows precisely how many people may have died in the conflict, but the most vulnerable were not its soldiers but rather Biafra’s children and elderly. Nor does anyone know how many people were cared for by the relief action or how many lives were saved. But there is little doubt that Biafra was a catastrophe of unprecedented proportions. Wars have followed in the Congo, Sudan, the Lake Region of East Africa, Côte d’Ivoire, Liberia, Sierra Leone, and Somalia, but Biafra retains its position in this tragic history as the most catastrophic conflict ever to have occurred in sub-Saharan Africa.

## EMERGENCY PUBLIC HEALTH

Important lessons emerged from the Biafra experience. The new discipline of emergency public health was an outcome of Biafra, generating expertise that has contributed to managing responses to complex emergencies around the world. Immediately after Biafra, several of its experts transferred to Bangladesh, where Biafra’s screening, triage, and clinical innovations could be redeployed for another complex emergency.

Volumes have been written about political lessons from the Biafra relief action experience, although scholarly discourse often misses points that were of critical significance to relief action participants. Contextual experience is inadequately documented in official archives of complex emergencies, a lesson from Biafra that should be addressed by all such responses in the future. Without such documentation to guide de-liberations, analysts of the archival record can plausibly conclude that the airlift prolonged Biafra’s political survival and therefore extended the suffering of the Igbo people. But because the full force of the Nigerian military was directed at bringing our work to a violent conclusion, the relief action could not have prolonged the war. To those of us who witnessed the conflict, the political commitment to Biafra’s survival was sustainable despite the military setbacks in 1968. Biafran public support for continuing to fight was universal and robust, with or without the relief action.

By 1969, however, the situation had changed. Nigeria’s army in 1967 was small, poorly led, and dangerous when unleashed at the community level. Prolonging Biafra’s existence to 1969 had profound survival effects. By mid-1969, fundamental leadership changes had taken place that enabled the conflict to end without genocide. Although the new Nigerian commander, Col. Olusegun Obasanjo, had acquired a formidable array of artillery to deploy for the final assault, he chose not to use this might and ordered instead a foot soldier invasion. This worked because Biafra had already given up, its public and army realizing

that sustaining the war had become pointless given Nigeria's emerging capacity to impose discipline on its troops. If this unopposed invasion had happened a year earlier, however, with Obasanjo's predecessor in command, the genocidal fears of Biafrans would have been realized.

## HUMANITARIAN EFFORT

In any case, ending the war did not end the suffering. Neither the relief action nor the Nigerian government had adequately planned for Biafra's collapse. Genocide never happened, but mass nutritional adversity continued long after the war was over. Public health practitioners have lessons to learn from the Biafra experience, beginning with the need to plan in advance for the end of conflict. But the most important lesson is the need to be skeptical of analyses that conclude that humanitarian effort does more harm than good. *AJPH*

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