

# **(883) Patterns Of Injuries Seen During Ethno-Religious Violence In Kano, Nigeria: Indices For Preventive Actions**

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## **PROBLEM**

Kano, a cosmopolitan city in northern Nigeria, has witnessed several violent conflicts which often erupt when there are ethnic and religious differences among the inhabitants. This study, the first of its kind in this part of Nigeria, is invaluable to the research community and science since it will produce an empirical evidence of a rather preventive phenomenon. The characteristic of these interpersonal and collective violent conflicts lies in the increase in injuries and fatalities seen in hospitals. Four years' review and a recent pilot survey using hospital registries reveal a trend that injuries are related to violent conflicts witnessed in Kano. Hopefully, the results will impact on policies towards peaceful resolution and thereby reduce morbidity and mortality from such violence.

## **OBJECTIVES**

To study the epidemiologic patterns of injuries seen during violent conflicts in Kano from hospital-based data.

## **METHOD**

Respectively, injury data, including a comprehensive profile of patients, were extracted from three major hospitals' registers in Kano, Nigeria with the use of standard survey questionnaires. A two month review that included a period of violent conflicts (April and May 2004) in Kano was completed as a pilot to a more elaborate study. The questionnaires had variables such age, sex and religion of patients. Also, documented were the mechanism of injury and event and location of where the injuries were sustained. Data collected from the three hospitals will be merged and analysed using Epi info 6®, analytical software produced by Centres for Disease Control and Prevention, Atlanta, USA. The previous four years' data will be compared with the result of our pilot survey.

## **RESULTS**

Results presented are preliminary from one of the study centres, National Orthopedic Hospital, Dala. Kano. 760 patients were seen at National Orthopaedic Hospital within the months of April and May 2004. Males were overrepresented in the total injuries in the period reviewed (419 to 241 females) as in previous years under review. 35 (males 28: females 7) were directly related to the three days' violent conflict. Age ranged from 5 years to 55 years. The mean age was 32.5. 37,1% (n=13) of the 35 patients were from gunshot wounds which affected only males. 51,2% (n=18) were injuries caused by blunt and sharp weapons including machetes, cutlasses and sticks. 11,4% (n=4) were injuries sustained in the process of escaping from the assailants. Seven females were injured. A breakdown showed that six females were assaulted with weapons while one sustained a road traffic injury. In the previous four years, road traffic injuries were more frequently seen. However, injuries from interpersonal and collective violence tends to be highest during violent conflicts such in 2002 and 2004.

## **CONCLUSION**

Injuries from blunt and sharp weapons were frequently seen followed by those from gunshots. Some patients sustained injuries while escaping from the scene of conflicts. Peculiarities of such injuries are the causality having correlation to ethno-religious violence, age group of patients and weaponry employed. Sharp and blunt weapons including firearms are used. The conditions that breeds misunderstanding among people of different religions and ethnicity should be managed early to prevent violent conflicts that lead to injuries in the short term. Government should put in place a cascade of peace-building strategies that will usher in a long-term solution