

WEST AFRICAN
RESEARCH
ASSOCIATION

Spring Newsletter 2015

This issue of the WARA newsletter focuses on public health in West Africa and the diaspora.

The recent death of Freddie Gray in Baltimore is yet another fatality in the epidemic that is killing men of African descent in the United States. Gray is one of many such cases that have plastered the headlines with increasing frequency over the last year. This is in no way a recent development—its trail goes back to the founding of this country—but new data collection methods like cell phones and social media have revealed to the larger society just how widespread it is. It's happening in cities and towns across the nation, and it's a regular occurrence. What's changed is that it's now in the websites and on the screens of the larger society—relentlessly, just as it is and has been in communities of color.

The sheer number of these deaths is overwhelming; their effects on communities is devastating. Epidemiologists study patterns of morbidity and mortality in order to identify root causes. There are very clear patterns here. These deaths have been at the hands of white police officers hired by and answerable to the larger society. These deaths are taking place among a very specific group of people: men of African descent. Those immediately responsible are the very public employees whose job is to insure the protection of individuals and communities—all individuals and all communities. The larger society to whom these officers are answerable is also implicated, yet there is very little recognition or outcry to demand accountability from its employees.

As an organization of scholars whose focus is on West Africa and the diaspora, we are concerned about this epidemic that is killing men of African descent. Whether they are part of the historic diaspora of African Americans, or more recent arrivals like Amadou Diallo, they are all African. And all of their lives matter.

—The Newsletter Committee

In this Issue: Public Health in West Africa



MPATAPO

"knot of pacification/reconciliation"

symbol of reconciliation, peacemaking and
pacification

Climate Change: A Quiet Public Health Crisis

by Tracy Bach, Vermont Law School

The fragility of public health systems in developing countries stands out during times of acute crisis. Rare, highly contagious, and deadly diseases like Ebola tax systems of health care delivery that are geared more toward disease prevention and detection. The statistics speak volumes: As of March 4, 2015, the U.S. Centers for Disease Control (CDC) reports 23,014 suspected, probable, and reported cases; 14,379 laboratory confirmed cases; and 9,840 confirmed deaths. Almost all of these Ebola cases occurred in West Africa, with most in Guinea, Liberia, and Sierra Leone, and a few in Mali, Nigeria, and Senegal.

The good news coming out of this public health crisis in West Africa is that the international community responded with human and technical resources. While we may debate the alacrity and effectiveness of the effort, the WHO and individual developed countries have played an important role in improving detection, treatment, and containment of Ebola. Now, after the most intense phase of the outbreak, global and national health authorities are reviewing and reflecting, to determine what went wrong in each nation's public health systems. A particular focus has been placed on public health worker readiness and protection, diagnostic resources, and the ability to mobilize sufficient treatment centers on short notice. Learning from this recent crisis is important for both human and economic health. The World Bank recently calculated Ebola's significant financial impact on the region: it cost more than half a billion dollars in 2014 alone, imposing additional budget demands of more than 6% of GDP in Liberia, more than 3% in Guinea, and more than 2.5% in Sierra Leone.

But what about the more subtle, slow onset public health impacts of climate change? How will atmospheric warming affect the health of people globally and in West Africa

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WARA Newsletter Moving to Electronic Format

Please note that as of fall 2015, the WARA Newsletter will be distributed in electronic format, the exception being institutional members, who will continue to receive hard copy. Please be sure to keep us updated on any changes in your email address so that you won't miss the newsletter.

For those members who would like to continue receiving hard copy, please contact the WARA office.

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This newsletter is published twice a year by the West African Research Association with the support of the African Studies Center and the College of Arts and Sciences at Boston University. It is distributed to all members and associates of WARA. Material for publication in upcoming newsletters should be submitted to the editor at the WARA email address above. Please send an electronic version of your submission. WARA has the right to reject items that do not comply with the goals and purposes of the organization and reserves the right to edit and/or modify any submissions for content, format or length. Opinions expressed in published articles, however, belong solely to the author(s).



Message From Board President



WARA/WARC presses on as the leading resource for the collaborative production and dissemination of knowledge about West Africa and the African Diaspora. Indeed, we do more important work in pursuit of our mission than ever. However, we continue to face financial challenges, and hence I once again urge all members to find ways to become more actively involved, particularly if you

have experience in and creative ideas for fundraising and the development of partnerships in the private sector. You need not be a board member to serve on or to advise any of our Standing Committees—Membership, Fellowship, Finance and Development, Program, and Newsletter. I remind you that donations to WARA, in addition to annual memberships, express your support for our important work and put us in a stronger position to gain support from external sources.

I am pleased to announce that our joint lecture series with BU African Studies Center has been renamed *Religion in West Africa: Cosmopolitanism, Faith Communities, and the Social Fabric*. This allows us to address the full range of religious communities in West Africa. In November, Shobana Shankar of Stonybrook University delivered the first lecture in the new series “‘Pagans’ in Northern Nigeria: Colonial Policies and the Death of Pluralism.” Last February, Board Member Ibra Sene presented “Youth, Religion, and Cultural Identity in the Era of Globalization: Hizbut Tarqiyya (Senegal).” The Program Committee welcomes suggestions for future speakers. Second, in a particularly exciting development we recently signed an agreement with the Smithsonian Institution’s National Museum of African American History and Culture to help manage the Gorée Island Project, which entails creating three-dimensional models of artifacts excavated from Gorée Island in collaboration the Archaeology Lab at UCAD and Matrix: The Center for the Digital Humanities and Social Sciences at Michigan State University.

We had productive and well-attended meetings at the ASA Annual Meeting in Indianapolis in November 2014. The Board of Directors met all day on November 19, and the General Membership Meeting followed by a very enjoyable reception was held on November 21. The Executive Committee is finalizing preparations for its midyear meeting on May 9. This year WARA Executive Director Jennifer Yanco will host us at Boston University. We have also begun planning for our all day, annual Board of Directors meeting on November 19—the day before the ASA Annual Meeting commences in San Diego.

WARA’s website is new and improved and, thanks to the efforts of Assistant Director Stephanie Guirand, the WARA Board Standing Committees have been particularly active. The

Newsletter Committee has been busy, as you will see in this dynamic issue. The Fellowship Committee just completed its most difficult work of the year—the selection of fellows from an ever-expanding pool of worthy applicants—and this year’s grantees are announced in the Newsletter. The Fellowship Committee has extended the Undergraduate Paper Competition 2015 deadline to May 31. Please encourage your students to participate. The Finance and Development Committee has continued to hold regular meetings.

I conclude by expressing my solidarity with the people of Nigeria, Cameroon, and Niger as they continue to be terrorized by Boko Haram. Although I am extremely hesitant to support military action, in this case I support the efforts of a five nation coalition (Nigeria, Niger, Benin, Chad, and Cameroon) to dissolve Boko Haram’s capacity to inflict violence on innocent people in the region.

-Scott M. Youngstedt

Congratulations to Dr. Abel Djassi Amado!



Abel Djassi Amado now holds a Ph.D. in Political Science from Boston University. His dissertation, which he defended on April 9, 2015, deals with language policy and the quality of democracy in West Africa and in particular, explores the ways in which post-colonial language policy in Cabo Verde hinders people’s participation in the political arena.

Abel is a lifetime member of WARA, and has played key roles in a number of WARA’s programs. He was WARA’s graduate assistant from 2008 to 2011 and worked closely on the West African Peace Initiative. He has since continued to contribute to WARA in various ways and has served as moderator and panelist in local programs in the Boston area.

Please join us in congratulating Dr. Amado and wishing him all the very best.

News From WARA and WARC Headquarters

WARC Director



The 2015 Spring Semester was very eventful at the West African Research Center (WARC) in Dakar. This is primarily due to the celebrations of Black History Month in February.

Dr. Jennifer Yanco, the WARC Director, also visited in February to attend the seminar held at WARC for the country coordinators of the Library of Congress West Africa

Acquisitions Project. Indeed, the project is being implemented in 11 West African countries and the national coordinators, after the launch of the project in 2011, needed to meet to exchange experiences and to be updated with new developments and policies relating to the implementation of the initiative. Dr. Jennifer Yanco came to Dakar to work closely with them and the general coordinator, Mr. Atoumane Mbaye.

More than ever before, the celebrations of Black History Month featured a diversified portfolio of events: lectures, film screening, discussions, and book events, among other things. As part of the celebrations, the autobiography of the celebrated piano player Randy Weston (*Randy Weston African Rhythms - Autobiographie*, Présence Africaine, 2014) was held at WARC in collaboration with the famous Pan-African publishing house Présence Africaine.

Still for Black History Month, the US embassy invited a guest lecturer whose presentation focused on civic movements and political engagement. The event was co-presided by the new US Ambassador in Dakar, His Excellency James Zumwalt and the WARC Director, Professor Ousmane Sene.

Other events involving many scholars and students from University Cheikh Anta Diop were staged at WARC in collaboration with the new Senegalese American Studies Association (SASA) grouping scholars and graduate students from Senegalese institutions of higher education such as University Cheikh Anta Diop.

WARC also collaborated with another association, the Dakar-Gorée Jazz Festival, to feature talks and live jazz performances at venues such as the Douda Seck Cultural Center in Dakar.

Meanwhile, WARC is regularly and closely working with its partners in a Consortium set up in Dakar to launch and implement President Obama's Young African Leaders' Initiative (YALI) in 16 African countries and is also busy promoting and developing new partnerships.

We are pleased to be working with Professor Ibrahima Thiaw and with the National Museum of African American History and Culture on new research projects linking West Africa and the diaspora.

—Ousmane Sène

WARA Director



In February, I had the good fortune to travel to WARC for a meeting of the country representatives (bibreps) from ten of the eleven West African countries (the eleventh, from Sierra Leone, was not able to attend due to travel restrictions occasioned by the Ebola epidemic) participating in the Library of Congress West African Acquisitions Project. These same bibreps also do the collecting for the new collaborative acquisitions

project that we are piloting this year with four WARA member university libraries. It had been four years since the group first met in 2011, at the outset of the LOC project, so it was a welcome reunion and a chance to take stock, review procedures and find ways of improving the project. I had been at the 2011 meeting, as well, and it was a treat to see everyone after all this time and to take note of the excellent work they are doing.

Since it was February, in addition to the various book signings (I believe there were three during my very short stay alone), there were also activities commemorating Black History Month—I was there for a screening of the film *Glory* followed by a discussion organized by the Senegalese American Studies Association. I was also able to give a talk on my book *Misremembering Dr. King* and once again was struck by how much more Senegalese university students know about Dr. King than their peers here in the US.

My visit coincided with that of Dr. Deborah Mack of the new Smithsonian National Museum of African American History & Culture, with whom we are partnering on the African Slave Wrecks Project. This project headed up by Professor Ibrahima Thiaw, is training Senegalese grad students in underwater archeology with the objective of excavating wrecks of slave ships off the coast of Goree Island. The project is a collaboration of NMAAHC, UCAD, and WARA/WARC. During our stay, WARC hosted a lunch with Robert Post, the Public Affairs Officer at the embassy. Our meeting reassured us of our continuing excellent relations with the PAS.

Here in the US, thanks to Stephanie's brilliant organizing, we had a wonderful series of events (co-sponsored with Africans in Boston) to commemorate Black History Month; a photography exhibit, "The Other Side of the Lens" featuring photographs by West Africans taken in the US and photographs by people from the African diaspora, taken in West Africa. The show was hung in the Strand Theatre Boston and at the YWCA in Cambridge. An opening panel addressed the question, "Who is African?" and a closing panel, "What is African?" The videos of both panels can be accessed via the WARA website. We were delighted and honored to be a recipient of an award from the Boston Cultural Council in support of these events.

Message From Board Treasurer

The traveling exhibit, *The Paintings of Yelimane Fall*, is ready to start its traveling; the shipping crates for the exhibit should be ready to go any day now. It is a stunning exhibit and I would like to acknowledge the curators, Taylor Smith and Cynthia Becker; and Anya Bounar, who has done so much of the legwork in getting the word out. And of course: Yelimane Fall, whose paintings provide such a compelling a window on West Africa, Islam, and contemporary esthetics.

Looking forward to the fall and to the ASA, mark your calendars now for the WARA membership meeting and reception, which will be held on the evening of Friday, November 20. The WARA panel will be on Niger and promises to be an excellent exploration of current developments there.

I would like to take this opportunity to thank the Bureau of Educational and Cultural Affairs at the US State Department for their support of our fellowship program and operations, the US Department of Education for its Title VI support of WARC, the Boston Cultural Council, The Boston Foundation, and of course, the Council of American Overseas Research Centers (CAORC) – our tireless advocate and close family of colleagues.

—Jennifer J Yanco

TASTES OF WEST AFRICA: A culinary sojourn in Senegal

This coming February join the West African Research Association on an unforgettable culinary sojourn in Senegal, West Africa. Relax, enjoy the sunshine, and learn about this important world region through its cuisine.

In this hands-on, two week adventure, you'll learn to prepare a range of dishes, each representative of a different West African culinary tradition. You'll come home with a whole new repertoire of succulent dishes that will delight your friends and family, and a store of wonderful memories of Senegal!

Help us spread the word. Tell your friends! For more information and for brochures, contact the WARA office.



It is my pleasure to join the WARA Board as Treasurer. As a passionate advocate for increased scholarly knowledge sharing and collaboration between scholars in Africa and the Western world, I was instantly drawn to volunteer in any capacity I could towards the work of WARA. I started by lending my legal drafting knowledge to reviewing WARA's Bylaws, and now serving as Board treasurer. I look forward to making good use of my past nonprofit management experience in this position. I am grateful to my predecessor, Jemadari Kamara, for putting me through the important processes involved in being treasurer.

With a new fiscal year upon us, the Finance Committee is resolute in our determination to continue maintaining transparent financial records. We are also concluding plans for our annual Committee retreat to discuss and implement the necessary measures to keep WARA's operations afloat.

We are already busy planning for our Fourth Annual Giving Common Challenge, which will take place at the beginning of October. As we continue to seek out ways of funding our activities and programs, I urge each of you to put WARA on your annual giving list and to make a generous gift during the Challenge this year. More and more, the survival and growth of WARA's programs (one of which is WARC) depend on the generosity and support of each and every one of our members. A robust investment by members also sends a strong positive signal to potential funders.

WARA continues to seek out partnerships and other opportunities to attract support for our work including attracting grants for our scholars. We are excited about the prospects of participating in the Boston Foundation's Giving Common Challenge every year. It is our hope that this year's participation will surpass last year's. Announcements and instructions for participating in the challenge will be communicated to all members as the time approaches. We are grateful to members who have remained committed to renewing their memberships continuously over the years. We also encourage members to support WARA by renewing their memberships in a timely manner.

Our focus on fundraising remains paramount for the Finance Committee. We are realizing success with a number of new collaboratives WARC is undertaking on behalf of WARA. As members of WARA, feel free to reach out to us if you come across initiatives that may be of interest to WARA. Spread the word about WARA. We would love to increase our member base.

—Cynthia Ezeani

Spotlight on WARA Lifetime Members

This section of the West African Research Association newsletter is dedicated to WARA Lifetime members. The WARA Membership Committee has decided to honor Professor Jeanne Tougara.

JEANNE TOUNGARA

Statement to WARA members



Professor Jeanne Tougara teaches courses on West Africa, the African Diaspora and Women in Africa. Her research interests include West African intellectual history, precolonial state formation, political culture and democratization within francophone Africa with particular emphasis on Côte d'Ivoire. She has carried out archival research in France, Senegal, Mali and Côte d'Ivoire. She is the recipient of study and research awards from the West African Research Association, Ford

Foundation Doctoral Fellowship, National Endowment for the Humanities, FulbrightHayes Program, Ministry of National Education of Côte d'Ivoire, and Carter G. Woodson Institute. Her articles on women, family, education, economy and politics have appeared in several journals and edited volumes.

As a young scholar with interests that extended far beyond my immediate circle of family and friends, WARA helped launch my career with a travel grant for research in northwestern Cote d'Ivoire. Later, serving as Secretary on the Board and editor of the newsletter, I returned the favor, helping to lay the foundation for a stable, internationally recognized association. I was impressed by the generosity of the growing WARA membership and grateful to Board members who supported the first conference hosted in 1997 in Senegal and then agreed to submit a proposal for WARA to win a \$250K award in collaboration with Michigan State University to train African researchers and librarians in interconnectivity and databases. WARA and WARC members are fully engaged and well positioned to offer cutting edge programs. Let the great work continue!

Jeanne Maddox Tougara, PhD
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Dr. Jeanne Maddox-Tougara with graduate students in History during the John Hope Franklin conference, Howard University, 2010.

Professor Tougara's publications include

"Song Lyrics as Pathways to Historical Interpretation in Northwestern Côte d'Ivoire: The Case of Kabasarana"
In Bellagama, Brown, Greene and Klein, eds., *Oral History Method*, Vol. I. Cambridge U Press (2013).

"The Legacy of John Hope Franklin, The Howard Years: A Symposium. Brochure." ISBN 978 0 692 00884 3 (2010).

"Empowerment of Women in Africa: Gender Equality and Women's Leadership," a white paper coauthored with Gwendolyn Mikell and Vivian Lowery Derryck. Sponsored by The British Embassy (Washington DC). Website:
www.hoppityhousedesigns.com/client_files/africa_US_whitepaper_v3.pdf (2008).

West Africa and the 2014 Ebola Epidemic: A Brief Retrospective



Disinfecting Ebola workers. [Flickr/EC/ECHO/Jean-Louis Mosser]

In spring 2014, healthcare workers in Guinea and Liberia began to notice that patients were exhibiting symptoms of a hemorrhagic fever that seemed different than those that typically existed in the sub-region. This wasn't Marburg, Lassa, yellow fever, or even an errant case of Dengue fever. Medical professionals would soon learn that the filovirus causing this hemorrhagic illness was in fact Ebola. What we would later learn is that Ebola actually first appeared in West Africa, Guinea specifically, in December 2013. It was March, however, before medical personnel identified the origin. At that point, the numbers were still relatively low but starting to rise. The case of Ebola in West Africa provides a valuable example of what can happen when the virus spreads in countries with dense urban centers, high rates of migration, underdeveloped medical facilities, and slow public health response.

As an Africanist and historian of medicine, it was evident that if Ebola was not contained in Guinea, Liberia, and Sierra Leone in the spring that it had the propensity to spread within the West African sub-region, beyond the sub-region, and outside of the African continent. Past outbreaks have mostly been isolated to the Great Lakes Region and Central Africa and often in less populous areas. This epidemic started at the juncture of Guinea, Liberia, and Sierra Leone where in some cases families, merchants, and laborers regularly crossed borders. In addition, much movement existed not only between these three countries but also throughout the sub-region and to places outside the continent. Although the numbers seemed to improve in May, by late July the numbers began to surge at an unrivaled pace that would continue for months. By the first week of August, 1,975 infections were recorded along with 1,000 deaths. By September, more than 6,500 people had been infected, and in late October, the numbers surpassed 10,000. By mid-December, 18,498 people had been infected.

Between October and December, a greater global effort to help contain the West African Ebola epidemic was building. A major impetus for this intervention was Ebola's spread beyond the three initial countries and into Nigeria, Spain, Senegal, and the United States, among others.¹ Ebola's spread to the West made Africa seem less inconsequential in global health and forced the

world to pay attention for a moment.² Of course, staff at private and public facilities and locally based health NGOs, such as the Last Mile and Well-body-Alliance, were already responding to the spread of Ebola in the three hardest hit countries. However, these countries had public health inequities that could not absorb this growing crisis without an influx of supplies, personnel, and resources. In addition, as in previous outbreaks, Doctors Without Borders Médecins Sans Frontières (MSF) was there from the outset. However, the World Health Organization (WHO) and the Center for Disease Control (CDC) responded more slowly and only became more active by late summer. By November, Partners in Health, the African Union, private philanthropists, and African and Western governments joined the fray by offering monetary and sometimes human resources. By this time, the global community seemed to be paying close attention and that the Ebola epidemic in Guinea, Sierra Leone, and Liberia would not be allowed to become endemic (as some had predicted). Greater efforts were made to contain it.

As someone who teaches and writes on global health and travels frequently to West Africa, I was frustrated by the slow response to the 2014 Ebola epidemic. As of February 2015, it seems highly probable that if Liberia maintains its current efforts, it will be Ebola free very soon. The numbers of infections in Sierra Leone and Guinea have also greatly decreased but not to the single digits that Liberia now records. It is impossible to predict when West Africa will again be Ebola free, but hopefully, it will occur before midyear. A perfect storm of location, population density, and movement, coupled with weak public health infrastructure and tepid lead response led to an Ebola epidemic that at more than 22,000 infections surpasses all previous infections combined. One hopes that this will be a historical anomaly and that we will never witness this high rate of Ebola infections or the length of transmission again.



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¹ Better health infrastructure coupled with systematic contact tracing allowed Senegal and Nigeria to quickly respond, contain, and eliminate Ebola in comparison to Guinea, Liberia, and Sierra Leone.

² Donna Patterson, *The Huffington Post*, September 9, 2014, http://www.huffingtonpost.com/donnaapatterson/banningflightsisnotth_b_5791900.html

Oil and Health: Framing Connections in Chad

Since 2000, when construction on the Chad Cameroon Petroleum Development and Pipeline Project began, I've followed the project from *canton* Miandoum, a collection of 48 villages that sit atop or around the edges of the Miandoum oilfield in Chad's Doba basin region. I was interested in studying the project because the World Bank described it as a poverty reduction project for Chad and as a 'model' for other extractive industry projects on the continent. The project was a joint venture of ExxonMobil (which represented a consortium of three global oil companies), the World Bank, and the governments of Chad and Cameroon. At the time, it was the largest construction project on the African continent, and was expected to generate 1 billion barrels of oil and \$2 billion in revenues for Chad over 25 to 30 years.

The extractive industries drive foreign direct investment in Africa. Public concern about the social and environmental

located in rural regions where malaria is endemic. The project was expected to attract a large influx of job seekers, most of them young men, and heavy machinery, equipment, and materials had to be trucked in over unpaved roads that were in poor condition. These threats were the foci of the consortium's worker and community health programs. The consortium provided updates on its efforts to mitigate these health threats in quarterly project progress reports from which a particular – and partial – story of oil and health emerges.

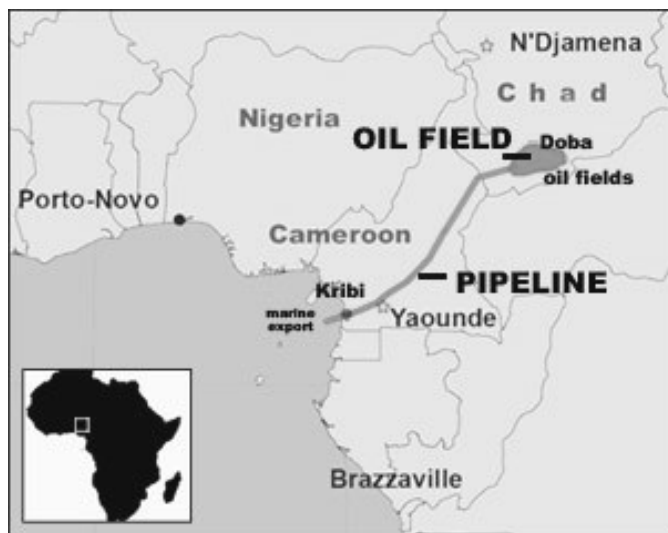
The consortium implemented a malaria control program focused on expatriate ("nonimmune") employees living in its camps. Employees were randomly tested for medication compliance and their living quarters were sprayed with insecticide. Prevention measures brought about an impressive reduction in the infection rate, which dropped from 11.4 cases per 200,000 work hours in 2001 to zero for the first half of 2011. Yet it is unclear how these efforts impacted Chadian ("semiimmune") workers or local communities. The consortium registered roughly 5,000 medical visits per quarter, though the number of visits for malaria was not systematically reported. The consortium provided support to national malaria prevention campaigns, but there are no data to indicate whether these campaigns were effective.

The consortium tracked STDs among workers treated in its clinic. The consortium also took up periodic screening and treatment programs in villages adjacent to its work camps, especially in the squatter settlement across the road from the main base camp. Nearly all STD cases were diagnosed in local employees. Unlike malaria, STD infection rates were not published. The consortium provided only the number of cases treated per quarter, which ranged widely – from 20 to over 200. But the size of the workforce also varied dramatically over time, so it is impossible to determine whether disease rates increased or decreased, or what effect the consortium's mitigation measures had on STD risk.

Finally, the consortium adopted Occupational Safety and Health Administration (OSHA) standards for workplace safety reporting, even though it was operating outside the US. The consortium tracked accidents and injuries from fatalities to lost time events to cases requiring medical treatment. It used the tallies to calculate the Recordable Incident Rate, a broad measure of industrial safety performance, and the Lost Time Incident Rate, a measure of the number of incidents resulting in lost workdays per 200,000 working hours. Both are key safety performance measures for the oil and gas industry. The adoption of OSHA standards limited the consortium's obligation to report the deaths or injuries of nonworker residents, since the OSHA standard covers only workers at the workplace. The consortium reported Recordable Incident Rates that were well below the US industry benchmark of 0.5. But these measures captured only a fraction of the fatalities and injuries associated with the project, and they obscured the risks to residents who died in greater numbers than workers in

road traffic accidents as well as from accidental drowning at worksites that were intermingled with their fields.

Continued on next page



impacts of the fossil fuel industry has increased scrutiny of business and mining operations. Global oil companies have responded by embracing a broad array of social and environmental risk mitigation policies based on global norms and standards, including norms and standards for waste management, oil spill response, worker health and safety, cultural property, compensation, and involuntary resettlement. In Chad, these policies constituted one leg of 'the Chad model.' Public health lies at the intersection of these risk mitigation policies, but is challenging to measure or track. There were no reliable public health data for the oilfield region, and few people used the formal health system, which had suffered from decades of government retrenchment. Similar conditions prevail in many of the newest African petrostates. In this essay, I want to show how, in the absence of functioning public health systems, corporations and corporate ethics are shaping our understanding of the links between oil and health – and shaping them in particular ways.

In Chad, the World Bank mandated a preproject health impact assessment that suggested three major threats to health posed by the project: malaria, sexually transmitted diseases (STDs), and road traffic accidents (Jobin, 2003). The project was

Public Health in West Africa

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The consortium produced data about worker health for reasons that had to do with reputation management more than the promotion of community or public health. Successful public health campaigns, such as malaria prevention among expatriate workers, were carefully recorded and published, while other campaigns, such as STD prevention, among workers, were not, making it impossible to discern the impacts of the project on STD rates or on malaria prevention beyond the expatriate workforce. The emphasis on the Recordable and Lost Time Incident Rates and the adoption of OSHA standards also framed problems in ways that showcased success and obscured failure by emphasizing safety 'inside the fence,' especially the safety of expatriate workers, and limiting the consortium's liability for the health risks of the project 'outside the fence,' on local workers and populations.



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Archives of the Republic of Niger (AREN)



On April 3, 2015, His Excellency, Mahamadou Issoufou, President of the Republic of Niger, made a formal visit to Boston to inaugurate the Archives of the Republic of Niger at Boston University. WARA is pleased to be part of this initiative and to have been involved in the planning of the inaugural ceremonies which drew a large crowd of Nigeriens—both native and adoptive—from around the United States.

Unlike many archival collections, AREN is intended to be a growing archive. We are actively seeking contributors and selectively building the archive. To date, 17 individuals have expressed an interest in the archive and of that number, 9 have contributed materials. As of March 2015, the archive comprised over 1,100 objects, both physical and digital. These include: approximately 800 digital photographs, 320 books and other printed materials, such as correspondence and ephemera, and 19 maps.

Print materials range from government publications promoting literacy to dissertations; from folklore and transcribed oral poetry to handbooks for new Peace Corps volunteers just arriving in Niger. The print collection is housed in the African Studies Library Reading Room and is currently being processed.

2015 WARA Grantees

Post Doctoral Fellows

- *Catherine Kelly* (Washington University of Saint Louis) for research in Senegal: "On Party Formation, Party Loyalty and Democracy in Senegal"
- *Stacey Vanderhurst* (Indiana University) for research in Nigeria: "Human Trafficking Interventions in Nigeria"
- *Matthew Thomann* (Columbia University) for research in Côte d'Ivoire: "Hierarchies of Suffering and Resilience: Travesti Experiences of Vulnerability and Exclusion in Abidjan, Côte d'Ivoire"

Pre-Doctoral Fellows

- *Justine Davis* (University of California, Berkeley) for research in Côte d'Ivoire "Partisanship Perceptions of Voter Education Providers in Côte d'Ivoire"
- *James Mizes* (University of California Berkeley) for research in Senegal: "Department of City and Regional Planning, on the Dakar Municipal Finance Program"
- *Elizabeth Gardiner* (The Ohio State University) for research in Burkina Faso: "Assessing the Role of Domestic Entrepreneurs in the Commodification of Communal Land in Burkina Faso"
- *Rebecca Wall* (Stanford University) for research in Senegal: "African History, on the history of river management projects in the Senegal River Nations"

Diaspora Intern

- *Ebonee Davis* (Morgan State University, Museum Studies and Historical Preservation Department) for an internship at the W.E.B. Dubois Library for the purpose of cleaning and the preserving of the W.E.B. Dubois Library Collection

WARC Library Fellow

- *Rhonda Jones* (University of North Carolina at Chapel Hill)

Residency Fellow

- *Yinka Odebode* (Port Harcourt University and University of Botswana), to work on advanced molecular techniques of plant biology at University of California, Riverside

The Ghana Ambulance Service (GAS)

The Ghana Ambulance Service (GAS) commenced active work in the year 2004 as an agency of the Ministry of Health of Ghana, with the cardinal goal of bridging a long standing gap in the health delivery system of Ghana. Its main objective is to help reduce the untimely deaths, post-incident complications and unnecessary suffering of victims of Road Traffic Accidents, (RTA), Medical and other Domestic Emergencies (DE) which occur across the length and breadth of Ghana.

The GAS started with Seven (7) pilot stations in 3 regions in 2004 and the number has since increased to 130 in all 10 regions of Ghana by the end of 2014. The number of personnel has also increased from 63 to 1600 over the same period.

Since its inception to the year 2013, the GAS has lifted and conveyed a total of 63,630 cases. No doubt GAS is making significant contribution in the health delivery system of Ghana. The number of lives that have been saved which otherwise would have been lost is significant.

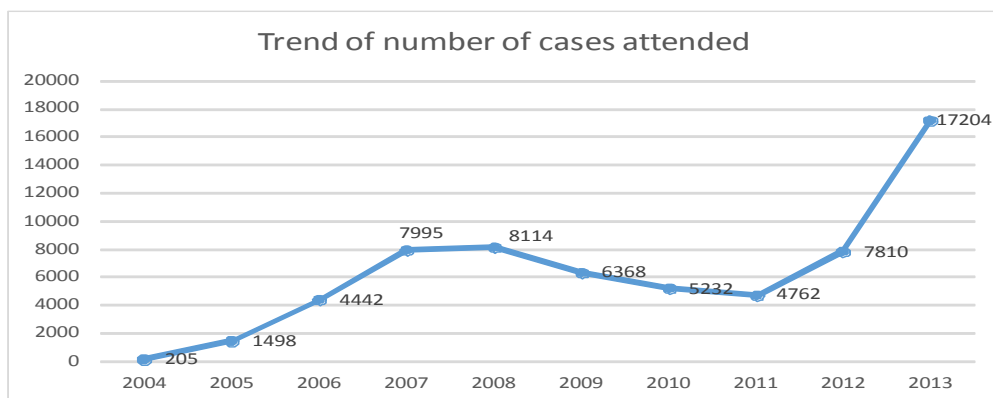
GAS continues to make significant progress in all fields with enhanced public interest. There is general demand by the people for the establishment of ambulance stations in their respective districts and stations.



A group of Emergency Medical Technicians in a graduation ceremony

All the performance indicators, both medical and transport show significant improvement as compared to previous years. For example, Case Response Time (CRT) improved from 17:14 mins in 2006 to 12:31 mins currently, whilst Case Handling Time reduced from 0:18:38 to 0:13:31. Over all cases handled have seen systematic increase from a total of 1,498 in 2005 through 4442 in 2006 to 7989 in 2007 and 17,204 in 2013.

Figure: Trend in the number of cases handled since 2004.



Conclusion:

The GAS is impacting positively on healthcare delivery in Ghana. It is steadily but gradually achieving the aim of bridging equity gaps in access to healthcare services across Ghana in order to avert mortalities.

Acknowledgement:

As the Chief Executive Officer (CEO) of the EMS system in Ghana, and as beneficiary of the WARA scholarship in 2010 that facilitated my visit to University of Florida in Jacksonville, I must admit that the experience and knowledge acquired at the Department of Emergency Medicine in Jacksonville, under the supervision of Dr. Elizabeth De Vos, has enhanced my capabilities to manage the GAS to achieve this success for Prehospital care in Ghana.



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Climate Change: A Quiet Public Health Crisis

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specifically? How will it require public health systems to adapt?

Last year, the World Health Organization (WHO) published a report assessing the human health impacts of climate change. Even assuming continued economic growth and progress on international health measures, it concluded that climate change will cause some 250,000 additional deaths each year between 2030 and 2050. This extra number of lost lives comes primarily from four main climate change impacts: food insecurity, which has a disproportionate effect on children (95,000 deaths due to childhood malnutrition); moving disease vectors, like mosquitos (60,000 deaths due to malaria); water scarcity and diminished quality (48,000 deaths due to diarrhea); and exposure to extreme heat, which primarily affects the elderly (38,000 deaths). WHO underscored the reality that the burden of climate change-induced diseases will fall mainly on children in developing countries.

Likewise, the Intergovernmental Panel on Climate Change (IPCC) predicts significant climate change induced health impacts globally and in West Africa specifically. The IPCC was founded in 1988 by the World Meteorological Organization (WMO) and United Nations Environmental Program (UNEP) to “provide the world with a clear scientific view on the current state of knowledge in climate change and its potential environmental and socioeconomic impacts.” Working under the IPCC’s auspices, more than 2,000 scientists from around the world review the most recent scientific, technical, and socioeconomic publications, and produce a report every five to seven years advising international policymakers on how both to mitigate and adapt to climate change. Its most recent report, the Fifth Assessment Report (AR5), concluded with a synthesis report that was published in late 2014. In its Summary for Policymakers, the AR5 notes that:

- Changing precipitation or melting snow and ice are affecting water resources in terms of quantity and quality;
- Global changes in the frequency and intensity of extreme daily temperatures (both highs and lows) has led to double the probability of heat waves in some locations;
- Increasing extreme precipitation and discharge in some catchment areas mean greater risk of flooding;
- Extreme sea levels, like those experienced during storm surges, have increased since 1970, mainly the result of rising sea levels; and
- Recent climate related extremes, like heat waves, droughts, floods, cyclones, and wildfires, point to significant vulnerability of humans and their ecosystems.

At the regional level, improved data collection as a result of the IPCC’s work in producing its first four assessment reports has led to more confident predictions of regional climate change impacts. For the African continent, water impacts include decreased precipitation and drought, along with coastal and internal flooding from extreme rainfall and sea level rise. Increasing temperatures are also predicted. Food insecurity is also a risk, due to climate induced droughts and wildfires.

Interestingly, some public health officials have even linked climate change with the recent Ebola outbreak. They link extreme weather, namely dry seasons followed by intense, heavy rainfalls, with an over production of fruit that attracts bats and apes. Eating together gives the disease an opportunity to jump between the species. Humans then contract the disease by eating or handling infected animals. Kris Murray, senior research scientist at EcoHealth Alliance, says that because climate change causes food insecurity, more people will turn to alternative food sources like bushmeat (including bats). Even though the origins of the recent Ebola outbreak are not yet known, we do know that almost half of past Ebola outbreaks have been directly linked to bushmeat consumption and handling, specifically bats. In addition, Murray notes that with warming temperatures, the habitat range of bats could expand, thereby increasing the potential for contact with humans.

The Lancet, a leading medical journal globally, predicts that climate change has the potential to be “the biggest global health threat of the 21st century.” It formed a committee with the University College of London to produce a report that outlines the major direct and indirect threats to global health from climate change: changing patterns of disease, water and food insecurity, vulnerable shelter and human settlements, extreme climatic events, and population migration. The report made it clear that “while vectorborne diseases will expand their reach and death tolls, the indirect effects of climate change on water, food security, and extreme climatic events are likely to have the biggest effect on global health.” It urged public health officials to frame climate change as a health issue, and to promote a new public health movement that brings together governments, international agencies, nongovernmental organizations, communities, and academics from many disciplines to promote adaptation to the effects of climate change on health.

The Lancet Commission names five key areas for policy response: informational, poverty and equity related, technological, sociopolitical, and institutional. First, it calls for strengthening informational and research capacity within developing countries in part because “weak capacity for research to inform adaptation in poor countries is likely to deepen the social inequality in relation to health.” Second, it urges investment in the Millennium Development Goals, which will reduce vulnerability of poor populations that are more exposed to climate changes and have reduced adaptive capacity. This goal has been picked up by others: the Commission on Climate Change and Development has

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Ebola and Accusation: Stigma and Blame Drive Sierra Leone's Ebola epidemic



Guards Rosanda

In March 2015, Sierra Leone marked an unhappy anniversary: one year since the first suspected Ebola cases emerged within its borders. Since the Ebola epidemic began in Sierra Leone, there have been 12,138 reported Ebola cases and 3,831 deaths.

In a new role as Response and Resilience Team Anthropologist for Oxfam GB, I set out to identify key social factors that discouraged Sierra Leoneans from participating in the broader Ebola response. I quickly found that community level factors could not be separated from a key structural issue in the response itself: stigmatization and blame of affected families and communities that hindered effective community engagement in the response.

Stigmatization of affected families and communities is ingrained in the tone of the Ebola response in Sierra Leone. Organized by the Ministry of Defence, the government response has taken a top-down, military approach to tackling the outbreak, with most of the weight placed on punitive by-laws, quarantines, and surveillance—what anthropologist Cheikh Niang termed “the logic of war.” By-laws impose heavy fines and prison terms for families who “hide” sick family members, conduct “secret” burials, or host “strangers.” This strategy redirects government and international actors’ responsibility for a belated and messy response, places blame squarely on affected families and communities, and characterizes the sick as ignorant, untrustworthy, and transgressive. At the international level, respected media outlets attribute ongoing cases to “hostile” communities, “confused beliefs,” and “traditional rituals” (see NYT Editorial “Getting Ebola to Zero”), rather than the lack of communication, inadequate health systems, and counter-productive quarantine policies that we observed in this study. These narratives focusing on purported shortcomings of populations work to justify the degrading treatment of affected families through implicit claims that they brought the virus on themselves.

When we asked why families and communities “resist” Ebola prevention and treatment messages, however, a different picture emerges, one that reveals a disregard for basic rights and dignity driven by the stigmatizing tone of the response. For example, respondents raised legitimate concerns about the confidentiality of personal information taken by surveillance teams. Others described ambulance teams that were “ruthless”

and treated them “like criminals,” or witnessed “safe and dignified” burials in which burial teams, fearing infection themselves, hastily removed and dumped a relative’s body into the ground. Security forces have imposed months-long quarantines on affected families without ensuring access to water, food, or latrines. As a result, some families work to avoid quarantine: concealing illnesses, creating false copies of the certificates given to patients who test negative for Ebola, or fleeing their homes when they become symptomatic.

The negative impact of these policies on women has been documented: rising rates of gender-based violence and rape; quarantine guards coercing women and girls to exchange sex for access to supplies; pregnant women placed under quarantine and left to give birth without medical support; increased poverty and food insecurity due to loss of access to farms and trading; and so forth. These policies increase pressures on women’s caregiving role within the household and contribute to the cycles of infection, illness, and blame.

The impact of these policies on men has received less attention, as most assessments of “gender” focus exclusively on women. Yet men also described experiences of profound loss, grief, lack of freedom, isolation, and demoralization. Male respondents reported that young men feel angry about the consequences of Ebola. They perceive the flow of “Ebola money” and power, neither of which reached them in time to save loved ones. Frustration, fear, and distrust drive sporadic violence: for example, young men in Bombali who threw stones at a burial team for mishandling a body. Police jailed the parents in order to force the young men to come forward, whereupon a court sentenced them to 1.5 years in prison.

Negative perceptions and moments of violence easily feed into narratives of “hostile” and “resistant” communities. Yet this “resistance” is a reaction to Niang’s “logic of war,” in which it appears that the fight is against one’s own people, rather than the virus. “They have come with guns to threaten us, and when you are diagnosed to have Ebola, they arrest you. That alone makes you to be depressed, and not for the disease but of the forces surrounding the patient. The entire family is looked at negatively.” This approach

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Continued from previous page



Contact tracers

increases pressures on affected families and ultimately produces counter-productive responses that contribute to the epidemic.

We also cannot place blame on Sierra Leone's Ebola response without fully acknowledging the extent to which broader global structures of impoverishment and inequality have fueled the Ebola epidemic. "The three countries most afflicted by Ebola are those with some of the lowest public investment in healthcare and public health in Africa," noted Paul Farmer. "They have been wracked by war, and by extractive industries, which have never failed to turn a profit." Efforts to contain the epidemic continue to be hampered by the lack of "staff, stuff, space and systems" that Farmer observed more than six months ago. Wealthy states in the global North are implicated, as well. Before Ebola even emerged, Sierra Leone's ability to meet basic healthcare needs had been severely eroded by policies promoting disinvestment in public health and other social services. Any critique of its response must be considered within this context.



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Melissa Minor Peters joined Oxfam in 2014 in a new role as Resilience and Response Team Anthropologist, and worked with Oxfam's Ebola response in Liberia and Sierra Leone. She holds a PhD in Anthropology and a Masters in Public Health from Northwestern University. Her previous work focused on the daily lives of transgender and gender nonconforming people under Uganda's Anti-Homosexuality Bill, as well as the barriers to HIV/AIDS prevention and treatment for transgender Ugandans.

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requested donor countries to add \$12 billion to their total spending on foreign aid, targeted to vulnerable low-income countries, especially in Africa and small island states, for technical support, institutional coordination, and climate warning systems. Third, the Lancet Commission sees the need for more technological development, for example to improve agricultural practices, water storage and treatment, and building construction and land use. Fourth, on the sociopolitical front, it encourages low carbon living, pointing out the individual health co-benefits. Fifth, calling out existing "fragmentation and too many institutional turf wars," it calls for improved coordination and accountability of global governance from the local to international levels of human organization.

Reflecting on the quiet public health crisis that climate change portends for West Africa, we can see lessons from the Ebola outbreak of what not to do. The Lancet Commission provides a clear policy path that learns from them. Political will to embark on it is needed. Hopefully, the sense of vulnerability that countries felt when Ebola jumped continents has provoked greater awareness of how mutually dependent each country's public health truly is. Just as the atmosphere forms part of the global commons, making atmospheric warming a "common concern of mankind," so too does human health in our climate changed world.



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Thanking our Volunteers

WARA has been very fortunate to have some wonderful volunteers this year. In particular we would like to thank:

Meghan Davis, for her extremely professional work organizing volunteers for the various components of the 2014 Giving Common and for kindly agreeing to offer her support again for the 2015 Challenge.

Anya Bounar, for all of her work doing outreach to galleries and institutions for the Yelimane Fall traveling exhibit.

Lauren Bolles, who will be working with WARA this summer in preparation for a major fundraising event next April.

Susana Castillo Rodriguez, for her excellent work on the newsletter committee.

Reimagining traditional textiles for health education



Women's group at the GAIA clinic in Sikoro, Bamako, Mali provide feedback on textile design prototypes

The history of wax print fabric in West Africa is a long and fascinating tale of power, trade, and cultural exchange through pattern and design. Emerging from a nebulous range of national and international motivations, these patterns have swept the African Market for over a hundred years. Often used as a support for political messages or as a symbol of social economic status, this fabric is never silent: it always proclaims a message loud and clear.

While numerous popular patterns have been in print for up to 50 years, such as the Dutch Wax company Vlisco's Alphabet print, other patterns, called commemorative or occasional prints, are developed annually for specific events. From local elections to holidays such as International Women's Day and World AIDS Day, commemorative prints state their political agenda clearly with a plethora of slogans. For the World AIDS Day 2013 print created in Bamako, the slogan reads, *Objectif Zéro au Mali: zéro SIDA, zéro discrimination, zéro conflit*, "Target Zero in Mali: zero AIDS, discrimination, zero conflict", artfully combining goals of an HIV free world with a deeply felt desire for peace and stability in a country suffering from prolonged conflict. In the office of the Malian Textile Company, COMATEX, sorting through overflowing files of patterns is a journey back through years of campaigns. From guinea worm eradication to ending female excision; each pattern proclaims its optimistic slogans in an infinite repeat.

Subtler than these campaign designs are wax prints that illustrate a well-known local proverb. When worn, these patterns speak without words directly to a community culturally primed to receive cloth messages. In a pattern

specifically for pregnant women, a tiny human fetus is barely visible among the abstract curves of the design. "Death spoils the family" is the Ghanaian proverb linked to a dark red print that shows a skull. Dressing in these patterns accomplishes unspoken social cues that affect the way the wearer is treated in public, initiating congratulations or condolences without the burden of an explanation.

How to access this culture of cloth messaging has been the goal of GAIA Vaccine Foundation, a non-profit working in the realm of public health in Bamako, Mali. GAIA plans to harness this messaging system not only to spread slogans about health, but also to disseminate visual education about an idea that is difficult to communicate. GAIA's ambition is to make visible the world of viruses, in particular the way that the human papillomavirus, HPV, can lead to the development of cervical cancer. This message is essential for West Africa, especially in the country of Mali where 44 out of every 100,000 women develop cervical cancer and 32 of those women die each year. The main problem, lack of awareness about the relative availability and affordability of cervical cancer screening methods, is a challenge that faces local health practitioners. With the eventual possibility of the HPV vaccine in Mali, probable resistance to vaccination of young girls is another issue that must be addressed in advance. The idea of GAIA's founder, Dr. Annie De Groot, was to address these issues in cloth.

As a student in textile design, I joined the project to create colorful cervical cancer education, in repeat and using scientific diagrams as inspiration.

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I often drew interlocking uterus and fallopian tubes that encircle a cluster of threatening red HPV virus molecules. A background of healthy cells surround the uterus and cervix and transform to cancerous cells around the virus. A slogan in French bars the entry of HPV from each cervix; *Je me soigne, je me protégé, je me vaccine*, "I care for myself, I protect myself, and I get vaccinated". After a focus group with our collaborators in Bamako, two new slogans were added: *Je me dépiste tôt pour éviter le cancer*, "I get screened early to prevent cancer", and *Banakoubè kafisa ni bana foura kèyé*, "it is better to prevent than cure". This proverb in Bambara was suggested by the 94-year-old village chief of Sikoro, the neighborhood on the outskirts of Bamako, where GAIA's clinic has supported successful mother-to-child HIV transmission prevention for the past ten years.

Designing the fabric with the input of scientists, local health practitioners, and female patients at the clinic was the easy part. Currently, we are implementing a study to measure the effectiveness of our educational pattern on increasing cervical cancer screening rates. With the support of a Bill & Melinda Gates Foundation "Grand Challenge Exploration" grant, our design has been printed at COMATEX and will be distributed to midwives and peer educators in one sector of Bamako. Our goal is to give women this visual tool to explain health issues to their peers, so they can understand and explain to others the importance of cervical cancer screening. With this pattern, we are leveraging a history of communicative textiles to get health education to go viral, not the deadly disease of cervical cancer.

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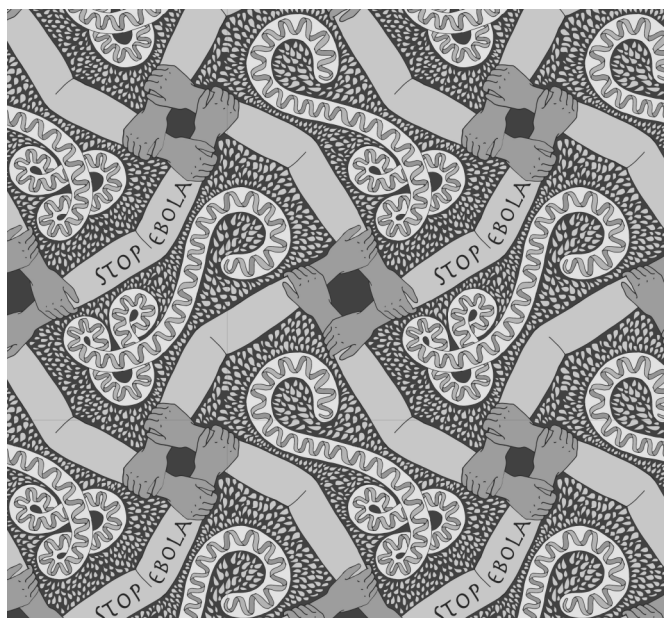
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Pattern designs for Ebola education are currently being field tested in Sierra Leone and Mali



(L to R) Mme Badiallo, Mme Rokia (Community leaders wearing the HPV story-telling cloth) M. Guidé (clinic president), Anne De Groot (GAIA Founder), M. Diarra (Sikoro Village Chief), Eliza Squibb (GAIA Director) and Mme Diaby (Community leader wearing the March 8th Int'l women's day cloth)

Groupe de Recherche et d'Action sur le Foncier



Les femmes à qui ont remettait les Attestations de Possession Foncière Rurale. A gauche, au fond: Nana Cathérine, membre du conseil d'administration en charge du genre ; Mme Serme, (en foulard) Secrétaire du GRAF; Ibrahima KA, et Saydou Koudougou, Secrétaire Exécutif du GRAF en boubou à droite.

A travers ces quelques lignes, nous aimerions remercier très vivement le West African Research Center (WARC) pour avoir participé dans le financement de notre séjour au Groupe de Recherche et d'Action sur le Foncier (GRAF) à Ouagadougou du 1^{er} octobre 2014 au 30 janvier 2015. Sans cette bourse, nous n'aurions jamais pu réaliser les activités suivantes :

Recherches documentaires

Notre séjour au GRAF nous a permis de vivre de près le foncier burkinabè. Nous avons accédé à différentes ressources documentaires. La bibliothèque du GRAF a été mise à notre disposition. Nous y avons trouvé une mine d'informations sur les travaux préparatoires à la politique nationale de sécurisation foncière en milieu rural et à la loi relative au foncier rural. Le GRAF, faut-il le rappeler, a été au cœur de tous les processus en lien avec le foncier au Burkina Faso. A travers les nombreux experts qui ont formé cette association en 2002, le GRAF a pu se positionner comme une structure crédible de recherche en matière de foncier rural.

Peaufinage de la thèse

Nous avons profité du séjour pour hiberner dans la bibliothèque. Ce qui nous a permis de retravailler notre problématique, notre angle d'analyse et notre plan de travail.

Recherches auprès des structures pertinentes

Après avoir capitalisé fortement sur les mécanismes de sécurisation foncière au travers de la rénovation du foncier rural (2002-2012), nous avons entrepris de faire du terrain en identifiant et abordant les structures pertinentes qui travaillent sur le foncier.

Nous avons été donc à

- la Direction Générale du Foncier et de l'Organisation du Monde Rural,
- l'Université de Ouagadougou,
- la Confédération paysanne du Faso,
- la Représentation du Pôle de Croissance de Bagré,
- le GRET,
- l'Association pour la Promotion de l'Elevage en Sahel et en Savane,
- la Direction de l'UEMOA qui travaille sur l'implantation d'un Observatoire Régional sur le Foncier Rural en Afrique de l'Ouest,
- le Laboratoire Citoyenneté,
- l'Observatoire National du Foncier du Burkina Faso,
- le Millénium Challenge Account.

Nous avons rencontré beaucoup d'experts avec lesquels nous nous sommes entretenus sur les problématiques en lien avec le foncier rural.

Détours dans le monde rural burkinabè

Le séjour au GRAF a été aussi pour nous l'occasion de vivre de près le foncier rural du Burkina Faso. Nous avons été dans la commune rurale de Cassou située dans le Ziro et dans la commune rurale de Padéma située dans le Houet.

Dans le premier cas, nous avons assisté le GRAF dans la finalisation du projet de sécurisation foncière rurale des femmes des villages de Panasian et Nassien dans la commune rurale de Cassou. Nous avons aussi accompagné la structure dans la délivrance des Attestations de Possession Foncière Rurale (APFR).

Dans le second cas, nous avons assisté le GRAF dans les

Continued on next page

réunions préparatoires au Projet d'appui au renforcement des capacités en plaidoyer et interpellation citoyenne pour l'amélioration de la gouvernance foncière dans les communes rurales de Cassou et de Padéma. Cela nous a permis de voir de plus près les enjeux de la sécurisation foncière agricole et pastorale dans l'Ouest du Burkina Faso.

Séjour au Laboratoire d'Etudes et de Recherches sur les Dynamiques sociales et le Développement Local de Niamey au Niger

Dans le cadre de notre séjour à Ouagadougou, nous avons voulu profiter de la position géographique pour visiter quelques structures pertinentes dans la sous-région. C'est ainsi que nous avons été au LASDEL de Niamey du 11 au 16 janvier 2015. Ce séjour nous a permis d'accéder aux ressources documentaires pertinentes de cette institution de recherche. Le 16 janvier 2015, nous avons animé un séminaire doctoral devant les chercheurs et les doctorants du LASDEL en présence du Pr Jean-Pierre Olivier de Saradan.

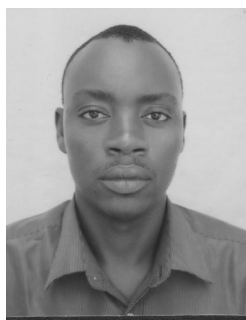


A Niamey: (de gauche à droite) Dr Mahaman Moha, Ibrahim Ka, Jean-Pierre Olivier de Saradan, Abdou El Hadji Dagobi.

Cette présentation a été suivie de discussions très utiles dans le cadre de la poursuite de la thèse. Beaucoup de recommandations nous ont été faites y compris sur la nécessité de faire du terrain afin d'avoir une idée beaucoup plus raisonnée de la réalité. Aussi en tant qu'anthropologues, ils m'ont donné des références ainsi que certaines exigences scientifiques à ne pas négliger dans le cadre de ce travail.

Résultats

En termes de résultats, ce séjour nous a permis de procéder à la rédaction du draft de la première partie. Nous l'avons fini à hauteur de 90%. Aussi dans le cadre de ce séjour, nous avons pu accéder à une documentation très pratique issue des travaux de terrain ou de cadres de réflexion locaux sur le foncier rural du Burkina Faso.



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ACPR

African Conflict and Peacebuilding Review



Editor in Chief
Abu Bakarr Bah

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The Arts and Peacebuilding
Special issue guest edited by Olivier Urbain and Lindsay McClain Opiyo

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Buhari Wins Nigerian Presidential Election: If you don't first succeed....

Steve Howard, Ohio University

Since the restoration of democracy in Nigeria in 1999, Muhammadu Buhari, who had served as Nigeria's military ruler from 1983-1985, has lost every election to the PDP winner in all contests except the first one. His fourth attempt at being elected to the presidency of Africa's largest country was a resounding success in the delayed elections held at the end of March. What follows is a transcript of an interview with Nigerian political scientist, Dr. Kole Shettima, who heads the Africa office of the MacArthur Foundation in Abuja. Originally from Yobe State and with an undergraduate degree from the University of Maiduguri, Shettima has been an astute observer of the entire Nigerian political scene for decades. He was interviewed while on a brief visit to Athens, Ohio after the elections.

SH: Mallam, tell me what happened in this election. Was this a complete repudiation of Jonathan or an enthusiastic endorsement of Buhari?

KS: I think it could be a combination of both in that President Goodluck Jonathan was one of the Nigeria's most fortunate presidents, given the resources he was able to get during his six years of administration with the price of oil going up as far as \$120 and \$130 per barrel. He also brought his own experience as someone who comes from a less privileged background, and also as an ethnic minority from the Niger Delta—the region that has produced the oil resources for the country. Sadly the recent elections were more like a referendum on his administration. The opposition harped on three key Jonathan problems: national insecurity, corruption, and of course the problem of high levels of youth unemployment.

So the Jonathan campaign was all about the future and having to avoid discussing his dismal record?

Yes. Jonathan and his surrogates were talking about more of what they want to do, what they plan to do in the next four years rather than their six year record.

Were they embarrassed at the lack of having done anything?

Of course the joke among Nigerians was that the President's wife, Mrs. Patience Jonathan, said that if somebody fails an exam he should be allowed to repeat that exam. But Nigerians were not willing to give him another chance since he had not accomplished much in his six years as President. The opposition kept pushing the issues around insecurity, around corruption, around unemployment, and the embarrassment of having lost about 22 local government councils, a land mass the size of Belgium, to Boko Haram. The security issues in the northeast and the attacks in Abuja and Lagos have had a severe impact on investment, not to mention the lives lost. Jonathan even said things about corruption that shocked people.

What do you mean by that?

Well, he said in a television interview that there was a difference between corruption and stealing, which left people scratching their heads.

Which is better?

I wouldn't ask him that question, Shiekh. I think that Nigerians were astonished that you could make that distinction on national television saying that "oh, you know Nigerians are confusing corruption and stealing".

Did he mean that one of them was okay?

It seems that way. I think that on the question of his government's corruption, there were millions of *naira* misappropriated. And again, the issues of youth unemployment, which is seen as one of the structural causes of violence especially in the North East; the challenges we see in the Niger Delta and among the militants; the communal conflict that was happening the middle belt—there are many pockets of ongoing violence in the country. And there was really no effective strategy to address the structural causes of some of the violence, especially around youth unemployment.

So what was Buhari's strategy to win the presidency?

I think that the most important strategy was first of all to bring about the merger of the opposition political parties. Buhari had attempted three times [in 2003, 2007, 2011] but he failed—primarily because his support base was almost entirely in the northern part of the country.

In the 2011 election, he lost to Jonathan?

Yeah, in the last election he lost to Jonathan. He didn't have the political structure and the sophistication that was required for him to win an election from a very dominant political party which had led the political scene since 1999, and which had promised to rule for the next 60 years. So I think that the first strategy was a merger whereby the two main opposition parties came together and other splinter groups also came together. But also I think that part of it was the fact that a number of PDP governors also defected from the ruling party to become part of the opposition, giving Buhari new political machinery.

PDP governors changed their party while in office?

Yes they did; about five of them moved to the opposition party. So that gave them the political base they needed to get the resources required to fight the election, but also I think that the political sophistication that the merger brought together gave them the opportunity to organize very well, especially the support from the credible people who are primarily based in the South West. I think that really helped Buhari to get the votes that he could not get in previous presidential contests.

So how in the campaign did Jonathan and Buhari distinguish themselves in advertising in TV and so forth? What were the characteristics of the two campaigns? Jonathan was pushing for the future and was Buhari attacking the president? Was it that kind of thing?

One was that Jonathan is from a younger generation where as Buhari is much older. That Buhari is almost 70 years old, and no one wanted to return to his past poor human rights record when so many people were jailed during his regime. And that

he was alleged to have been a supporter of Sharia during that period when Sharia was being imposed in many northern states. Jonathan's campaign attacked Buhari's character and the human rights record of the Buhari people as those who should not be given the opportunity to rule again. Jonathan presented himself as this forward looking person of the younger generation, someone who had done a lot for young people and that therefore the young people should trust him. And that under his watch nobody has gone into exile in Nigeria. The Buhari campaign, on the other hand, kept harping on the corruption of the administration and Jonathan's inability to provide electricity despite all the money that has been spent, and about the insecurity in the country, the death and destruction caused by Boko Haram, the challenges that young people have faced. So I think that they were attacking the record of the administration. But in some places they also attacked the character of some people around the president. Of course social media was very very effectively used.

For example?

Both political parties had consultants from the Democratic Party in the US to advise them on the use of social media. And Twitter was very effective. Facebook and websites and text messages were effectively used by both political parties.

Jonathan was already famous on Facebook right?

Yes because he declared his 2011 election campaign on Facebook he was very effective with that. He also had a book about his Facebook experience. But this time around I think that the opposition really had an upper hand. They had control of Lagos, which is really the capital of social media in Nigeria, with a high percentage of Twitter traffic coming from there.

What do you think will happen in Buhari's administration? What is going to be his nature, his initiatives, what is he going to do to turn the country around? What is your prediction for the future under Buhari?

Well first of all my concern is really the question of management of expectations. There are a lot of people who believe that come May 29 with the transition, people's problems of unemployment, insecurity and everything will be over and that the Buhari of 1984 who gave orders in Lagos and everyone obeyed, will be the same under this democratic dispensation. But it is totally different now. Today every governor can do whatever he wants to do. Of course they can listen to the president but the president really doesn't have much control over what they do. And the reality that he is going to inherit an administration that he really doesn't have much experience with; this is a totally different situation than when he was a military leader. Moreover, the price of oil has basically collapsed from about \$120 to now hovering around \$60. Even just by simple mathematics you know that you have lost your income by more than 50%. And that has led to the collapse or at least the depreciation of the *naira* against the dollar, which is now above 20% depreciation. And then Boko Haram is not going to go away because Buhari is there. In fact they even attempted to kill him while he was in Kaduna sometime last year. The economy is not going to significantly change just as a result of his coming in to office. But despite all those challenges and limitations, my sense is that a former military leader probably is in a much better position to fight Boko Haram than Jonathan was. Jonathan did not have a military sense and did

not know these issues, so his effort to control Boko Haram was severely limited.

So Buhari has the natural respect of the Army?

Yes, one reason is just because when he was a Head of State, probably many soldiers had not been to school anyway. So I think that he has that hierarchical knowledge and that hierarchy and other things in the military I think will be in his favor because they respect his leadership. Probably he knows this issue more than the soldiers. And if you remember also during his time when he was the General Commanding Officer (GCO) of the Third Brigade in Jos, he led the troops in order to quell rebellions in the North East. Secondly when the Chadian rebels attacked Nigeria, he was the one who led the troops to check the attack and he succeeded in getting them out of Nigeria at the time, several years ago. So he has a record of experience and knowledge and of course you remember also, he was the Governor of North Eastern region which became in part, Borno State. He is familiar with the terrain where Boko Haram now terrifies the northeast region.

What is your sense of how the region of West Africa will respond to the Buhari administration?

My hope is that the Buhari administration will be able to bring together the West African countries. In that Buhari is a Katsinaman I anticipate smooth relations with the Niger Republic. And probably he will have more cordial relations with Chad and its military rulers as well as with the Cameroonians than President Jonathan. I hope to see more personal relationships with West African leaders, not just the formalities of the Jonathan years. One thing that am not quite sure about is whether, given Buhari's Nationalist orientation especially when he was a Military Head of State, that will affect the operations of the Multinational Joint Task Force. Because he has been a Military leader, he has always said "Look, Nigeria has the capacity to deal with this problem". So I don't know whether will have a negative effect on the relationship in terms of how you bring together the other West African countries. But he will need to understand that the Nigerian military of today is not the same as it was 30 years ago; he may not be aware of all the damage that has been done to the military.

In terms of the economy, he will probably be able to deal with it better than Jonathan did. I think that he can probably send the right signal that this is an administration that will be able to come together and fight against corruption, which will help fix the economy. Of course there are challenges that I think we should anticipate. I think the fight against corruption will not be as easy as when he was a military leader. In 1984, he could give orders and people had to obey. In the civilian context you also have to worry about his human rights record and that he not be accused of being a military dictator. He also instituted mandatory community clean up campaigns, and had those misbehaving "frog walking" around their town squares. The fact that many people who campaigned for him, who raised resources for his campaign and others will not be immune to media scrutiny and allegations of corruption means that, his own political friends and others might also be implicated if he genuinely and seriously thinks about fighting against corruption. I think that in realizing those challenges, he has tried to say that we will draw a line in that under my own watch the wastage, the corruption that happened under the Jonathan administration will be reduced.

The Whitney Plantation Slavery Museum (Louisiana)

WHITNEY PLANTATION



The Whitney Plantation is located on the west bank of the Mississippi River, on the historic River Road in St. John the Baptist Parish, less than an hour west of New Orleans. Ambroise Heidel (1702-ca. 1770), the founder of this plantation, emigrated from Germany to Louisiana with his mother and siblings in 1721. He became a modest farmer, beginning his farm with a single pig for livestock. In 1752, Ambroise Heidel bought the original tract of land of this plantation and became wealthy in planting indigo. His son, Jean Jacques Haydel Sr., transitioned the plantation from indigo to sugar in the early nineteenth century. The Haydel family continued to operate the plantation until the death in 1860 of Marie Azélie Haydel, the daughter-in-law of Jean Jacques Haydel Sr. Her heirs sold the property in 1867 to Bradish Johnson of New York, who named the property after his grandson, Harry Whitney, a writer and Arctic explorer. Ownership of the land shifted many times and over time the property fell into disrepair. In 1990, The Formosa Chemical Corporation bought the property with the intention of building the world's largest rayon factory on the site. But the rayon business underwent depression and the property was sold to the Cummings Family of New Orleans.

Whitney Plantation is significant because of the number of its historic outbuildings, which were added to the site over the years thus providing a unique perspective on the evolution of the Louisiana working plantation. This is something that is impossible to find anywhere else on the river road since very few plantations preserve their early outbuildings.

The Big House is one of the earliest and best-preserved Creole plantation houses standing on the River Road and also one of the very few historic American houses known to have received decorative wall and ceiling paintings on both its exterior and its interior. The Big House was the domain of the domestic slaves who performed several duties such as cleaning, serving food and drinks, fanning the masters while they ate, toting water

from ponds and outdoors cisterns or even from the river for domestic needs, washing and ironing clothes, taking care of all the needs of the children, etc. The male slaves also performed miscellaneous duties such as gardening, raising poultry, and driving the family around in carriages, and so on. The female slaves also served as cooks, spinners, weavers, seamstresses, and midwives.



The Wall of Honor is a memorial dedicated to all of the people who were enslaved on the Whitney plantation.

Young slaves would always be handy for the needs of each member of the master's family during daytime and at night they slept on pallets near the beds of their owners or in adjoining rooms. According to the 1819 inventory of the Haydel plantation following the death of his wife Marie Madeleine Bozonier Marmillon, the five surviving children of Jean Jacques Haydel Sr. were previously granted each a young female slave for their personal needs. Augustine, Marinette, Fanchonnette, Henriette, and Angelique

were respectively donated to Jean Jacques Haydel Jr., Jean François Marcellin Haydel, Adelaide Haydel, Erasie Haydel, and Marguerite Aymée Haydel.

The kitchen was an annex of the Big House. According to Jay Edwards, a historian of architecture at Louisiana State University, this is the oldest detached kitchen in Louisiana. Marie Joseph, 50 years old and Marie, 43 years old, each identified as a "Creole Nègresse" in the 1819 inventory of the Haydel plantation, were the two cooks for the Haydel family at that time. As Creoles born in Louisiana, they would have used Creole recipes such as gumbo, jambalaya, crawfish étouffé and smothered okra, which they concocted from African, European, and Native American foodways. Cooks were always chosen for their skills and for their trustworthiness. After the death of his father, Jean Jacques Haydel Jr. emancipated Marie Joseph along with Claire, who served as a seamstress. Before the Civil War, the Whitney Plantation counted 22 slave cabins on its site. Twenty of these cabins housed the field hands.



Slave cabins on the Whitney Plantation

The Whitney plantation gives a voice and respect to the slaves who lived, worked and died there through memorial artwork and an indoor museum exhibit on the Atlantic slave trade and slavery in Louisiana.

The Wall of Honor is a memorial dedicated to all of the people who were enslaved on the Whitney plantation. The names and the basic information related to them (origin, age, skills, etc.) were retrieved from original archives and engraved on granite slabs. Allées Gwendolyn Midlo Hall is the name of another memorial dedicated to all the slaves who lived in Louisiana. It is named after Gwendolyn Midlo Hall, author of *Africans in Colonial Louisiana* (1992), in recognition of her contribution to the history of slavery in the Americas. All the names (107,000) recorded in this author's Louisiana Slave Database were engraved on 216 granite slabs mounted on 18 walls, along with slavery-related pictures and quotes. At one end of this memorial stands a modern sculpture depicting a West African pirogue of the type used to carry trade goods and captives in West Africa from internal waterways to seagoing vessels. This piece of art was built from stainless steel by Ed Wilson of Houston, Texas.

The Field of Angels is a memorial dedicated to 2,200 Louisiana slave children who died in St. John the Baptist Parish at an average age of three years. Their names were collected from the Sacramental Records of the Archdiocese of New Orleans and engraved on granite slabs along with pictures and quotes describing their everyday life. A black angel carrying a baby to Heaven is built in the middle of the field. Rod Moorhead of Mississippi made this bronze sculpture.

The most striking encounters on the plantation are the Children of Whitney. These are statues of slave children built with clay by Woodrow Nash, an African-American artist based in Akron, Ohio. These pieces look so frighteningly real and they constantly remind people that it wasn't just adults that lived, worked and died on plantations.

A fourth memorial is currently under construction on Whitney

and will feature the 1811 Slave Revolt, the largest slave revolt in the US South. Many were killed in the action or were reported missing. Dozens of slaves were condemned to death and executed in front of the plantations to which they belonged. Then they were beheaded and the heads were planted on poles and exposed to the view of their fellows. The Whitney Museum has commissioned Woodrow Nash to create 63 ceramic heads that will be mounted on steel rods along a pond designed to resemble a meander of the Mississippi River.

John Cummings, the founder of the Whitney Plantation Museum, wanted to ensure that the site would give a voice to those whose stories were not being told and were at risk of being lost. The Whitney Plantation is the only plantation museum in the USA exclusively dedicated to understanding the facts of slavery. During the 90-minute walking tour, visitors are given a unique perspective on the lives of the enslaved people on a Louisiana sugar plantation, learning their histories through the oral narratives recorded by the Federal Writers' Project during the Depression.

The Whitney Plantation opened to the public on December 8, 2014, and is now open for guided tours. For further information, visit the Whitney Plantation website at

www.whitneyplantation.com



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Announcements

SPRING 2015 WARC Travel Grantees

Dr. Ikpefan Emmanuel

Faculty of Pharmacy, Delta State University (Nigeria)
For research at the University of Ghana
"Isolation and Characterization of the anticancer active constituents from some Nigerian plants"

Mrs. Afolayan Gloria

West African Centre for Crop Improvement (WACCI),
University of Ghana, Legon, Accra, Ghana
National Centre for Genetics and Biotechnology, Ibadan
For research in Burkina Faso and Nigeria
Introgression of QTLs for Striga Resistance into Sorghum Varieties Adapted in Nigeria through Marker Assisted Backcrossing

Mr. David Olubiyi Obada

Department of Mechanical Engineering
Ahmadu Bello University (Doctoral student)
For research in Ghana
"Development of Porous Ceramic Honeycomb from Kaolinite Clay for Automobile Exhaust System"

Mr. Adewole Kayode

Department of Biochemistry, University of Ilorin
For research in Ghana at the Kintampo Health Research Centre in the Brong Ahafo Region.
"In Vitro and In Vivo Antimalarial Studies on Isolated Cysteine-Rich Peptides of Morinda Lucida Leaf"



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RAIN forges partnerships with underserved rural and nomadic desert peoples of West Africa to realize their ambitions for education and enduring livelihoods.

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