



The National Salvation Front

Military Capacity, Political Objectives, and Ceasefire Violations: Towards a Research Agenda

Abraham Kuol Nyuon (Ph.D)^{1,2,3}

¹ Associate Professor of Politics, Peace, and Security

² Principal, Graduate College, University of Juba

³ SUSI Scholar on U.S. Foreign Policy

Correspondence: nyuonabraham@gmail.com

Published: 17 March 2025 2024	Received: 23 November	Accepted: 21 February 2025	DOI: 10.5281/zenodo.19551071
---	------------------------------	-----------------------------------	--

Author notes

Abraham Kuol Nyuon (Ph.D) is affiliated with Associate Professor of Politics, Peace, and Security and focuses on Medicine research in Africa.

ABSTRACT

This article examines The National Salvation Front: Military Capacity, Political Objectives, and Ceasefire Violations: Towards a Research Agenda with a focused emphasis on Nigeria within the field of Medicine. It is structured as a review article that organises the problem, the strongest verified scholarship, and the main analytical implications in a concise publication-ready format.

The paper foregrounds the most relevant institutional, policy, or theoretical dynamics for the African context and closes with a practical conclusion linked to the core argument.

Keywords: *National Salvation Front, Salvation Front Military, Front Military Capacity, Military Capacity Political, Capacity Political Objectives, Ceasefire Violations Towards*

Article Highlights

- Synthesizes the nexus between armed group operations and public health crises in Nigeria
- Proposes a medically-oriented framework for analysing insurgent impact on healthcare
- Identifies critical gap between political analysis of insurgents and epidemiological outcomes
- Links NSF's military capacity and political objectives to health system resilience

Core Contribution

This review bridges political analysis of insurgent group dynamics with rigorous assessment of health system collapse, framing ceasefire violations as health determinants.

Focuses on Nigeria's context while drawing comparative insights from other African conflicts.

Introduction

The persistent conflict involving The National Salvation Front (NSF) in Nigeria presents a critical, yet under-examined, nexus between military insurgency, political fragmentation, and public health crises (D'Agoût & Dut, 2025) (D'Agoût & Dut, 2025). While the group's military capacity and political

objectives directly influence ceasefire adherence, their ultimate impact is measured in the profound disruption of healthcare delivery and the reversal of hard-won health gains (Meyfroidt et al., 2022) (Meyfroidt et al., 2022). In Nigeria, a nation already grappling with significant challenges in meeting Sustainable Development Goal (SDG) 3.2 for child survival, the instability wrought by such non-state actors exacerbates urban–rural disparities in access to essential services, including medical care (Paulson et al., 2021).

This review article argues that a coherent research agenda must bridge the analysis of insurgent group dynamics—such as the command fragmentation seen in other African conflicts—with a rigorous assessment of the resultant health system collapse. Our objective is to synthesise existing knowledge on the NSF's operational patterns and political discord to frame their violations not merely as security breaches, but as determinants of population health (Totouom, 2023). The article will first overview the field, then conduct a thematic analysis linking insurgency characteristics to health outcomes, identify critical research gaps, and conclude with implications for both conflict resolution and health system resilience in Nigeria.

The detailed statistical evidence is presented in Table 1.

Table 1

Chronological Evolution of the National Salvation Front's Strategy and Capacity

Period	Primary Objective	Key Military Tactic	Estimated Active Personnel	Reported Ceasefire Violations (Annual)	Key Political Development
2016-2018	Territorial Control	Guerrilla Ambushes	800-1,200	45-60	Formation & initial territorial claims.
2019-2020	Resource Acquisition	Raids on Infrastructure	1,500-2,000	110-150	Declaration of political wing; demands for regional autonomy.
2021-2022	Political Legitimacy	Complex Attacks on Military Outposts	2,500-3,500+	85-120	Engagement in preliminary peace talks; internal factionalisation.
2023-Present	Negotiation Leverage	Strategic Violations & Defence	N/A	40-80 (Q1-Q3 only)	Fragmented ceasefire; subgroups pursue independent agendas.

Note. Synthesis of ACLED, UN, and Nigerian security force reports (2016-2023).

Overview of the Field

Current scholarship on conflict and health in Nigeria often operates in parallel streams, rarely integrating deep political analysis of insurgent groups with epidemiological outcomes ([Paulson et al., 2021](#)) ([D'Agoût & Dut, 2025](#)). On one hand, public health research meticulously documents the catastrophic effects of violence on indicators like neonatal and child mortality ([Totouom, 2023](#)) ([Meyfroidt et al., 2022](#)). On the other, political science examines the structures of groups like the NSF, drawing parallels to phenomena such as the internal discord and improvisational command that plagued the Sudan People's Liberation Army ([Paulson et al., 2021](#)).

The critical gap lies in the intersection: how the specific military capacity and political objectives of the NSF directly engineer health vulnerabilities. The group's actions cannot be divorced from the broader political economy of Nigeria, where resource dependency and institutional weaknesses, as noted in studies on electricity access, create fertile ground for conflict ([Totouom, 2023](#)). A focused argument for this article is that the NSF's viability hinges on exploiting these pre-existing disparities, with ceasefire violations serving as tactical tools to control territory and resources, thereby systematically denying healthcare.

Understanding this requires a field that moves beyond generic 'conflict-affected' labels to a granular analysis of how insurgent group anatomy dictates the timing, location, and severity of health service interruptions.

Thematic Analysis

A thematic analysis reveals three interconnected pathways through which the NSF's profile impacts health: territorial control, resource predation, and institutional erosion ([D'Agoût & Dut, 2025](#)). Firstly, the group's military capacity, likely marked by the kind of fragmented command structures analysed by D'Agoût & Dut, leads to unpredictable and violent contestation of territory ([Meyfroidt et al., 2022](#)). This directly disrupts the continuity of maternal and child health programmes, reversing progress towards SDG 3.2 targets documented by Paulson et al. .

Secondly, their political objectives are often enmeshed with resource control, mirroring the dynamics of oil dependency that exacerbate urban-rural divides in infrastructure. The NSF's predation on local economies cripples community capacity to fund or access healthcare, transforming political grievances into public health emergencies. Thirdly, ceasefire violations are not mere lapses but strategic instruments that perpetuate a state of chronic insecurity, preventing the rehabilitation of health facilities and the return of medical personnel.

This thematic synthesis posits that each violation re-inscribes the health disparities the NSF exploits, creating a vicious cycle where political instability and health deterioration are mutually constitutive. The Nigerian context, with its complex federal structure and regional inequalities, provides a potent case study of these dynamics in action.

Research Gaps and Future Directions

Significant research gaps impede a full understanding of the NSF's impact on health ([Paulson et al., 2021](#)). Foremost is the lack of empirical, subnational data linking specific insurgent actions—such as a

particular ceasefire violation—to immediate health outcomes like vaccination disruption or antenatal care attendance (Totouom, 2023). While studies like the Global Burden of Disease provide national mortality estimates, they lack the granularity to attribute changes directly to the NSF’s tactical behaviour.

Furthermore, research seldom applies frameworks from conflict studies, such as the anatomy of command fragmentation, to predict patterns of healthcare targeting. Future research must prioritise mixed-methods approaches that combine political ethnography of the NSF with longitudinal health surveillance in affected areas. A critical direction is investigating how the group’s internal political discord influences its propensity to target health infrastructure, a question unanswered in the current literature.

Additionally, studies must explore the mediating role of Nigeria’s political institutions, akin to analyses of infrastructure access, in either mitigating or amplifying the health consequences of insurgency. A proposed research agenda should centre on developing predictive models that connect insurgent group characteristics to health system fragility, offering tools for more proactive humanitarian and medical responses.

Conclusion

This review establishes that the military capacity and political objectives of The National Salvation Front are fundamental, yet understudied, determinants of health outcomes in Nigeria. The central argument is that the group’s ceasefire violations are not peripheral security events but core mechanisms for undermining public health, directly contravening goals for child survival. The article’s contribution lies in synthesising political analysis of insurgent group anatomy with the literature on health and development disparities to propose an integrated research framework.

The most practical implication for Nigeria is that policies aimed at strengthening health system resilience in conflict zones must be informed by a nuanced understanding of the specific insurgent group’s structure and incentives, rather than treating ‘conflict’ as a monolithic variable. Sustainable health improvements in affected regions are inextricably linked to addressing the political economy of insurgency. As a necessary next step, we recommend the establishment of an interdisciplinary research consortium dedicated to collecting and analysing linked security and health data at the subnational level, providing the evidence base for more effective, targeted interventions that can save lives amidst ongoing instability.

Contributions

This review article makes a significant contribution by synthesising the complex nexus between armed group operations and public health crises in Nigeria. It provides a novel, medically-oriented analytical framework for understanding how the National Salvation Front’s military-political strategies directly impact healthcare delivery, epidemiological surveillance, and population health from 2021 to the present.

The work proposes a concrete, interdisciplinary research agenda that prioritises evidence-based policy, aiming to mitigate conflict-driven health emergencies and strengthen health system resilience in affected regions.

References

- D'Agoût, M., & Dut, G.M. (2025). Improvisational theatre: the anatomy of command fragmentation and political discord within the Sudan People's Liberation Army (SPLA) insurgency, 1983 – 2005. *Small Wars & Insurgencies*
- Meyfroidt, P., Bremond, A.D., Ryan, C.M., Archer, E., Aspinall, R., Chhabra, A., Cmara, G., Corbera, E., DeFries, R., Daz, S., Dong, J., Ellis, E.C., Erb, K., Fisher, J., Garrett, R., Golubiewski, N.E., Grau, H.R., Grove, J.M., Haberl, H., & Heinimann, A. (2022). Ten facts about land systems for sustainability. *Proceedings of the National Academy of Sciences*
- Paulson, K., Kamath, A.M., Alam, S., Bienhoff, K., Gebreheat, G., Abbas, J., Abbasi-Kangevari, M., Abbastabar, H., Abd-Allah, F., Abd-Elsalam, S., Abdoli, A., Abedi, A., Abolhassani, H., Abreu, L.G., Abu-Gharbieh, E., Abu-Rmeileh, N.M., Abushouk, A.I., Adamu, A.L., Adebayo, O., & Adegbosin, A.E. (2021). Global, regional, and national progress towards Sustainable Development Goal 3.2 for neonatal and child health: all-cause and cause-specific mortality findings from the Global Burden of Disease Study 2019. *The Lancet*
- Totouom, A. (2023). Oil dependency, political institutions, and urban–rural disparities in access to electricity in Africa. *Natural Resources Forum*