

Distr.: General 12 December 2022

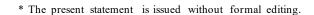
Original: English

Commission on the Status of Women Sixty-seventh session 6–17 March 2023 Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly entitled "Women 2000: gender equality, development and peace for the twenty-first century"

# Statement submitted by Equal Rights for Persons with Disabilities International, a non-governmental organization in consultative status with the Economic and Social Council\*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

Please recycle





## Statement

# SOCIETAL CHALLENGES & POST TRAUMATIC STRESS DISORDER: THE NIGERIAN STORY

#### \*Introduction\*

In the past few years, all the six (6) geopolitical regions of the country have experienced one form of human initiated disorder or the other. For instance, between 2013 till date the social challenges bedeviling these regions of the country are as follows:

- a. North East Boko haram and insecurity
- b. North West Banditry and kidnapping
- c. North Central Terrorism, ethno-religious crisis and banditry
- d. South East Insecurity (unknown gun men), kidnapping and terrorism
- e. South South Militancy, kidnapping, rape and insecurity
- f. South West Insecurity, Terrorism

These vices among other challenges such as armed robbery, rape, among others have bedeviled residents of these areas. Since the upsurge of the Boko Haram terrorism in 2009, the North-Eastern region which Adamawa, Borno and Yobe States belong has continued to witness incessant hostility and violent confrontations by the terrorists, causing a large scale death and displacement of people. Other regions of the have also had their own fair share of these challenges as enumerated above.

The Almajiris in the Northern Parts of Nigeria were neglected by their parents and sent to an Iman who in return send them out to the streets to beg for alms. They started going through traumas from childhood. They lacked formal education, never learned a skill and end up wasting their childhood teenagehood on the streets.

This singular act exposes an average Almajiri to the ills and dangers of parabuating without focus. And they definitely end up suffering from its psychological late effect called Post Traumatic Stress Disorder (PTSD)

Every victim of Boko Haram Terrorism and bandits, which includes the entire Internationally Displaced Persons (IDP) were traumatized and suffers from its late effects called Post Traumatic Stress Disorder (PTSD) throughout the rest of their lives. Quite sad.

The Government on the other hand, makes "no adequate plan/proper execution to recognize and treat Post Traumatic Stress Disorder. The victim in most cases definitely becomes burdens or serious problems to their society at large.

Over 80% of Boko Haram Terrorist and Bandits were former Almajiris. They get recruited into the group mostly out of frustration, religious and cultural factors.

It is imperative to note that victims of Post Traumatic Stress Disorder are all Security risks.

Post Traumatic Stress Disorder is a mental illness and therefore all victims are persons with Disabilities.

Per the aforementioned, there is an urgent need for the Federal Republic of Nigeria to establish an independent, implementation Commission for the Nigerians with Disabilities Act signed into law by President Muhammadu Buhari on January 17, 2019. This will open doors for more organized and coordinated settings for use in engaging

victims into (1) Treatments, (2) Psycho Therapy, (3) Rehabilitation, (4) Job training and placements, (5) formal Education etc...

These will help to start addressing insurgencies, kidnappings, disputes, and violence in Nigeria

Survivors and victims of these human-initiated disasters often times become vulnerable to high risk for mental disorder, most notably post-traumatic stress disorder (PTSD).

Posttraumatic stress disorder (PTSD) is frequently reported among individuals who experience armed conflict related stressful events. This disorder is characterized by symptoms of re-experiencing, avoidance and increased arousal following exposure to a stressful event that threatens life or physical integrity to self or others. If left untreated, the condition may become chronic with a huge health care costs and economic losses.

Furthermore, because these persons continue to live around these areas where they initially had these traumatic experiences, the aftermath of this is that their anxiety and trauma gradually snowballs into mental disorder, particularly PTSD. This presentation therefore seeks to highlight the nexus between these social challenges and PTSD.

#### \*Post Traumatic Stress Disorder (PTSD)\*

This is a condition of persistent mental and emotional stress resulting from injury or severe psychological shock leading to disturbance of sleep and sanity. This condition is usually short -lived even without treatment, although in some cases may persist a bit longer. Symptoms of this disorder include absent mindedness, restlessness, insomnia, emotional pain, general feeling of unwellness, nightmare, loss of sanity amongst others.

In extreme cases, such individuals could also resort to crime and criminality, drug abuse, and some other social vices which could be discomforting to those around such persons.

#### \*Societal challenges and post traumatic stress disorder in Nigeria\*

Prominent among the many causative factors to which PTSD is attributable are the myriads of societal challenges bedeviling the country. As earlier posited, every region of the country has its own fair share of these challenges manifesting in different forms and magnitude. Heightening occurrence of these challenges could also have a corresponding effect on the mental state of victims and survivors alike. Many authors have also reported that anyone could be liable to this condition. For instance, studies on soldiers in the country who had a firsthand account of some of these incidents showed that there were as affected as the survivors and victims of these incidents.

In places like Jos-Plateau State, North central Nigeria, many residents who have witnessed the myriads of unwanton killings and other forms of ethno-religious crisis have over the years lived with insomnia because of fear-induced vigilance being that most of these incidents occurred at night. In the same vein, it is not uncommon to find students in certain parts of North Eastern Nigeria such as Chibok (Borno State) being absent minded during school hours while in extreme cases, some have even dropped out of school. The same is the case in most other parts of the country for instance the recent nonchalance for home return by indigents of South Eastern Nigeria, the apathy for railway travels on the North Western railway travel guage, heightened fear in South West and Niger Delta region of Nigeria (which in some cases have led to residents disserting their areas) could all be attributed as signs of PTSD. In addition, the idea of creating a place to cater for internally displaced persons (IDPs) and victims of these calamities in various parts of the country where they are needed also come with its attendant consequences.

This is because these persons are often described as poly-traumatized population because they experience both the direct impact which is due to violence and injury and the indirect impact during mass movement due to physical exhaustion, hunger and snake and other animals' attack. Their conditions are further compounded by a variety of post conflict hardships such as adaptation to new environment, overcrowding, physical and sexual abuses as well as infectious diseases with increased mortality among other vulnerabilities, which are also extremely traumatic.

### \*The Way Forward\*

Over the years, insufficient attention has been paid to social disorganization in situations of continuing unrest and to its role in creating or stabilizing the symptoms of PTSD. To ensure that this is adequately addressed, there is a need to do the following:

- 1. Acceptance of the reality of the existence of mental health disorder
- 2. Identification of Victims

3. Care for the victim should go beyond relief material but a proper care for mental health

- 4. Rehabilitation of victims which should go beyond pity
- 5. Avoid any form of discrimination of victims

6. Gradual socio-cultural re-integration of victims and survivors of these incidents

7. A well mapped out programme to encourage self-healing

8. Any form of accommodation for internally displaced persons (IDP) should be targeted at improving their living condition and dealing with the psychological consequences of psycho-trauma.